



# **Enrolment Application Form**

Phone: (03) 5672 3115 Fax: (03) 5672 2443

Email: info@bcal.vic.edu.au

RTO 3720 ABN 80 913 366 342 239 White Road, Wonthaggi 3995 PO Box 322, Wonthaggi 3995

|  | ENROLMENT A   | APPLICATION FORI           | М                     |                             |
|--|---|----------------------------|-----------------------|-----------------------------|
| ☐ Please use BLOCK LETT☐ Complete all questions  | nils on Bass Coast Adult Lead<br>TERS and tick the appropri<br>s, sign and date the applical<br>I form with all required su | iate boxes.<br>ation form. | •                     | bcal.vic.edu.au/            |
| Name of Course   |   |                            |                       | Course Code                 |
|  |   |                            |                       |                             |
|  |   |                            |                       |                             |
| PERSONAL DETAILS (Your le  | egal name must be used f  | for USI purposes)          |                       | BLOCK Letters Please        |
| Title: ☐ Mr ☐ N  | Mrs ☐ Ms ☐ Ot   | ther (please writ          | te):                  |                             |
| Surname (Legal family nam  | ne):  |                            | VETt                  | rak ID:                     |
| First Name:  | Middle N  | ame/s:                     |                       |                             |
| Date of Birth:   | Gender: □ Male □ F  | <sup>:</sup> emale □ (Ind  | leterminate           | :/Intersex/Unspecified)     |
|  |   |                            |                       |                             |
| CONTACT INFORMATION  |   |                            |                       | <b>BLOCK Letters Please</b> |
| Usual home address: Numb   | ber and street  |                            | T                     | BLOCK Letters Please        |
| Usual home address: Numb   |   |                            | Post code             | BLOCK Letters Please        |
| Usual home address: Numb   | ber and street<br>Home Nr.  |                            | Post code<br>Work Nr. | BLOCK Letters Please        |
| Usual home address: Numb   |   |                            |                       | BLOCK Letters Please        |
| Usual home address: Numb Suburb Mobile Nr.   |   | ☐ Email                    |                       | BLOCK Letters Please        |
| Usual home address: Numb Suburb Mobile Nr. Email address Preferred Contact Method  | Home Nr.  |                            |                       |                             |
| Usual home address: Numb Suburb Mobile Nr. Email address Preferred Contact Method  | Home Nr.  |                            | Work Nr.              |                             |
| Usual home address: Numb Suburb Mobile Nr. Email address Preferred Contact Method Postal Address San   | Home Nr.  |                            | Work Nr.              |                             |
| Usual home address: Number and street name /F  | Home Nr.  |                            | Work Nr.              |                             |
| Usual home address: Number and street name /F  | Home Nr.  Mobile  me as above Yes  PO Box / RSD   |                            | Work Nr.              |                             |
| Usual home address: Number and street name /F  | Home Nr.  Mobile me as above  Yes PO Box / RSD  Name  |                            | Work Nr.              |                             |
| Usual home address: Number Suburb  Mobile Nr.  Email address  Preferred Contact Method  Postal Address Sall  Number and street name /F  Suburb:  Emergency Contact | Home Nr.  Mobile  me as above Yes  PO Box / RSD  Name  Relationship  Mobile/Telephone                                       |                            | Work Nr.              |                             |

