



All prospective students are to complete this enrolment form. Please print in black or blue pen.

This form must be submitted in person to MSA Training and Professional Development along with any supporting documents required.

NOTE: No enrolment will be processed unless this form is fully completed and the declarations are signed to indicate your understanding and agreement with all conditions.

Section 1: Course Information	
DATE OF APPLICATION:	TICK IF YOU WISH TO APPLY FOR: <input type="checkbox"/> RPL OR <input type="checkbox"/> CREDIT TRANSFER Please see the Student Information Handbook for details.
COURSE CODE AND NAME: <i>(Qualification you are enrolling into)</i>	
COURSE STREAM/TIMETABLE: <i>(Course timetable you are enrolling into)</i>	
Unique Student Identifier (USI) Number: From 1 January 2015 we can be prevented from issuing you with a nationally recognized VET qualification or statement of attainment if you do not have a Unique Student Identifier (USI). If you have not yet obtained a USI you can apply for it online at http://www.usi.gov.au/create-your-USI/	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Section 2: Student Details	
Surname:	First Name:
Middle Name:	Preferred Name:
Date of Birth: ___ / ___ / ___ <i>dd mm yy</i>	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> (Indeterminate/Intersex/Unspecified)
Phone:	Mobile:
Email:	
Emergency contact name:	Relationship:
Emergency contact number:	
What is the address and postcode of where you usually live? (Street Number and Name not Post Office box)	
Building / Property Name:	Flat / Unit Number:
Street Number:	Street Name:
Suburb:	Postcode:

Postal Address: What is your postal address? (If different from above)

Section 3: Background

Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

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

In which country were you born?

- Australia Other _____

City / Town of Birth: _____

Citizenship status (Tick one):

- Australian Citizen Permanent Resident
 New Zealand Citizen Other

If 'Other' specify nationality: _____

Are you of Aboriginal or Torres Strait Islander origin?

- No Yes, Aboriginal
 Yes, Torres Strait Islander

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

Do you speak a language other than English at home?

- No, English only
 Yes, other – Please specify: _____

(If more than one language, indicate the main language spoken)

How well do you speak English?

- Very well Well Not well Not at all

Section 4: School Details

Are you still attending secondary school?

- Yes No

What is your highest COMPLETED school level?

- Year 12 Year 11 Year 10
 Year 9 or equivalent Year 8 or lower
 Never attended school

In which YEAR did you complete that school level?

Name of most recent secondary school attended:

Section 5: Disability

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

- Yes No

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

(You may indicate more than one)

- | | | | |
|---|--|---------------------------------------|--|
| <input type="checkbox"/> Hearing/deaf | <input type="checkbox"/> Physical | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Learning |
| <input type="checkbox"/> Mental illness | <input type="checkbox"/> Acquired brain impairment | <input type="checkbox"/> Vision | <input type="checkbox"/> Medical condition |
| <input type="checkbox"/> Other | | | |

Section 6: Prior Education

Have you SUCCESSFULLY completed any of the following qualifications? Yes No

If 'Yes' please enter ONE of these Prior Education Achievement Recognition Identifiers ANY applicable qualification level.

A – Australian

E – Australian Equivalent

I – International

A E I

Bachelor Degree or Higher Degree

- Advanced Diploma or Associate Degree
- Diploma (or Associate Diploma)
- Certificate IV (or Advanced Certificate/Technician)
- Certificate III or Trade Certificate
- Certificate II
- Certificate I
- Certificates other than those listed

Section 7: Skills Victoria AVETMISS

Which of the following classifications BEST describes the industry of your current or previous Employer (Tick ONE box only) If never employed go to the next section.

- | | |
|---|--|
| <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 Services | <input type="checkbox"/> Q - Healthcare 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 | |

Which of the following classifications BEST describes your current or recent occupation? (Tick ONE box only) If never employed proceed to school details.

- | | |
|---|--|
| <input type="checkbox"/> 1 - Manager | <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 | |

Section 8:

Victorian Student Number – to be completed by students aged 24 years and below

Enter your Victorian Student Number:

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.

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:

1. _____
2. _____
3. _____

Section 11: Privacy Notices

National VET Data Policy Privacy Notice

Under the *Data Provision Requirements 2012*, Monash Student Association is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form), may be used or disclosed by Monash Student Association for statistical, administrative, regulatory and research purposes. Monash Student Association may disclose your personal information for these purposes to:

- Commonwealth and State or Territory government departments and authorised agencies; and
- NCVER.

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:

- populating authenticated VET transcripts;
- facilitating statistics and research relating to education, including surveys and data linkage;
- pre-populating RTO student enrolment forms;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive a student survey which may be administered by a government department or NCVER employee, agent or third party contractor or other authorised agencies. Please note you may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the *Privacy Act 1988* (Cth), the National VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

For more information about NCVER's Privacy Policy go to <https://www.ncver.edu.au/privacy>.

Victorian Government VET Student Enrolment Privacy Notice

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

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

Monash Student Association 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>.

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 Monash Student Association; the administration and audit of VET providers and programs; education-related policy and research purposes; and to assist in determining eligibility for training subsidies.

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).

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. Please note you may opt out of the NCVER survey at the time of being contacted.

