

1. Qualification(s) to be enrolled in		
Select	Course Code	Course Title
<input type="checkbox"/>	CHC30121	Certificate III in Early Childhood Education and Care
<input type="checkbox"/>	CHC50121	Diploma of Early Childhood Education and Care

2. Personal details		
Family Name	<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Given Names	<input type="text"/>	Date of Birth ( / / )
Contact No's	( ) <input type="text"/> Mobile	<input type="text"/>
E-Mail	<input type="text"/>	
Emergency Contact Name	<input type="text"/>	Emergency Contact Number <input type="text"/>
Relationship to you	<input type="text"/>	

3. Residential Address		
Flat/ Unit Number	<input type="text"/>	Street Number <input type="text"/>
Street Name	<input type="text"/>	
Suburb	<input type="text"/>	State <input type="text"/> Postcode <input type="text"/>

4. Postal address (If different from residential address)	
Details	<input type="text"/>

5. In which country were you born?	
<input type="checkbox"/> Australia	<input type="checkbox"/> Other country - please specify: <input type="text"/>

6. Do you speak another language apart from English at home?	
<input type="checkbox"/> No, English only	<input type="checkbox"/> Yes, other - please specify <input type="text"/>

7. 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

8. Are you of Aboriginal or Torres Strait Islander origin?		
<input type="checkbox"/> Neither Aboriginal nor Torres Strait Islander	<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Torres Strait Islander

9. Do you consider yourself to have a disability, impairment or long-term medical condition?		
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<input type="checkbox"/> No (please go to question 10)	<input type="checkbox"/> Yes (please specify below – tick more than one if necessary)	
<input type="checkbox"/> Acquired brain impairment	<input type="checkbox"/> Intellectual	<input type="checkbox"/> Mental Illness
<input type="checkbox"/> Learning	<input type="checkbox"/> Vision	<input type="checkbox"/> Hearing/Deaf
<input type="checkbox"/> Physical	<input type="checkbox"/> Other Medical condition	

## 10. What is your main reason for undertaking this course?

- |  |  |
|--|--|
| <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 course of study |
| <input type="checkbox"/> For personal interest or self-development | <input type="checkbox"/> Other reasons                       |

## 11. Which of the following categories best describes your current employment status?

- |  |  |
|--|--|
| <input type="checkbox"/> Full-time Employee                            | <input type="checkbox"/> Part-time Employee                    |
| <input type="checkbox"/> Self Employed - Not Employing Others          | <input type="checkbox"/> Employer                              |
| <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 |

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

- |   |  |
|---|--|
| <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    |  |

## 13. Current employer details

Employer

## 14. 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   |   |

## 15. Concession Eligibility

Do you hold a valid concession card?  Yes  No

If yes, please provide details below:

Health Care Card     Pensioner Concession Card     Seniors Card     other

Card number     Expiry date

## 16. Secondary school details

Are you still at secondary school?     Yes     No

## 17. What is your highest COMPLETED school level?

- Never attended school     
  Completed Year 9 or Equivalent     
  Completed Year 11  
 Completed year 8 or below     
  Completed year 10     
  Completed year 12

In which year did you complete school?

Which School?

## 18. Do you have a 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.

- No     
  Yes, but VSN is unknown     
  Yes, please specify

## 19. Do you have a Unique Student Identifier (USI)?

From January 1 2015 the Government requires that all students undertaking vocational training in Australia have a Unique Student Identifier (USI). This includes both new and continuing students.

If you have a USI, please specify it here;

<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"/>
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Otherwise, please complete the separate form authorising AIO Training to apply for it on your behalf

## 20. Australian residency status

- Australian citizen     
  Australian resident     
  Visa/Temp permit

If on visa/temp permit state code / description:

## 21. Have you successfully COMPLETED any of the following qualifications?

A = Australian qualification      E = Australian Equivalent qualification      I = International qualification

- Yes     No, none – please go to Q22

**If yes**, choose the relevant qualification. **Note:** If you have multiple qualifications at the same level from different locations, use the following priority order to determine which identifier to use:

1 = Australian qualification    2 = Australian Equivalent qualification    3 = International qualification

- |                          |                          |                          |  |                          |                          |                          |                                  |
|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|----------------------------------|
| <b>A</b>                 | <b>E</b>                 | <b>I</b>                 |  | <b>A</b>                 | <b>E</b>                 | <b>I</b>                 |                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Certificate I                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Diploma Level                    |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Certificate II                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Advanced Diploma/Degree          |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Certificate III (or Trade Certificate) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Bachelor Degree or Higher Degree |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Certificate IV                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A Certificate other than these   |

Name of qualifications/trade:

Year completed:

Year completed:

## 22. Do you want to apply for Credit Transfer?

**Credit Transfer** is a process that provides students with agreed and consistent credit outcomes for components of a qualification based on identified equivalence in content and learning outcomes between matched qualifications.

Yes

No

## 23. Do you want to apply for RPL (Recognition of Prior Learning)?

**Recognition of Prior Learning (RPL)** Recognition of prior learning is an assessment process that involves assessment of an individual's relevant prior learning (including formal, informal and non-formal learning)

Yes

No

## 24. Privacy statement & student declaration

Under the Data Provision Requirements 2012, AIO TRAINING 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 and your training activity data) may be used or disclosed by AIO TRAINING for statistical, regulatory and research purposes. AIO Training 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 authorized agencies;
- NCVER;
- 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.

NCVER will collect, hold, use and disclose your personal information in accordance with the Privacy Act 1988 (Cth), the VET data policy and all NCVER policies and protocols (including those published on NCVER's website at [www.ncver.edu.au](http://www.ncver.edu.au))

For further information about;

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

I declare that the information provided to AIO Training in this application for study is to the best of my knowledge true correct and complete at the time of my application. I acknowledge that 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 AIO Training. I understand that it is my responsibility to provide all relevant and required documentation. I authorise AIO Training to check all available records to confirm that information provided is correct.

I Consent to the collection use and disclose of my personal information in accordance with the Privacy Notice Above.

**Student Signature:** ..... **Date:** .....

*Please note we cannot proceed with enrolment without a signature*