| LANGUAGE AND CULTURAL DIVERSITY   |                |   |                      |  |                        |   |       |     |  |
|---|----------------|---|----------------------|--|------------------------|---|-------|-----|--|
| In which country whyou born?  | iere           | ☐ Australia   | ☐ Othe               | r  | Please S <sub>i</sub>  | pecify  |       |     |  |
| ☐ Australian Citize   | n              | Town / Ci   | ty of Birtl          | า  |                        |   |       |     |  |
| Do you speak a languag<br>than English at home?<br>(Language most spoker<br>multiple)                                       |                | □ No,<br>English only                               | ☐ Yes,<br>Please Spe | cify   |                        |   |       |     |  |
| How well do you speak   | English?       | ☐ Very Well   | ☐ Well               | [  | ☐ Not well             | □ Not a   | t all |     |  |
| Are you of Aboriginal of Strait Islander origin?  | r Torre        | □ No □ Yes,   | Aboriginal           | □ Y  | es, Torres Strait      | t Islander  | □Вс   | oth |  |
|   |                |   |                      |  |                        |   |       |     |  |
| DISABILITY  |                |   |                      |  |                        |   |       |     |  |
| Providing information a<br>ensure that BCAL provid<br>information is also colle   | des approp     | oriate informatio                                   | on on the sup        | port   | • •                    | -   |       |     |  |
| Do you consider yourse or long-term condition?  |                | a disability, imp                                   | airment,             |  |                        | Yes 🗆 [   | No    |     |  |
| If yes, please indicate the areas of disability, impairment, or long-term condition. (You may indicate more than one area.) | $\square$ Ment | Hearing/deaf Mental illness Medical condition Other |                      | Physical<br>Acquired brain<br>pairment<br>Vision |                        | <ul><li>☐ Intellectual</li><li>☐ Acquired brain</li><li>Impairment</li><li>☐ Learning</li></ul> |       |     |  |
| SCHOOLING   |                |   |                      |  |                        |   |       |     |  |
| Are you still attending secondary   | What is y      | our highest CON                                     | MPLETED sch          | nool l   | level? <i>Tick one</i> | box only.   |       |     |  |
| •   | ☐ Con          | Completed Year 12                                   |                      |  |                        |   |       |     |  |
| $\square$ No $\square$ Yes  | ☐ Com          | pleted Year 11                                      | [                    | □ Cc   | ompleted Year 8        | or lower  |       |     |  |
|   | ☐ Com          | pleted Year 10                                      | [                    | □N€  | ever attended so       | chool   |       |     |  |
| Have you previously been enrolled at Bass Coast Adult Learning?   |                |   |                      |  |                        |   |       |     |  |
| Have you previously studied part of your selected course(s) at another  |                |   |                      |  |                        |   |       |     |  |
| Are you currently enrolled in any other accredited courses?   |                |   |                      |  |                        |   | No    |     |  |
| How did you hear about BCAL? Please tick.   |                |   |                      |  |                        |   |       |     |  |
| -   | Nord of N      |   | . Services           |  | Existing Custom        | ier   |       |     |  |
| ☐ Website ☐ S   | Social Med     | lia 🗆 Oth   | er                   |  |                        |   |       |     |  |

