

2017 Application Form

- i** Please answer ALL questions. Please tick in the box where required, please use only blue or black ink.
Please ~~strike through~~ any mistakes, do not use correction fluid.
Please PRINT all answers and ensure it is clear and easy to read.

Course / Traineeship

Application Date: (the date this application is filled out) day course night course

Qualification/Course Code & Name:

Name

1. Enter your full name

- i** Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names. If you do not yet have a USI and want Diversitat to apply for a USI on your behalf, you must write your name, including middle names, exactly as written in the identity document you choose to use for this purpose.

Surname (Legal Family Name):

Title: (Mr, Mrs etc)

Given Names (Legal Given Names):

Preferred Name:

Date of Birth

2. Enter your birth date

Sex

3. Sex (tick one box only) Male Female

Contact Details

4. Enter your contact details

- i** You MUST provide at least one contact number

Home Phone: () Work Phone: ()

Mobile Phone: Email:

Usual Residence

5. What is the address location and postcode of the suburb in which you usually live?

- i** Please provide the physical address (street number and name not post office box) where you usually reside rather than any temporary address at which you reside for training, work or other purposes before returning to your home. If you are from a rural area use the address from your state's or territory's 'rural property addressing' or 'numbering' system as your residential address.

Building/Property Name:

Flat/Unit Number:

Street Number:

Street Name:

Suburb, Locality or Town:

State/Territory:

Postcode:

Postal address

6. What is your postal address (if different from above)?

Building/Property Name:

Flat/Unit Number:

Street Number:

Street Name:

PO box or roadside delivery box:

Suburb, Locality or Town:

State/Territory:

Postcode:

E-mail address:

Language and cultural diversity

7. In which country were you born?

Australia

Other

Please specify:

8. Do you speak a language other than English at home?

i If more than one language, indicate the one that is spoken most often.

No - English only **English only - go to Question 10**

Yes - Other (If more than one language is spoken at home please indicate below the one that is spoken most often):

9. How well do you speak English?

Very well

Well

Not well

Not at all

10. Are you of Aboriginal or Torres Strait Islander origin?

i For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes.

No

Yes, Aboriginal

Yes, Torres Strait Islander

Disability

11. Do you consider yourself to have a disability, impairment or long-term condition?

Yes

No **No - go to Question 13**

12. If Yes, please indicate the areas of disability, impairment or long-term condition:

i you may indicate more than one area.

Hearing/deaf

Physical

Intellectual

Learning

Mental illness

Acquired brain impairment

Vision

Medical condition

Other

Schooling

13. What is your highest COMPLETED school level? (Tick ONE box only.)

Completed Year 12

Completed Year 11

Completed Year 10

Completed Year 9 or equivalent

Completed Year 8 or Lower

Never attended school **Never attended school - go to Question 16**

14. In which YEAR did you complete that school level?

(e.g 2009)

15. Are you still attending secondary school?

Yes

No **No - go to Question 18**

Previous qualification achieved

16. Have you SUCCESSFULLY completed any of the following qualifications?

Yes

No **No - go to Question 18**

17. If Yes, please enter one of these Prior Education Achievement Recognition Identifiers any applicable qualification level. A - Australian, E - Australian equivalent, I - International

i If you have multiple Prior Education Achievement Recognition Identifiers for any one qualification, use the following priority order to determine which identifier to use: 1. A - Australian 2. E - Australian equivalent 3. I - International

Bachelor Degree or Higher Degree

Certificate III (or Trade Certificate)

Advanced Diploma or Associate Degree

Certificate II

Diploma (or Associate Diploma)

Certificate I

Certificate IV (or Advanced Certificate/Technician)

Certificates other than the above

Employment

18. Of the following categories, which BEST describes your current employment status?

(Tick ONE box only.)

