

International Student Enrolment Form

This confidential Enrolment Form asks for personal information about you. The main purpose for collecting this information is for administrative, regulatory and/or research purposes and to ensure our course is suitable for your needs.

All staff at Aspen College are required by law to protect the information provided on this Enrolment Form. More information about privacy is included in the notice at the end of this form. Please contact admissions@aspencollege.edu.au

<input type="checkbox"/> Adelaide Campus (SA)	<input type="checkbox"/> Sydney Campus (NSW)	<input type="checkbox"/> Melbourne Campus (Victoria)
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Application for Enrolment

Which course would you like to enrol into?

Select	CRICOS Code	National Code	Course name	Weeks	Intake date
<input type="checkbox"/>	107600J	BSB50120	Diploma of Business	52	
<input type="checkbox"/>	107601H	BSB60120	Advanced Diploma of Business	52	
<input type="checkbox"/>	103659M	AUR30620	Certificate III in Light Vehicle Mechanical Technology	52	
<input type="checkbox"/>	111281G	AUR30320	Certificate III in Automotive Electrical Technology	52	
<input type="checkbox"/>	099665G	AUR40216	Certificate IV in Automotive Mechanical Diagnosis	52	
<input type="checkbox"/>	109191E	AUR50116	Diploma of Automotive Management	26	
<input type="checkbox"/>	107896K	CPC30220	Certificate III in Carpentry	104	
<input type="checkbox"/>	109192D	CPC31320	Certificate III in Wall and Floor Tiling	104	
<input type="checkbox"/>	110282C	CPC50320	Diploma of Building and Construction (Management)	52	
<input type="checkbox"/>	107895M	RII60520	Advanced Diploma of Civil Construction Design	104	

Have you ever studied with Aspen College before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you wish to apply for Credit ? If YES, certified copies of transcripts from previous qualifications must be provided with this form, along with a Credit Application Form.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe - I'd like more information
Do you wish to apply for Recognition of Prior Learning ? If you indicate YES, you will be contacted to discuss this further.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe - I'd like more information

Personal Details

1. Enter your full name*

Surname:	
Given names:	

**Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names. If you do not yet have a USI and want Aspen College to apply for a USI on your behalf, you must write your name, including any middle names, exactly as written in the identity document you choose to use for this purpose. See section on the USI at the end of this form for a detailed explanation.*

2. Enter your birth date	Day/month/year: ___ / ___ / ___
3. Gender (Tick ONE box only)	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
4. Country of Birth	Nationality

Enter your contact details			
Home phone:	()	Work phone:	()
Mobile:			
Email address:			
Alternative email address (optional)			
5. What is your Australian address (If you are already living in Australia)			
House Number			
Street Name			
Suburb	State:	Post Code:	
6. What is your overseas address			
Building/ property name			
Flat/unit details:		Street or Lot Number (e.g. 205 or Lot 118):	
Suburb, locality or town:			
State/territory:		Postcode:	
Country			
7. Passport and Visa Details			
Passport issued by (Country)			
Passport Number		Passport Expiry Date	
Do you have current Australian Visa	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, what is the visa type?	Visa Subclass :	Visa Expiry Date :	
8. Health Cover			
Do you have current Overseas Student Health Cover (OSHC)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, please provide Name of the insurance company			
What is your membership number?		OSHC Expiry Date	
If no, what type of OSHC will you require?	<input type="checkbox"/> Single (Student only) <input type="checkbox"/> Dual Family (Student plus spouse or children) <input type="checkbox"/> Multi Family (Student plus spouse and children)		
9. English language level			
Provide details and documentation confirming your English language level:			
<input type="checkbox"/> I have taken a recognised English language test in the last two years (e.g. IELTS, PTE, TOFEL and/or Cambridge)			
Name of the test _____ Score _____ Date of test _____			
<input type="checkbox"/> I have successfully completed an English course in Australia (Please attach certificate)			
<input type="checkbox"/> English is my first language			
<input type="checkbox"/> Other _____			

10. Academic record and Previous Qualification Achieved	
1. Are you currently enrolled in any course in Australia for which you received your current student visa, if yes, please answer question 2 and 3 in this section	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you doing this course as a concurrent course?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. The student in concurrent course will need to comply with visa and institute requirements of all courses in which they are enrolled, such as maintaining satisfactory course progress and attendance. To agree, tick Yes	<input type="checkbox"/> Yes <input type="checkbox"/> NA
4. Are you transferring from another education provider in Australia? If yes, please provide details _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Language and cultural diversity	
11. In which country were you born?	<input type="checkbox"/> Australia [1101] <input type="checkbox"/> Other, please specify: _____
12. Do you speak a language other than English at home? <i>If more than one language, indicate the one that is spoken most often.</i>	<input type="checkbox"/> No, English only [1201] <input type="checkbox"/> Yes, other, please specify: _____
13. Are you of Aboriginal or Torres Strait Islander origin? <i>For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes.</i>	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander

