

APPLICATION FOR ENROLMENT FORM – INTERNATIONAL STUDENTS

ABOUT THIS FORM

Thank you for your interest in seeking enrolment into Australian College of Community and Health Services (ACCHS). This application for enrolment form must be completed in English. If you require any assistance in completing this form, please contact us by phone or email.

You can send this form to us by post or email. Please provide a copy of your passport, your visa (if relevant), your High School Certificate, proof of English language proficiency as specified in the entry requirements and any other requested documents referred to in the course brochure.

COURSE DETAILS

| | |
|-----------------------------|--|
| COURSE YOU WISH TO ENROL IN | |
| REQUESTED START DATE | |

STUDENT DETAILS

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|---|-----|-----------------|--|
| GIVEN NAME/S <i>(including middle name if any)</i> | | | |
| SURNAME | | | |
| DATE OF BIRTH | / / | GENDER | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other |
| PREFERRED FIRST NAME IF DIFFERENT TO THE ABOVE | | PREFERRED TITLE | |

CURRENT RESIDENTIAL ADDRESS

Please provide the physical address (street number and name –not post-office box) where you usually reside rather than any temporary address at which you reside for training, work or other purposes before returning to your home. If you are from overseas, you need to put the exact address listed in your passport or driving licence or birth certificate, official document recognised in your country.

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| | |
| PHONE NUMBER/S | |
| EMAIL ADDRESS | |
| NATIONALITY | |
| EMERGENCY CONTACT <i>(name, relationships and mobile phone number)</i> | |
| DO YOU HOLD A CURRENT AUSTRALIAN VISA? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| TYPE OF VISA AND EXPIRY DATE | Type of visa: Expiry date: / / |

LANGUAGE AND CULTURAL DIVERSITY

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|--|---|
| IN WHICH COUNTRY WERE YOU BORN? | <input type="checkbox"/> Australia [1101] <input type="checkbox"/> Other; please specify: |
| 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: |
| 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

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| DO YOU CONSIDER YOURSELF TO HAVE A DISABILITY? | <input type="checkbox"/> Yes <input type="checkbox"/> No – go the question about schooling |
| <p>If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list.</p> <p>Review the disability supplement to help you select the right area(s).</p> | <input type="checkbox"/> Hearing/deaf 11 <input type="checkbox"/> Physical 12 <input type="checkbox"/> Intellectual 13 <input type="checkbox"/> Learning 14 <input type="checkbox"/> Mental illness 15 <input type="checkbox"/> Acquired brain impairment 16 <input type="checkbox"/> Vision 17 <input type="checkbox"/> Medical condition 18 <input type="checkbox"/> Other 19 |

SCHOOLING

| | |
|--|---|
| <p>WHAT IS YOUR HIGHEST COMPLETED SCHOOL LEVEL?</p> <p><i>Tick ONE box only.</i></p> | <input type="checkbox"/> Year 12 or equivalent 12 <input type="checkbox"/> Year 11 or equivalent 11 <input type="checkbox"/> Year 10 or equivalent 10 <input type="checkbox"/> Year 9 or equivalent 09 <input type="checkbox"/> Year 8 or below 08 <input type="checkbox"/> Never attended school 02 |
| ARE YOU STILL ENROLLED IN SECONDARY OR SENIOR SECONDARY EDUCATION? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

PREVIOUS QUALIFICATIONS STUDIED

| | | | | | | | | | | | | | | | | | |
|--|--|---|-----|---|-----|---|-----|--|-----|---|-----|---|-----|--|-----|--|-----|
| HAVE YOU SUCCESSFULLY COMPLETED ANY OF THE QUALIFICATIONS LISTED BELOW? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | | | | |
| If YES, tick ANY applicable boxes. | <table border="0"> <tr> <td><input type="checkbox"/> Bachelor degree or higher degree</td> <td style="text-align: right;">008</td> </tr> <tr> <td><input type="checkbox"/> Advanced diploma or associate degree</td> <td style="text-align: right;">410</td> </tr> <tr> <td><input type="checkbox"/> Diploma (or associate diploma)</td> <td style="text-align: right;">420</td> </tr> <tr> <td><input type="checkbox"/> Certificate IV (or advanced certificate/technician)</td> <td style="text-align: right;">511</td> </tr> <tr> <td><input type="checkbox"/> Certificate III (or trade certificate)</td> <td style="text-align: right;">514</td> </tr> <tr> <td><input type="checkbox"/> Certificate II</td> <td style="text-align: right;">521</td> </tr> <tr> <td><input type="checkbox"/> Certificate I</td> <td style="text-align: right;">524</td> </tr> <tr> <td><input type="checkbox"/> Other education (including certificates or overseas qualifications not listed here)</td> <td style="text-align: right;">990</td> </tr> </table> | <input type="checkbox"/> Bachelor 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 |
| <input type="checkbox"/> Bachelor 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