- | | |
|---------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> Full-time employee | <input type="checkbox"/> Employed - unpaid worker in family business |
| <input type="checkbox"/> Part-time employee | <input type="checkbox"/> Unemployed - seeking full-time |
| <input type="checkbox"/> Self-employed - not employing others | <input type="checkbox"/> Unemployed - seeking part-time work |
| <input type="checkbox"/> Employer | <input type="checkbox"/> Not Employed - not seeking employment |

If never employed - go to Question 21

19. Which of the following classifications BEST describes your current or recent occupation?

(Tick ONE box only)

- | | |
|---------------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> 1 - Managers | <input type="checkbox"/> 6 - Sales Workers |
| <input type="checkbox"/> 2 - Professionals | <input type="checkbox"/> 7 - Machinery Operators and Drivers |
| <input type="checkbox"/> 3 - Technicians and Trade Workers | <input type="checkbox"/> 8 - Labourers |
| <input type="checkbox"/> 4 - Community and Personal Service Workers | <input type="checkbox"/> 9 - Other |
| <input type="checkbox"/> 5 - Clerical and Administrative Workers | |

20. Which of the following classifications BEST describes the Industry of your current or previous Employer?

- | | |
|-------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> A - Agriculture, Forestry and Fishing | <input type="checkbox"/> K - Financial and Insurance Services |
| <input type="checkbox"/> B - Mining | <input type="checkbox"/> L - Rental, Hiring and Real Estate Services |
| <input type="checkbox"/> C - Manufacturing | <input type="checkbox"/> M - Professional, Scientific and Technical Services |
| <input type="checkbox"/> D - Electricity, Gas, Water and Waste Services | <input type="checkbox"/> N - Administrative and Support Services |
| <input type="checkbox"/> E - Construction | <input type="checkbox"/> O - Public Administration and Safety |
| <input type="checkbox"/> F - Wholesale Trade | <input type="checkbox"/> P - Education and Training |
| <input type="checkbox"/> G - Retail Trade | <input type="checkbox"/> Q - Health Care and Social Assistance |
| <input type="checkbox"/> H - Accommodation and Food Services | <input type="checkbox"/> R - Arts and Recreation Services |
| <input type="checkbox"/> I - Transport, Postal and Warehousing | <input type="checkbox"/> S - Other Services |
| <input type="checkbox"/> J - Information Media and Telecommunications | |

Study reason

21. Of the following categories, which BEST describes your main reason for undertaking this program/ traineeship/apprenticeship? (Tick one box only)

- | | |
|-----------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> To get a job | <input type="checkbox"/> It was a requirement of my job |
| <input type="checkbox"/> To develop my existing business | <input type="checkbox"/> I wanted extra skills for my job |
| <input type="checkbox"/> To start my own business | <input type="checkbox"/> To get into another program of study |
| <input type="checkbox"/> To try for a different career | <input type="checkbox"/> For personal interest or self-development |
| <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> Other reasons |

Victorian Student Number

To be completed by all students aged up to 24 years:

Since 2009 in schools and since 2011 for vocational education and training (VET) organisations and Adult Community Education providers, a Victorian Student Number (VSN) has been allocated upon enrolment to each individual student aged up to 24 years. Students should report their VSN on all subsequent enrolments at a Victorian school or training organisation. In particular, all students who are currently enrolled in either a VET provider or a Victorian school (including those already participating in a VET in schools program) should obtain their VSN from their current education or training organisation and report their VSN on this enrolment form. Students who are enrolling for the first time since the VSN was introduced will get a new VSN.

22. Enter your Victorian Student Number (VSN)

(if known) If you provided your VSN - go to Question 23

Have you attended any Victorian school since 2009 or done any training with a vocational education and training (VET) registered training organisation or an Adult and Community Education provider in Victoria since 2011?

- No - I have not attended a Victorian school since 2009 or a TAFE or other VET training provider since the beginning of 2011.

No more questions if you answered No above - go to Question 23

Victorian Student Number - continued

Yes - I have attended a Victorian school since 2009

Most recent Victorian school attended:

and / or

Yes - I have participated in training at a TAFE or other training organisation since the beginning of 2011

List the most recent training organisations with which you have participated in training in Victoria since 2011

i List up to 3 training organisations.

