

ENROLMENT APPLICATION FORM

- Check the course details on Bass Coast Adult Learning website at www.bcal.vic.edu.au
- Please use BLOCK LETTERS and tick the appropriate boxes.
- Complete all questions, sign and date the application form.
- Submit the completed form **with all required supporting documentation.**

Name of Course	Course Date	Course Code

PERSONAL DETAILS (Your legal name must be used for USI purposes) BLOCK letters please

Title: Mr Mrs Ms Other

Surname (Legal family name):

VETtrak ID:

First Name:

Middle Name/s:

Preferred Name:

Date of Birth:

Gender: Male Female
 Indeterminate/Intersex/Unspecified)

CONTACT INFORMATION

BLOCK letters please

Usual home address:

Suburb:

Postcode:

Mobile No.

Home No.

Work No.

Email address:

Preferred Contact Method:

Mobile

Email

Postal Address

Same as above

Yes

No - Please complete below

Number and street name /PO Box /
RSD:

Suburb:

Postcode:

Name:

Emergency Contact Information

Relationship:

Mobile/Telephone:

BCAL mailing list

Yes, I would like to join the BCAL mailing list No, please do not add me

LANGUAGE AND CULTURAL DIVERSITY

In which country were you born?	<input type="checkbox"/> Other <input type="checkbox"/> Australia	<i>Enter Other Country</i> <input type="text"/>		
<input type="checkbox"/> Australian Citizen	Town / City of Birth	<input type="text"/>		
Do you speak a language other than English at home? (<i>Language most spoken if multiple</i>)	<input type="checkbox"/> No, English only <input type="checkbox"/> Other	<i>Home Language (Other)</i> <input type="text"/>		
How well do you speak English?	<input type="checkbox"/> Very Well	<input type="checkbox"/> Well	<input type="checkbox"/> Not well	<input type="checkbox"/> Not at all
Are you of Aboriginal or Torres Strait Islander Origin?	<input type="checkbox"/> No	<input type="checkbox"/> Yes, Aboriginal	<input type="checkbox"/> Yes, Torres Strait Islander	<input type="checkbox"/> Both

DISABILITY

Providing information about a disability will not disadvantage your application. This information is collected to ensure that BCAL provides appropriate information on the support services available to students. This information is also collected for statistical and planning purposes.

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 area.*)

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

NDIS: Yes No

NDIS Number:

SCHOOLING

Are you still attending secondary?

What is your highest COMPLETED school level? *Tick one box only.*

<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Completed Year 12 <input type="checkbox"/> Completed Year 9 or equivalent <input type="checkbox"/> Completed Year 11 <input type="checkbox"/> Completed Year 8 or lower <input type="checkbox"/> Completed Year 10 <input type="checkbox"/> Never attended school
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Have you previously been enrolled at Bass Coast Adult Learning?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you previously studied part of your selected course(s) at another institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Are you currently enrolled in any other accredited courses?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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How did you hear about BCAL?

Please specify:

PREVIOUS QUALIFICATIONS ACHIEVED

Have you SUCCESSFULLY completed any of the following qualifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If YES, please indicate with a tick your highest qualification, using the key below: A – Australian E – Australian Equivalent I – International	A	E	I	Highest qualification
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bachelor’s degree or Higher Degree
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advanced Diploma or Associate Degree
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Diploma (or Associate Diploma)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate IV (or Advanced Certificate/Technician)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate III (or Trade Certificate)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate II
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate I
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificates other than the above

STUDY REASON

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

Of the following categories, which BEST describes your current employment status? *(Tick one only.)*

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

Which of the following classifications BEST describes your current or recent occupation? *(Tick one only.) If never employed, go to Study Reason.*

- | | |
|--|---|
| <input type="checkbox"/> 1 - Manager | <input type="checkbox"/> 6 - Sales Worker |
| <input type="checkbox"/> 2 - Professional | <input type="checkbox"/> 7 - Machinery Operators and Driver |
| <input type="checkbox"/> 3 - Technicians and Trade Worker | <input type="checkbox"/> 8 - Labourer |
| <input type="checkbox"/> 4 - Community and Personal Service Worker | <input type="checkbox"/> 9 - Other |
| <input type="checkbox"/> 5 - Clerical and Administrative worker | |