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|---|---|---|----|---|----|---|----|---|----|--|----|--|----|--|----|--|----|
| OF THE FOLLOWING CATEGORIES, WHICH BEST DESCRIBES YOUR CURRENT EMPLOYMENT STATUS? (Tick ONE box only) <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> | <table border="0"> <tr> <td><input type="checkbox"/> Full-time employee</td> <td style="text-align: right;">01</td> </tr> <tr> <td><input type="checkbox"/> Part-time employee</td> <td style="text-align: right;">02</td> </tr> <tr> <td><input type="checkbox"/> Self-employed – not employing others</td> <td style="text-align: right;">03</td> </tr> <tr> <td><input type="checkbox"/> Self-employed – employing others</td> <td style="text-align: right;">04</td> </tr> <tr> <td><input type="checkbox"/> Employed – unpaid worker in a family business</td> <td style="text-align: right;">05</td> </tr> <tr> <td><input type="checkbox"/> Unemployed – seeking full-time work</td> <td style="text-align: right;">06</td> </tr> <tr> <td><input type="checkbox"/> Unemployed – seeking part-time work</td> <td style="text-align: right;">07</td> </tr> <tr> <td><input type="checkbox"/> Not employed – not seeking employment</td> <td style="text-align: right;">08</td> </tr> </table> | <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 |
| <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

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|--|---|---------------------------------------|----|--|----|---|----|
| OF THE FOLLOWING CATEGORIES, SELECT THE ONE WHICH BEST | <table border="0"> <tr> <td><input type="checkbox"/> To get a job</td> <td style="text-align: right;">01</td> </tr> <tr> <td><input type="checkbox"/> To develop my existing business</td> <td style="text-align: right;">02</td> </tr> <tr> <td><input type="checkbox"/> To start my own business</td> <td style="text-align: right;">03</td> </tr> </table> | <input type="checkbox"/> To get a job | 01 | <input type="checkbox"/> To develop my existing business | 02 | <input type="checkbox"/> To start my own business | 03 |
| <input type="checkbox"/> To get a job | 01 | | | | | | |
| <input type="checkbox"/> To develop my existing business | 02 | | | | | | |
| <input type="checkbox"/> To start my own business | 03 | | | | | | |

DESCRIBES THE MAIN REASON YOU ARE UNDERTAKING THIS COURSE.

(Tick ONE box only)

- To try for a different career 04
- To get a better job or promotion 05
- It was a requirement of my job 06
- I wanted extra skills for my job 07
- To get into another course of study 08
- For personal interest or self-development 12
- To get skills for community/voluntary work 13
- Other reasons 11

RPL AND CREDIT TRANSFER APPLICATION

PLEASE COMPLETE THIS SECTION IF YOU BELIEVE YOU ARE ELIGIBLE TO APPLY FOR RECOGNITION OF PRIOR (RPL) OR FOR CREDIT TRANSFER.

Please note, applying for this will impact your course duration so bear in mind that if this is approved then your course duration will be less than the time outlined on the course brochure. Depending on the amount that your course is reduced your fees may also be reduced.

I want to apply for a credit transfer for the following unit/s:

I want to apply for RPL for the following unit/s:

If applying for a credit transfer, please attach a certified copy of the Statement of Attainment or Record of Results and Qualification for each unit.

UNIQUE STUDENT IDENTIFIER (USI)

ACCHS 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 <https://www.usi.gov.au/students/create-your-usi/> on computer or mobile device.

Enter your Unique Student Identifier (USI) here:

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If you are exempt from having a Unique Student Identifier (USI), please email your USI exemption letter to us, along with your application for enrolment. Further details about USI exemptions can be found here:

<https://www.usi.gov.au/exemptions>

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.

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

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

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 Employment and Workplace Relations (DEWR), 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.

DEWR 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 DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at <https://www.dewr.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 NCVER 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 ACCHS 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.

Our contact details are:

Email: info@acchs.edu.au

Phone: 02 8005 0010

You may also request our privacy policy if you wish.

STUDENT DECLARATION

| | |
|--|---|
| I DECLARE THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I AGREE TO THE COLLECTION, USE AND DISCLOSURE OF MY PERSONAL INFORMATION AS PER THE PRIVACY NOTICE | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| NAME OF APPLICANT | |
| SIGNATURE | |
| DATE | |

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.