Unique Student Number

From 1 January 2015, Diversitat can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your program if you do not have a Unique Student Identifier (USI). If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-USI/> on computer or mobile device.

23. Enter your Unique Student identifier (if you already have one)

23. What town/city of birth

Concession Information

24. Please indicate if you are a recipient of one of the following benefits (tick one box only).

- | | |
|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Z - None | <input type="checkbox"/> E - Young People Transitioning from Care covered by a current, relevant Concession Card |
| <input type="checkbox"/> G - VCE Scholarship | <input type="checkbox"/> X - Individuals required to undertake the program (course) pursuant to a community based order made under the Children Youth and Families Act 2005, or individuals held in the Judy Lazarus Transition Centre |
| <input type="checkbox"/> H - Health Care Card* | <input type="checkbox"/> Y - Fee Waiver for a student with a letter from the Department providing them with a Fee Exemption |
| <input type="checkbox"/> P - Pensioner Concession Card* | <input type="checkbox"/> O - Other (ie Indigenous Learners without a concession card) |
| <input type="checkbox"/> J - Job Seeker and Concession Card Holder | |
| <input type="checkbox"/> V - Veteran Gold Card* | |
| <input type="checkbox"/> K - Job Seeker not holding a relevant Concession Card | |
| <input type="checkbox"/> M - Prisoner | |
| <input type="checkbox"/> I - Young People Transitioning from Care not holding a relevant Concession Card | |

* These concessions also apply to a dependant spouse or dependant child of a card holder

Enrolling Officer to complete for holders of a Digital Concession Card

Yes - Digital card sighted:

Name of the authorised delegate:

Date sighted: Concession card document number:

Name of concession holder:

Referrals from other programs

25. Please indicate if you have been referred for training from any of the following programs (tick one box only).

- | | |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> No No - go to Question 26 | <input type="checkbox"/> Automotive Supply Chain Training Initiative |
| <input type="checkbox"/> Young People Transitioning from Care | <input type="checkbox"/> Young People on Community Based Orders |
| <input type="checkbox"/> Judy Lazarus Transitional Centre | <input type="checkbox"/> Asylum Seeker VET program |
| <input type="checkbox"/> Referred Job Seeker (ie Matchworks, Workskill, St Laurence) | <input type="checkbox"/> Retrenched employees |
| <input type="checkbox"/> Reconnect: Engagement and Learning Supports Grants Program | <input type="checkbox"/> Back to Work Scheme |

Eligibility exclusions

26. Please indicate if any of the following below apply to you (tick one box only).

No **No - go to Question 27**

Yes

You are a prisoner within the meaning of the Corrections Act 1986 who is held at one of the following custodial settings:

- Langi Kal Kal Prison
- Barwon Prison
- Beechworth Prison
- Dame Phyllis Frost Centre
- Dhurringile Prison
- Metropolitan Remand Centre
- Loddon Prison
- Marngoneet Correctional Centre
- Tarrengower Prison
- Hopkins Correctional Centre (Ararat)
- Melbourne Assessment Prison
- Fulham Correctional Centre
- Port Phillip Prison

You are a person who is detained under:

- The Mental Health Act 1986, or
- The Crimes (Mental Impairment and Unfitness to be Tried) Act 1997, or
- The Sentencing Act 1991 Act 1991 at the Thomas Embling Hospital

You are a person who is detained (other than weekend detention) under:

- The Children, Youth and Families Act 2005, or
- The Sentencing Act 1991, or
- You are held on remand in one of the following youth justice facilities - Malsbury Juvenile Justice Centre, Parkville Youth Residential Centre or Melbourne Youth Justice Centre.

These exclusions do not apply to young people on community based orders made under the Children, Youth and Families Act 2005, or individuals held in Judy Lazarus Transition Centre who may be eligible for funding as they are able to physically access training outside of a custodial setting without supervision.

