

### STUDENT REGISTRATION FORM

<b>Course Name:</b>		<b>Course Date:</b>		<b>Training location:</b>	
<b>Trainer name:</b>					

**All details on the registration form are required to be filled in**  
PLEASE PRINT ALL YOUR DETAILS CLEARLY AS PER YOUR PHOTO IDENTIFICATION

Photo ID includes: Drivers' licence or Passport.

Any misspelt names due to poor handwriting on this form will incur additional charge to alter the certificate.

<b>Given Names:</b> (Please write name used for your USI, including middle names)				<b>Family Name/ Surname:</b>						
<b>Contact phone number:</b>			<b>Date of birth:</b> (DD/MM/YYYY)			<b>Gender:</b> (circle one)	M	F	O	
<b>Email address:</b>										
<b>Residential address:</b>	<b>Unit/Street number and name:</b>				<b>Suburb:</b>		<b>State:</b>		<b>Postcode:</b>	
	<b>Postal Address:</b>	<b>Unit/Street number and name:</b>				<b>Suburb:</b>		<b>State:</b>		<b>Postcode:</b>
<input type="checkbox"/> Tick if same as residential address										

**Preferred contact method:**    Email    Mobile    Phone

### USI AND IDENTIFICATION (REQUIRED)

<b>USI:</b> (must be 10 characters with letters and numbers)	_____				
<b>WINDA ID:</b> (GWO only)		<b>DRIVER'S LICENCE/ PASSPORT SIGHTED?</b> (For trainer to tick)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Trainer's Initial:</b>	

### EMPLOYMENT (AVETMISS DATA)

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         |

### LANGUAGE AND CULTURAL DIVERSITY

<b>Country of birth:</b>			<b>Town of birth:</b>		
<b>Citizenship status:</b>	<input type="checkbox"/> Australian citizen	<input type="checkbox"/> New Zealand citizen	<input type="checkbox"/> Permanent resident	<input type="checkbox"/> Other	
<b>Are you of Aboriginal or Torres Strait Islander origin?</b>	<input type="checkbox"/> No	<input type="checkbox"/> Yes, Aboriginal	<input type="checkbox"/> Yes, Torres Strait Islander	<input type="checkbox"/> Both	
<b>Main language spoken at home:</b>	<input type="checkbox"/> English		<b>Other (please specify):</b>		

**CONTINUE OVER PAGE**

**DISABILITY/MEDICAL DECLARATION**

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

- No       Yes – go to next question

If **YES**, then please indicate the areas of disability, impairment or long-term condition: (you can tick more than one option)

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

**SCHOOLING AND QUALIFICATIONS**

What is your highest **COMPLETED** schooling level? (tick one)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Year 12, or equivalent | <input type="checkbox"/> Year 10, or equivalent | <input type="checkbox"/> Year 8 or below       |
| <input type="checkbox"/> Year 11, or equivalent | <input type="checkbox"/> Year 9, or equivalent  | <input type="checkbox"/> Never attended school |

Are you still attending school?       Yes     No

What is your highest **COMPLETED** level of qualifications?

- |  |   |
|--|---|
| <input type="checkbox"/> Bachelor’s degree or higher degree                | <input type="checkbox"/> Certificate III or Trade Certificate |
| <input type="checkbox"/> Advanced diploma or Associate degree              | <input type="checkbox"/> Certificate II                       |
| <input type="checkbox"/> Diploma or Associate diploma                      | <input type="checkbox"/> Certificates other than the above    |
| <input type="checkbox"/> Certificate IV or Advanced Certificate/Technician | <input type="checkbox"/> None                                 |

Which of the following categories **BEST** describes your main reason for undertaking this course (tick one)

- |   |  |
|---|--|
| <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 skill for my job           |
| <input type="checkbox"/> To start my own business         | <input type="checkbox"/> To get into another course 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                                     |

**PRIVACY NOTICE**

Under *Data Provision Requirements 2012*, Register Training Organisations (RTO) are 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 and your training activity data) may be used or disclosed by the RTO for statistical, regulatory and research purposes. SKYLAR may disclose your personal information for these purposes to third parties, including:

- School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Employer – if you are enrolled in training paid by your employer
- Commonwealth and State or Territory government departments and authorised agencies
- NCVER
- Organisations conducting student surveys; and
- Researchers

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- Issuing a VET statement of attainment or VET qualification, and populating authenticated VET transcripts;
- Facilitating statistics and research relating to education, including surveys;
- 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 an NCVER student survey which may be administered by an NCVER employee, agent or third-party contractor. 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* (Ct.), the VET Data Policy and all NCVER policies and protocols (including those published on the NCVER website: [www.ncver.edu.au](http://www.ncver.edu.au)).

**STUDENT DECLARATION AND CONSENT**

I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

Unless otherwise indicated, I acknowledge that the RTO may, as part of normal activities, take photographs/video for general security purposes, verification of participation and promotional activities. These will remain the sole property of SKYLAR and will not be sold to any third-party for any reason. Names will not be used in conjunction with any photographs.

- I consent to a copy of my certificate being released to my employer, if requested, unless otherwise indicated
- I authorise the RTO to apply for and/or search for my USI through the USI office

I declare that the information I have provided, to the best of my knowledge, is true and correct:

<b>Student signature:</b>		<b>Date:</b>	
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