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"/> T - Telecommunications |
| <input type="checkbox"/> J - Information Media and Technology | <input type="checkbox"/> S - Other Services |

UNIQUE STUDENT IDENTIFIER

From 1 January 2015, BCAL can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we submit to NCVET. If you have not yet obtained a USI, you can apply for it directly at <http://www.usi.gov.au/create-your-USI/>

You may already have a USI if you have done any nationally recognised training, which could include training at work, completing a first aid course or RSA (Responsible Service of Alcohol) course, getting a white card, or studying at a TAFE or training organisation. It is important that you try to find out whether you already have a USI before attempting to create a new one. You should not have more than one USI. To check if you already have a USI, use the 'Forgotten USI' link on the USI website at <https://www.usi.gov.au/faqs/i-have-forgotten-my-usi>

If you know it, what is your USI?

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If you are unsure if you have a USI, BCAL are able to use the 'Existing USI Search' tool on www.usi.gov.au to check. Sign here if you are happy to authorise BCAL to check your USI records before applying for a new USI.

I, the applicant authorise BCAL to check my USI records for an existing USI on my behalf, before applying for a new one pursuant to sub-section 9(2) of the Student Identifiers Act 2014. I have read the privacy information and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at <https://www.usi.gov.au/students/create-your-usi/personal-details>

If you do not have a USI, BCAL can apply for one on your behalf, but you must complete the USI Application Form, available from BCAL Reception. This will require further, more detailed proof of identification to be submitted to BCAL.

Student Signature: Required

Handwritten signature required

Have you had any training with a VET Registered Training Organisation or an Adult and Community Education provider in Victorian since 2011?

Yes No

If Yes

List the most recent training organisation with which you have participated in training in Victoria since 2011. (List up to 3 training organisations.)

1

2

3

VICTORIAN STUDENT NUMBER (VSN)

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 Delivered to Secondary Students) 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.

What is your **Victorian Student Number?**

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(Nine digits)

Have you attended any Victorian school since 2009?

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.

COMBINED STUDENT ENROLMENT PRIVACY NOTICE AND ACKNOWLEDGEMENT

(National VET Data Policy Privacy Notice and Victorian Government VET Student Enrolment Privacy Notice and acknowledgement)

Under the *Data Provision Requirements 2012*, **Bass Coast Adult Learning (BCAL)** 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 **BCAL** for statistical, administrative, regulatory and research purposes. **BCAL** may disclose your personal information for these purposes to:

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

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

BCAL 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 **BCAL**; 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. You may receive a student survey which may be administered by an NCVER employee, agent, third party contractor or other authorised agencies. Please note you may opt out of the NCVER 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 NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au)

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 BCAL's Admin in the first instance by phone [56723115](tel:56723115) or email info@bcal.vic.edu.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 and correction go to: <http://www.usi.gov.au/Students/Pages/student-privacy.aspx>

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

Student Acknowledgement

- I acknowledge that I have read the combined *National VET Data Policy Privacy Notice* and *Victorian Government's VET Student Enrolment Privacy Notice*.
- I declare that the information I have provided to the best of my knowledge is true and correct.
- I acknowledge that **BCAL** will collect, use and disclosure my personal information in accordance with the Privacy Notice above.
- *This section must have students handwritten signature and date.*

Full Name: _____

STUDENT SIGNATURE:

DATE:

Completion of enrolment form assisted by BCAL staff.

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

PARENT/GUARDIAN NAME:

PARENT/GUARDIAN SIGNATURE* DATE:

Office Use Only - Funding Source				
<input type="checkbox"/> Skills First	<input type="checkbox"/> ACFE	<input type="checkbox"/> AMEP	<input type="checkbox"/> Fee for Service	<input type="checkbox"/> Other
<input type="checkbox"/> VETtrak	<input type="checkbox"/> Enrolled	<input type="checkbox"/> VET DSS	<input type="checkbox"/> Concession	<input type="checkbox"/> Exemption

Note: VET Delivered to Secondary Students required the school contract. Notes all applicants required ID documents.