Emergency contact

27. Please record an emergency contact person

Name:

Relationship: e.g Mother

Home Phone: () Work Phone: ()

Mobile Phone:

How did you hear about Diversitat Training?

28. Please tick more than one if applicable:

- | | | |
|---------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Geelong Advertiser | <input type="checkbox"/> Geelong Indy | <input type="checkbox"/> Armstrong Creek/Surfcoast Times |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Course Guide printed | <input type="checkbox"/> My employer |
| <input type="checkbox"/> Google search | <input type="checkbox"/> Diversitat Training website | <input type="checkbox"/> Email from Diversitat Training |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Text message | <input type="checkbox"/> Outdoor Signage |
| <input type="checkbox"/> Previous Student | <input type="checkbox"/> JobActive | <input type="checkbox"/> Diversitat Settlement Services |
| <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> School | <input type="checkbox"/> AMES |
| <input type="checkbox"/> Referral from Service Provider | <input type="checkbox"/> Other (please specify): | |

Victorian Government VET Student Enrolment Privacy Statement

The Victorian Government, through the Department of Education and Training (the Department), develops, monitors and funds vocational education and training (VET) in Victoria. The Victorian Government is committed to ensuring that Victorians have access to appropriate and relevant VET services. Any personal information collected by the Department for VET purposes is protected in accordance with the Privacy and Data Protection Act 2014 (Vic) and the Health Records Act 2001 (Vic).

Collection of your data

Diversitat Training is required to provide the Department with student and training activity data. This includes personal information collected in the Diversitat Training enrolment form and unique identifiers such as the Victorian Student Number (VSN) and the Commonwealth's Unique Student Identifier (USI).

Diversitat Training provides data to the Department in accordance with the Victorian VET Student Statistical Collection Guidelines, available at: <http://www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx>.

Disclosure of your data

As necessary and where lawful, the Department may disclose VET data, including personal information, to its contractors, other government agencies, professional bodies and/or other organisations for VET-related purposes. In particular, this includes disclosure of VET student and training data to the Commonwealth and the National Centre for Vocational Education Research (NCVER).

Use of your data

The Department uses student and training data, including personal information, for a range of VET purposes including administration, monitoring and planning.

A student's USI may be used for specific VET purposes including the verification of student data provided by Diversitat Training; the administration and audit of VET providers and programs; education-related policy and research purposes; and to assist in determining eligibility for training subsidies.

Legal and Regulatory

The Department's collection and handling of enrolment data and VSNs is authorised under the Education and Training Reform Act 2006 (Vic). The Department is also authorised to collect and handle USIs in accordance with the Student Identifiers Act 2014 (Cth) and the Student Identifiers Regulation 2014 (Cth).

Survey participation

You may be contacted to participate in a survey conducted by NCVER or a Department-endorsed project, audit or review relating to your training. This provides valuable feedback on the delivery of VET programs in Victoria.

Consequences of not providing your information

Failure to provide your personal information may mean that it is not possible for you to enrol in VET and/or to obtain a Victorian Government VET subsidy.

Access, correction and complaints

You have the right to seek access to or correction of your own personal information. You may also complain if you believe your privacy has been breached.

For further information, please contact Diversitat Training's Privacy Officer in the first instance by phone 03 5246 9600 or email training@diversitat.org.au.

Further information

For further information about the way the Department collects and handles personal information, including access, correction and complaints, go to: <http://www.education.vic.gov.au/Pages/privacypolicy.aspx>.

For further information about Unique Student Identifiers, including access, correction and complaints, go to: <http://www.usi.gov.au/Students/Pages/student-privacy.aspx>.

I acknowledge that I have read the Victorian Government's VET Student Enrolment Privacy Notice.

Student signature:

Applicant Declaration

Please read and tick each box.

I believe all information in this enrolment application form is true and correct and I understand that it is my responsibility to provide all relevant and required documentation.