Disability	
14. Do you consider yourself to have a disability, impairment or long-term condition which may affect your studies?	<input type="checkbox"/> Yes <input type="checkbox"/> No – <u>go to question 16</u>
15. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list: <i>(You may indicate more than one area)</i>	
<input type="checkbox"/> Hearing/deaf [11]	<input type="checkbox"/> Physical [12]
<input type="checkbox"/> Learning [14]	<input type="checkbox"/> Mental Illness [15]
<input type="checkbox"/> Vision [17]	<input type="checkbox"/> Medical Condition [18]
<input type="checkbox"/> Intellectual [13]	<input type="checkbox"/> Acquired brain impairment [16]
<input type="checkbox"/> Other [19]	

Schooling	
16. What is your highest COMPLETED school level <i>(tick one box only)</i> If you are currently enrolled in secondary education, the <i>Highest school level completed</i> refers to the highest school level you have actually completed and not the level you are currently undertaking. For example, if you are currently in Year 10 the <i>Highest school level completed</i> is Year 9.	
<input type="checkbox"/> Year 12 or equivalent [12]	<input type="checkbox"/> Year 11 or equivalent [11]
<input type="checkbox"/> Year 9 or equivalent [09]	<input type="checkbox"/> Year 8 or below [08]
<input type="checkbox"/> Year 10 or equivalent [10]	<input type="checkbox"/> Never attended school [02]
17. Are you still enrolled in secondary or senior secondary education?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous qualification achieved		
18. Have you SUCCESSFULLY completed any of the qualifications listed in question 19?		<input type="checkbox"/> Yes – <i>indicate below Question 19</i> <input type="checkbox"/> No – <i>Go to Question 20</i>
19. If yes, tick ANY applicable boxes		
<input type="checkbox"/> Bachelor's degree or Higher Degree [008]	<input type="checkbox"/> Advanced Diploma or associate degree [410]	<input type="checkbox"/> Diploma (or associate diploma) [420]
<input type="checkbox"/> Certificate IV (or advanced certificate/technician) [511]	<input type="checkbox"/> Certificate – III (or trade certificate) [514]	<input type="checkbox"/> Certificate – II [521]
<input type="checkbox"/> Certificate – I [524]	<input type="checkbox"/> Other education (including certificates or overseas qualifications not listed here) [990]	

Employment		
20. Of the following categories, which BEST describes your current employment status? <i>(Tick one box only)</i> <i>For casual, seasonal, contract and shift work, use the current number of hours worked per week to determine whether full time (35 hours or more per week) or part-time employed (less than 35 hours per week).</i>		
<input type="checkbox"/> Full-time employee [01]	<input type="checkbox"/> Part-time employee [02]	<input type="checkbox"/> Self-employed – not employing others [03]
<input type="checkbox"/> Self-employed – employing others [04]	<input type="checkbox"/> Employed – unpaid worker in a family business [05]	<input type="checkbox"/> Unemployed – seeking full-time work [06]
<input type="checkbox"/> Unemployed – seeking part-time work [07]	<input type="checkbox"/> Not employed – not seeking employment [08]	

Study reason	
21. Of the following categories, select the one which BEST describes your main reason for undertaking this course/traineeship/apprenticeship? <i>(Tick one box only)</i>	
<input type="checkbox"/> To get a job [01]	<input type="checkbox"/> It was a requirement of my job [06]
<input type="checkbox"/> To develop my existing business [02]	<input type="checkbox"/> I wanted extra skills for my job [07]
<input type="checkbox"/> To start my own business [03]	<input type="checkbox"/> To get into another course of study [08]
<input type="checkbox"/> To try for a different career [04]	<input type="checkbox"/> For personal interest or self-development [12]
<input type="checkbox"/> To get a better job or promotion [05]	<input type="checkbox"/> Other reasons [11]
Answer the following questions	
22.	
a. Why do you want to enrol in this course?	
b. What are your future career/study goals?	
c. Do you have any existing skills and knowledge that relate to this course?	

Unique Student Identifier (USI)

From 1 January 2015, Organisation> 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).

If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-USI/> on computer or mobile device.

23. Enter your unique student identifier

If you already have one

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24. If you do not have a USI, would you like us to apply for a USI on your behalf?