| PREVIOUS QUALIFICATIONS ACHIEVED   |         |        |                                       |   |  |  |  |  |  |
|--|---------|--------|---------------------------------------|---|--|--|--|--|--|
| Have you SUCCESSFULLY completed any of the following qualifications?  Yes  No                            |         |        |                                       |   |  |  |  |  |  |
| If YES, please indicate  | Α       | Е      | I                                     | Highest qualification   |  |  |  |  |  |
| with a tick <b>your highest</b>  |         |        |                                       | Bachelor's degree or Higher Degree                              |  |  |  |  |  |
|  |         |        |                                       | Advanced Diploma or Associate Degree                            |  |  |  |  |  |
| qualification, using the   |         |        |                                       | Diploma (or Associate Diploma)                                  |  |  |  |  |  |
| key below:   |         |        |                                       | Certificate IV (or Advanced Certificate/Technician)             |  |  |  |  |  |
| A – Australian   |         |        |                                       | Certificate III (or Trade Certificate)                          |  |  |  |  |  |
| E – Australian Equivalent  |         |        |                                       | Certificate II  |  |  |  |  |  |
| I – International  |         |        |                                       | Certificate I   |  |  |  |  |  |
|  |         |        |                                       | Certificates other than the above                               |  |  |  |  |  |
| STUDY REASON   |         |        |                                       |   |  |  |  |  |  |
| Of the following categories, we traineeship / apprenticeship?  |         |        |                                       | ribes your main reason for undertaking this program / nly.)     |  |  |  |  |  |
| ☐ To get a job   |         |        |                                       | $\square$ It was a requirement of my job                        |  |  |  |  |  |
| $\square$ To develop my existing bu  | isiness | 5      |                                       | $\square$ I wanted extra skills for my job                      |  |  |  |  |  |
| ☐ To start my own business   |         |        |                                       | $\square$ To get into another program of study                  |  |  |  |  |  |
| ☐ To try for a different care  | er      |        |                                       | ☐ For personal interest or self-development                     |  |  |  |  |  |
| ☐ To get a better job or pror  | motio   | n      |                                       | ☐ To get skills for community/voluntary work                    |  |  |  |  |  |
|  |         |        |                                       | ☐ Other reasons   |  |  |  |  |  |
|  |         |        |                                       |   |  |  |  |  |  |
| EMPLOYMENT   |         |        |                                       |   |  |  |  |  |  |
|  | nich B  | EST o  | descr                                 | ibes your current employment status? (Tick one only.)           |  |  |  |  |  |
| $\square$ Full-time employee   |         |        |                                       | ☐ Employed – unpaid worker in a family business                 |  |  |  |  |  |
| ☐ Part-time employee ☐ Unemployed – seeking full-time work   |         |        |                                       |   |  |  |  |  |  |
| $\square$ Self-employed - not er   | mploy   | ing ot | ☐ Unemployed – seeking part-time work |   |  |  |  |  |  |
| $\square$ Self-employed - employing others $\square$ Not employed – not seeking employment               |         |        |                                       |   |  |  |  |  |  |
| Which of the following classific   | cation  | s BES  | ST de                                 | escribes your current or recent occupation? (Tick one only.) If |  |  |  |  |  |
| never employed go to Study Re  | ason.   | •      |                                       |   |  |  |  |  |  |
| ☐ 1 - Manager  |         |        |                                       | ☐ 6 - Sales Worker  |  |  |  |  |  |
| $\square$ 2 - Professional   |         |        |                                       | $\square$ 7 - Machinery Operators and Driver                    |  |  |  |  |  |
| $\square$ 3 - Technicians and Tra  | ade W   | orker' | i                                     | ☐ 8 - Labourer  |  |  |  |  |  |
| $\square$ 4 - Community and Personal Service Worker $\square$ 9 - Other                                  |         |        |                                       |   |  |  |  |  |  |
| ☐ 5 - Clerical and Administrative worker   |         |        |                                       |   |  |  |  |  |  |
| Which of the following classifications BEST describes the Industry of your current or previous Employer? |         |        |                                       |   |  |  |  |  |  |
| ☐ A - Agriculture, Forest  | ry and  | Fishi  | ng                                    | ☐ K - Financial and Insurance Services                          |  |  |  |  |  |
| ☐ B - Mining   |         |        |                                       | $\square$ L - Rental, Hiring and Real Estate Services           |  |  |  |  |  |
| ☐ C - Manufacturing  |         |        |                                       | ☐ M - Professional, Scientific and Technical Services           |  |  |  |  |  |
| ☐ D - Electricity, Gas, Wa   | ater ar | nd Wa  | iste S                                | Services   N - Administrative and Support Services              |  |  |  |  |  |
| ☐ E - Construction   |         |        |                                       | $\square$ O - Public Administration and Safety                  |  |  |  |  |  |
| $\square$ F - Wholesale Trade  |         |        |                                       | $\square$ P - Education and Training                            |  |  |  |  |  |
| $\square$ G - Retail Trade   |         |        |                                       | $\square$ Q - Health Care and Social Assistance                 |  |  |  |  |  |
| $\square$ H - Accommodation ar   | nd Foo  | od Ser | vices                                 | $\square$ R - Arts and recreation services                      |  |  |  |  |  |
| $\square$ I -Transport, Postal an  | d War   | ehou   | sing                                  | $\square$ T - Telecommunications                                |  |  |  |  |  |
| $\square$ J - Information Media  | and T   | echno  | logy                                  | ☐ 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 NCVER. 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