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 our Privacy Officer in the first instance by phone (03) 9905 3180 or email msa-monashtraining@monash.edu.

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>.

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 and understood this Enrolment Privacy Notice.

Signature: _____ **Date:** _____

Parent/Guardian Signature* _____ Date: _____

*Parental/guardian consent is required for all students under the age of 18

Section 12: Unique Student Identifier (USI) Number

If you do not already have a Unique Student Identifier (USI) and you want MSA Training and Professional Development to apply for a USI to the Student Identifiers Registrar (Registrar) on your behalf, MSA Training and Professional Development will provide to the Registrar the following items of personal information about you:

- Your name, including first or given name(s), middle name(s) and surname or family name as they appear in an identification document;
- Your date of birth, as it appears, if shown, in the chosen document of identity;
- Your city or town of birth;
- Your country of birth;
- Your gender; and
- Your contact details.

I am providing one of the following forms of ID for the purposes of creating a USI:

- Australian passport
- Non-Australian passport with Australian visa
- Australian birth certificate
- Australian driver's licence
- Medicare card
- Certificate of registration by descent
- Citizenship certificate
- Immicard

I have read and consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf> and NCVER policies, procedures and protocols published on NCVER's website at www.ncver.edu.au

Signature: _____

Student Name: _____

Date: _____

Conditions and Declaration

In signing and submitting this 'Enrolment Form' and this declaration section the student and parent (where applicable) is entering into a contract with MSA Training and Professional Development and agrees that:

- Once the student commences the nominated course, MSA Training and Professional Development will deliver the Training Program using competency based training principles and practices in accordance with the AQTF (Australian Quality Training Framework)
- MSA Training and Professional Development and the student will work together to produce a unified approach in the student achieving the relevant qualification.
- Where a student has undertaken an assessment and it has been marked as 'Not yet Competent' (NYC), they be allowed to re-sit the test/or have a re-assessment. If they are deemed 'NYC' for a second time they are to re-enrol into that unit/ subject. This will include re-training and therefore a re-enrolment fee for the unit will apply.
- For re- issuance of Certificates and Statements of Attainments the student will be charged \$22 per document required. Payment for the re-issuance of such documents is required prior to the re-issuance occurring.
- MSA Training and Professional Development reserves the right to accept or reject any application for enrolment at its discretion.
- MSA Training and Professional Development reserves the right to cancel any course prior to the commencement date of the course should it deem it necessary and in that event, shall refund all payments received from the student (see refund policy).
- The information provided by the student in this enrolment form is complete and correct and this information will be retained by the RTO for the purposes of enrolment and/or government funding.
- Providing any false information and / or failing to disclose any information relevant to my application for enrolment and / or failure to complete an application / 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 MSA Training and Professional Development.
- To be bound by the MSA Training and Professional Development rules and regulations and any amendments made to the rules and regulations.
- Language, Literacy and Numeracy testing is a requirement prior to acceptance into any course entry and adhere to any other pre-requisites identified through the enrolment process.
- Where a student's contact details change while studying with MSA Training and Professional Development the student must advise MSA Training and Professional Development of these changes within 7 days. These details include but are not limited to details such as e-mail, address, and contact phone details.
- The Student Information Handbook has been read and understood.
- The Refund policy has been read and understood.
- Payment is attached for enrolment into this course as outlined in this enrolment form/ has been made for the course. Default of a payment plan may result in my enrolment being suspended or withdrawn.

Signature: _____

Student Name: _____ **Date:** _____

For students under 18 years of age:

Parent Signature: _____

Parent Name: _____ **Date:** _____

Statement of Fees

MSA Training and Professional Development (TOID 21526), ph. 9905 3180

Student Name:	
Qualification Code:	
Qualification Title:	
Estimated Course Duration (months):	
Nominal Hours Specific to Individual Circumstances:	
Mode of delivery: <input type="checkbox"/> Classroom <input type="checkbox"/> Distance <input type="checkbox"/> Blended	
Location: <input type="checkbox"/> Clayton <input type="checkbox"/> Caulfield <input type="checkbox"/> Dandenong <input type="checkbox"/> Peninsula <input type="checkbox"/> Morwell <input type="checkbox"/> Workplace <input type="checkbox"/> Other _____	
Work placement required? <input type="checkbox"/> Yes, number of hours: _____ <input type="checkbox"/> No	
Traineeship? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Third party providers: <input type="checkbox"/> Not applicable <input type="checkbox"/> Yes, details:	
Currency of training product? <input type="checkbox"/> Current <input type="checkbox"/> Superseded	Additional educational/support to be provided: _____
Eligible for Government Funding? <input type="checkbox"/> Yes, Government contribution: \$ _____ <input type="checkbox"/> No	
Eligible for Concession? <input type="checkbox"/> YES <input type="checkbox"/> NO	Total Fees Payable: \$ _____

Student Signature: _____ Date: _____

Staff Signature: _____ Date: _____

OFFICE USE ONLY – Payments

Payment method: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Card <input type="checkbox"/> Invoice <input type="checkbox"/> Payment Plan
Amount Paid: \$ _____ Date: _____ Staff signature: _____