- Yes – *please complete 'Applying o your behalf' questions and declaration.*
 No – *skip to next section*

APPLYING ON YOUR BEHALF Delete highlighted if you do not apply for USIs on behalf of students.

If you would like Aspen College to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>

You must also provide some additional information as noted at the end of this form so that we can apply for a USI on your behalf. Please provide your town/city of birth and ensure that the name written in 'Personal Details' section is exactly the same as written in the document you provide below.

In accordance with section 11 of the *Student Identifiers Act 2014*, Aspen College will securely destroy personal information which we collect from individuals solely for the purpose of applying for a USI on their behalf as soon as practicable after we have made the application or the information is no longer needed for that purpose, unless we are required by or under any law to retain it.

25. Town/City of Birth *(please write the name of the Australian or overseas town or city where you were born)*

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26. We will also need to verify your identity to create your USI. *Please provide details for one of the forms of identity below (numbered 1 to 8).*

1. Australian Driver's Licence

State: _____
Licence Number: _____

2. Medicare Card

Medicare card number _____
Individual reference number (next to your name on Medicare card): ____
Card colour (circle one): Green / Yellow / Blue
Expiry date ___/___/___ (format DD/MM/YYYY)

3. Australian Passport

Passport number _____

4. Non-Australian Passport (with Australian Visa)

Passport number _____
Country of issue _____

5. Immi card

Immi card Number _____

6. Citizenship Certificate

Stock number _____
Acquisition date (day/month/year)
____/____/____

7. Certificate of Registration by Descent

Acquisition date (day/month/year)
____/____/____

USI APPLICATION DECLARATION

- I authorise Aspen College to apply pursuant to sub-section 9 (2) of the Student Identifiers Act 2014, for a USI on my behalf.
 I have read and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at <http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx>

Student Signature:

Date:

/ /

Student Name:

Next of kin/emergency contact			
These are people that Aspen College may need to contact in an emergency during your participation in training. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Aspen College.			
Name:		Relationship to you:	
Address:			
Home phone:	()	Work:	()
Mobile:		Email:	

Agent Details: (Please complete this section if you are using education agent or representative)	
Agent name	
Agent email	
Agent telephone number	

Document Check list	
<input type="checkbox"/> Have you completed all sections of this application	<input type="checkbox"/> Attached a copy of all qualifications
<input type="checkbox"/> Attached copy of visa (if available)	<input type="checkbox"/> Attached copy of English proficiency (if available)
<input type="checkbox"/> Attached copy of passport	<input type="checkbox"/> Read and signed the declaration

PRIVACY NOTICE

Why we collect your personal information

As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us. If you do not provide this information, we will be unable to process your enrolment.

This policy and associated procedures outline Aspen College's approach to ensuring the privacy and confidentiality of all of its staff, students and relevant others.

How we use your personal information

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

How we disclose your personal information

This policy and associated procedures meet the requirements of information management of Standard 4.3 of the Outcome Standards for RTOs and Compliance Requirements (Section 1) regarding information management, as well as Standard 3 of the National Code of Practice for Providers of Education and Training to Overseas Students 2018, as well as the National VET Regulator (Data Provision Requirements) Instrument 2020 and National VET Data Policy.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

How the NCVER and other bodies handle your personal information

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the Privacy Act 1988 (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.

The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (DESE), Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation
- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer
- information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at www.ncver.edu.au/privacy

If you would like to seek access to or correct your information, in the first instance, please contact us using the contact details listed below.

DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how DESE will handle your personal information, please refer to the DESE VET Privacy Notice at <https://www.dese.gov.au/national-vet-data/vet-privacy-notice>

Surveys

You may receive a student survey which may be run by a government department or an NCVET employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

Contact information

At any time, you may contact Aspen College to:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

Please contact us using the contact details provided at the beginning of this Handbook. If you would like to view a copy of our privacy policy and associated procedures, let us know and we will provide this to you.

Student Declaration and Consent, please tick all			
<input type="checkbox"/> I declare that the information I have provided to the best of my knowledge is true and correct. <input type="checkbox"/> I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.			
Student Signature:		Date:	/ /
Student Name:			

DISABILITY SUPPLEMENT

The purpose of the Disability supplement is to provide additional information to assist you with answering the disability question.

Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.

'11 — Hearing/deaf'

Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

'12 — Physical'

A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

'13 — Intellectual'

In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

'14 — Learning'

A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

'15 — Mental illness'

Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.

'16 — Acquired brain impairment'

Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

'17 — Vision'

This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

'18 — Medical condition'

Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic fibrosis, asthma or diabetes.

'19 — Other'

A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.