| https://www.usi.gov.au/faqs/i-ha   |   |  | _  | 1 051 11                               | nk on                                 | tne c                               | JSI W6                           | ebsite                           | e at                     |                          |  |
|--|---|--|--|--|---------------------------------------|-------------------------------------|----------------------------------|----------------------------------|--------------------------|--------------------------|--|
| If you know it, what is your USI?  |   |  |  |  |                                       |                                     |                                  |                                  |                          |                          |  |
| 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. Student Signature:                          |   |  | 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, BCAI<br>Application Form, available fro<br>identification to be submitted  | m BCAL Re   |  | -  |  |                                       |                                     | -                                |                                  |                          | -                        |  |
| Have you had any training wi<br>VET Registered Training<br>Organisation or an Adult and<br>Community Education provid<br>Victorian since 2011?   |   | List t<br>parti<br>orga<br>1<br>2                        | nisati   | ed in tons.)                           | rain                                  | ing ii                              | n Vic                            | ctoria                           | a sin                    | ce 2                     | n with which you have<br>2011. (List up to 3 training                                      |
|  |   |  |  |  |                                       |                                     |                                  |                                  |                          |                          |  |
| VICTORIAN STUDENT NUMB   | ER (VSN)  |  |  |  |                                       |                                     |                                  |                                  |                          |                          |  |
| To be completed by all students aged Since 2009 in schools and since 2011 providers, a Victorian Student Numb Students should report their VSN on who are currently enrolled in either a program) should obtain their VSN from Students who are enrolling for the firm | for Vocationa<br>er (VSN) has be<br>all subsequent<br>a VET provider<br>om their currer | l Educat<br>een allo<br>t enrolm<br>or a Vic<br>nt educa | cated unents at attents at attents at attention or attention or attents at attent at attents attents at attent at attents at attents at attents at attents at attents at attent at attents attents at attents at attents at attents at attents attents at attent attents at attents at attents attents at attents at attents attents attents at attents at attents attents at attents at attent attents at attents at attents attents at attents atten | pon en<br>a Victo<br>school<br>trainin | rolme<br>orian s<br>(inclue<br>g orga | ent to<br>schoo<br>ding t<br>anisat | each<br>I or tr<br>hose<br>ion a | indiv<br>ainin<br>alrea<br>nd re | idual<br>g orga<br>dy pa | stude<br>anisa<br>rticip | ent aged up to 24 years.<br>tion. In particular, all students<br>ating in a VET in Schools |
| What is your <b>Victorian</b>  |   |  |  |  |                                       |                                     |                                  |                                  |                          |                          |  |
| Student Number?  |   |  |  |  |                                       |                                     |                                  |                                  |                          |                          |  |
| Have you attended any Victorian school since 2009?   | ☐ No – I h VET trainin ☐ Yes, I h   | ng pro   | vider  | since                                  | the l                                 | oegir                               | nnin                             | g of                             | 2013                     | 1.                       | 2009, or a TAFE or other   |
|  |   |  |  |  |                                       |                                     |                                  |                                  |                          |                          |  |

## **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 <a href="http://www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx">http://www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx</a>.

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 enroll 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 Privacy Office in the first instance by phone 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, correction and complaints, go to: http://www.usi.gov.au/Students/Pages/student-privacy.aspx .

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

#### **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.

| Full Name:   |   |             |                   |             |  |  |  |  |  |
|--|---|-------------|-------------------|-------------|--|--|--|--|--|
|  |   |             |                   |             |  |  |  |  |  |
| STUDENT SIGNATU  | JRE:  |             |                   |             |  |  |  |  |  |
| DA   | TE:   |             |                   |             |  |  |  |  |  |
| Completion of enro   | Completion of enrolment form assisted by BCAL staff due to limited literacy skills of student. $\Box$ |             |                   |             |  |  |  |  |  |
| *Parental/guardian consent is required for all students under the age of 18. |   |             |                   |             |  |  |  |  |  |
| PARENT/GUARDIAN SIG  | GNATURE*  | C           | )ATE:             |             |  |  |  |  |  |
| PARENT/GUARDIAN NAME:  |   |             |                   |             |  |  |  |  |  |
| Office Use Only - Funding Source   |   |             |                   |             |  |  |  |  |  |
| ☐ Skills First   | □ ACFE  | ☐ AMEP      | ☐ Fee for Service | ☐ Other     |  |  |  |  |  |
| ☐ VETtrak  | □ Enrolled  | ☐ Documents | ☐ Concession      | ☐ Exemption |  |  |  |  |  |
| Notes:   |   |             |                   |             |  |  |  |  |  |
|  |   |             |                   |             |  |  |  |  |  |