

****Submission of this Application does not equal an accepted enrolment. AADA College will contact you to review your application and eligibility prior to determining whether to proceed with the enrolment. For further information please visit our website: Application and Enrolment Process**

Personal Details

 Single name only ☐

(Tick this box if you have one name only that cannot be written in the following format. Write your single name in the "Family Name section)

Please write the name that you used when you applied for your Unique Student Identifier (USI)

Family Name (Surname):			
Given Name (First Name):			
Second Given Name (Middle):			
Preferred Name:			
Date of Birth:	(Day) ____ / (Month) ____ / (Year) ____		
Have you been known by any other name? (If yes please provide name)			
Gender (Tick one box only):	☐ Male ☐ Female ☐ Other		
Home Address:	Street or lot No: _____ Street Name: _____ Suburb: _____ State: _____ Postcode: _____		
Home Phone:	Mobile No.		
Email Address:			

From 1st January 2015 all RTO's 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 obtained a USI you can apply for it directly at <https://www.usi.gov.au/students/create-your-usi/> on computer or mobile device

Unique Student Identifier (USI):

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Qualification / Short Course you are applying for
Please indicate below, the qualification or units of competency you are applying for with AADA College.

- ☐ HLT35021 Certificate III in Dental Assisting (Full Qualification)
☐ HLT45021 Certificate IV in Dental Assisting (Full Qualification)
☐ HLT33115 Certificate III in Health Services Assistance
☐ BSB30120 Certificate III in Business (Full Qualification)
☐ HLTAID009 – Provide Cardiopulmonary resuscitation (CPR)
☐ HLTAID011 - Provide First Aid

Start Date of Course: _____

Language and Cultural Diversity

In which country where you born?

☐ Australia ☐ Other (please specify) _____

What is your Citizenship Status?

☐ Australian Citizen ☐ New Zealand Citizen
☐ Australian Permanent Resident ☐ New Zealand Resident
☐ Visa Holder

Do you speak a language other than English at home?

☐ No, English only ☐ Yes, Other (please specify) _____

How well do you speak English?

☐ Very Well ☐ Well ☐ Not Well ☐ Not at all

Are you of Aboriginal or Torres Strait Islander origin? (Please tick one)

☐ No ☐ Yes, Aboriginal ☐ Yes, Torres Strait Islander

Disability

Do you consider yourself to have a disability, impairment or long-term condition? (please tick one)

☐ Yes ☐ No

If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

☐ Hearing/Deaf ☐ Learning ☐ Visual
☐ Physical ☐ Mental Illness ☐ Medical Condition
☐ Intellectual ☐ Acquired brain impairment ☐ Other

Schooling

What is the highest COMPLETED school level? (tick one box only)

If you are currently enrolled in secondary education, the highest school level completed 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 Highest school level completed is Year 9.

☐ Year 12 or equivalent ☐ Year 9 or equivalent
☐ Year 11 or equivalent ☐ Year 8 or below
☐ Year 10 or equivalent ☐ Never completed any primary or secondary level education (go to question 14)

What year did you complete the above?

Are you still enrolled in secondary or senior secondary education? (tick one box only)

☐ Yes (please complete LUI below) ☐ No

If you are currently attending secondary school and applying to enrolling into a qualification with AADA College, please include your Learner Unique Identifier (LUI) number below. This will ensure the information is reflected on your QCAA account and banked towards your QCS.

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Learner Unique Identifier (LUI)

Previous qualifications achieved

Have you SUCCESSFULLY completed any of the qualifications listed in below?

☐ Bachelor degree or higher degree ☐ Certificate IV (or advanced certificate/technician) ☐ Certificate I
☐ Advanced diploma or associate degree ☐ Certificate III (or trade certificate) ☐ Other Education (including certificates or overseas qualifications not listed above)
☐ Diploma (or associate diploma) ☐ Certificate II

Name of qualifications completed (indicated above)

Are you currently enrolled in any other Qualification?: ☐ No ☐ Yes

Employment		
☐ Full-Time employee (35hrs or more per week)	☐ Self Employed – Employing others	☐ Unemployed – Seeking part time work
☐ Part Time Employee (less than 35hrs per week)	☐ employed – unpaid worker in a family business	☐ Not Employed – Not seeking employment
☐ Self Employed – not employing others	☐ Unemployed – Seeking full time work	
Study Reason		
Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship (tick one box only)		
☐ To get a job	☐ It was a requirement of my job	☐ To get skills for community/voluntary work
☐ To develop my existing business	☐ I wanted extra skills for my job	☐ Other
☐ To try for a different career	☐ To get into another course of study	
☐ To get a better job or promotion	☐ For Personal Interest or self-Development	
Employer Details (If applicable)		
Business Contact:	ABN:	
Business Name:		
Business Address:		
Email Address:	Phone No:	
Emergency Contact (next of Kin)		
First Name:	Surname:	
Email Address:	Phone No:	
Relationship (e.g.) Partner, Mother etc		

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.

Failure to provide the information requested may result in AADA College declining your application for training and not proceeding to 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 your RTO 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 the 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 AADA 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

Applicant Declaration

I confirm the information declared on this training application form to be true and correct.

- I understand that if it is deemed that the training product may not be suitable for me that AADA College may recommend I undertake other training prior to applying again.
- I commit to participating in a pre-enrolment assessment (PEA) conversation and understand that this application is not a confirmed enrolment until the PEA has been completed and I am notified in writing.
- I acknowledge the participant handbook has been issued to me.
- I understand that as a requirement of Nationally Recognised Training and Government funding programs, I may be contacted to complete surveys and receive other correspondence directly from the relevant governing body or their authorised agents.
- I have read and understood the Privacy Notice in this document.

Participants Name:	
Participants Signature:	
Date:	

Parent/Guardian Declaration

If the participant is under the age of eighteen years, a parent/guardian must sign below acknowledging the information completed on this enrolment form is true and correct, and that they have read and understood the Applicant Declaration above.

Parent/Guardian Name:	
Parent/Guardian Signature:	
Date:	