I acknowledge that providing any false information and/or failing to disclose any information relevant to my application and/or failure to complete an enrolment form may result in the withdrawal of any offer, particularly as it relates to my eligibility to obtain an offer for government subsidised training, and/or cancellation of enrolment at the discretion of Diversitat.

I understand that if my circumstances change that I may no longer be eligible for Government subsidised training.

I have read and understood the conditions relating to fees, concessions and refunds.

The Recognition of Prior Learning or Credit Transfer process for this course has been discussed with me prior to enrolment.

Optional I authorise images and/or video footage taken of me whilst participating in training may be used by Diversitat Training for their publications and related marketing material.

Applicant Name:

Signature:

Date:

Guardian consent is required if the applicant is 17 years of age or younger.

I, (Guardian name) hereby consent to my (son/daughter etc.)

(Applicant Name) participating in the Diversitat Training course.

I accept that any fees or charges associated with this enrolment will be my responsibility, unless another organisation/Agency/Employer is paying.

Guardian Signature:

Date:

2017 ENROLMENT CHECKLIST - OFFICE USE ONLY

Enrolling Officer to complete

Applicant Name:

Study method: FOCS Courses Traineeships SBAT

Skills First eligibility status

Eligible (upon application)

Enrolment accepted*

*Applicant must have completed the Pre Training Review & be deemed suitable for the qualification prior to accepting enrolment

Yes No Applicant notified:

Original Statement of Fees issued to applicant

USI Provided by applicant

i No more than \$1500 in pre paid fees may be taken from an individual (n/a to employers)

Deposit paid OR No deposit paid OR Paid in full OR Direct Debit Request provided

Funding codes for Vettrak

ACE - Learn Local - Non Accredited Course

S - Fee For Service

P - Skills First - General

BWP - Back to Work Scheme - Non Apprentice/Trainee*

AEP - Automotive Supply Chain Training Initiative*
- Non-Apprentice/Trainee

AEL - Automotive Supply Chain Initiative* - Apprentice/Trainee

SCP - Retrenched employees - Not Apprentice/Trainee*

SCL - Retrenched employees - Apprentice/Trainee*

L - Skills First - Apprentice/Trainee

Other (please specify): * Referral evidence required

BWL - Back to Work Scheme - Apprentice/Trainee*

ASL - Skills First - Asylum Seeker Or Victim Of Human
Trafficking - Apprentice/Traineeship*

ASP - Skills First - Asylum Seeker Or Victim Of Human
Trafficking General

RCL - Reconnect Grants Program Learner - Apprentice/
Trainee*

RCP - Reconnect Grants Program Learner - General
non Apprentice/Trainee*

ACR - ACFE Funded non-accredited local courses ACE
only Reconnect Program Learner

Documents accompanying this application

Pre Training Review

Physical Concession Evidence

CT Evidence (if applicable)

ID collected (SkillsFirst/AMEP/ACFE)

Digital Concession Evidence Form

Student Support Plan

Copy of Statement of Fees

Referral Form (if applicable)

USI Assistance Request Form

Enrolling Officer:

Date:

Enrolling OR Administrator Officer to complete

Enrolment date*

*Enrolment date must be after enrolment is accepted (date of the first payment or course commencement date)

Enrolment date:

Administrator Officer to complete

Invoice Calculation

Enrolment Type: Skills First Full Skills First Concession FFS Fee Exception

Concession evidence provided within 2 weeks of enrolment (if applicable)

Calculation of Tuition Fee

Actual Nominal Hours

- Credit Transfer Hours

= Total Hours

x Hourly Tuition Rate

= Total Tuition Fee

<input type="text"/>
<input type="text"/>
<input type="text"/>
\$ <input type="text"/>
\$ <input type="text"/>

Calculation of total fees

Total Tuition Fee

+ Amenities

+ Materials

+ Resources

+ Other _____

= Total Enrolment Fee

\$ <input type="text"/>
\$ <input type="text"/>
\$ <input type="text"/>
\$ <input type="text"/>
\$ <input type="text"/>
\$ <input type="text"/>

Administrator name:

Date: