



## Privacy Statement & Student Declaration

### Privacy Notice:

Under the Data Provision Requirements 2012, Australian Technical College Western Australia (ATCWA) 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 ATCWA for statistical, regulatory and research purposes.

ATCWA 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 Statements of Attainment or 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 programme 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 (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)).

### Student Declaration:

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

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

### Student Signature

[or electronic acknowledgement]: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_



### Personal Details

<b>Family Name (surname):</b>	
<p>1. As it appears on your passport; and</p> <p>2. 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 ATCWA to apply for a USI on your behalf, <b>you must write your name, including any middle names, exactly as written in the identity document you choose to use for this purpose.</b> See section on the USI at the end of this form for a detailed explanation.</p>	
<b>Given Name/s:</b>	
<b>Gender (Tick ONE box only):</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
<b>Date of Birth (DD/MM/YYYY):</b>	/    /
<b>In which country were you born?</b>	<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify): _____
<b>Are you an Australian Citizen?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are you of Aboriginal or Torres Strait Islander origin?</b> (For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander
<b>Country of Citizenship:</b>	
<b>Visa Details:</b> (Not applicable if an Australian citizen)	<b>Subclass:</b> <b>Where will application be lodged (if offshore):</b>  <b>End Date (if current holder):</b>
<b>Passport Number</b>	<b>Place of Issue:</b>
<b>Passport Expiry Date (DD/MM/YYYY):</b>	/    /
<b>Have you ever been convicted of a criminal offence?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Contact Details

<b>Home Phone:</b>	<b>Work Phone:</b>
<b>Mobile:</b>	<b>Email Address:</b>
<b>Alternative Email Address:</b>	
<b>Emergency Contact Name (in Australia):</b>	

# Enrolment Form



Australian Technical College

Western Australia

RTO Code: 41279 | CRICOS No: 03437B

<b>Emergency Contact Phone Number:</b>	
<b>What is the address of your usual residence?</b> 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 a rural area, use the address from your state or territory's 'rural property addressing' or 'numbering' system as your residential street address. Building/property name is the official place name or common usage name for an address site, including the name of a building, Aboriginal community, homestead, building complex, agricultural property, park or unbounded address site.	
<b>Building/property name</b>	
<b>Flat/unit details</b>	
<b>Street or lot number (e.g. 205 or Lot 118)</b>	
<b>Street name</b>	
<b>Suburb, locality or town</b>	
<b>State/territory</b>	
<b>Country</b>	
<b>Postcode</b>	
<b>What is your postal address (if different from above)?</b>	
<b>Building/property name</b>	
<b>Flat/unit details</b>	
<b>Street or lot number (e.g. 205 or Lot 118)</b>	
<b>Street name</b>	
<b>Postal delivery information (e.g. PO Box 254)</b>	
<b>Suburb, locality or town</b>	
<b>State/territory</b>	
<b>Postcode</b>	





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

(You may indicate more than one area. Please refer to the Disability Supplement at the end of this form for an explanation of the following disabilities.)

- |                                                                    |                                       |                                                    |                                 |
|--------------------------------------------------------------------|---------------------------------------|----------------------------------------------------|---------------------------------|
| <input type="checkbox"/> Hearing / deaf                            | <input type="checkbox"/> Learning     | <input type="checkbox"/> Mental Illness            | <input type="checkbox"/> Vision |
| <input type="checkbox"/> Physical                                  | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Acquired Brain Impairment |                                 |
| <input type="checkbox"/> Medical Condition (please specify): _____ |                                       |                                                    |                                 |
| <input type="checkbox"/> Other (please specify): _____             |                                       |                                                    |                                 |

## Education Details

### Secondary Studies

What is your highest COMPLETED school level?  
(Tick ONE box only)

- Year 12 or equivalent
- Year 11 or equivalent
- Year 10 or equivalent
- Year 9 or equivalent
- Year 8 or below
- Never attended school

Are you still enrolled in secondary or senior secondary education?

- Yes     No

### Tertiary Studies

Have you SUCCESSFULLY completed any of the following qualifications?  
(Tick  ALL applicable boxes)

If YES, was the qualification Australian or International?  
(Tick  applicable box relevant to each qualification)

- Yes (see below)     No
- Bachelor degree or higher degree
  - Australian     International
- Advanced diploma or associate degree
  - Australian     International
- Diploma (or associate diploma)
  - Australian     International
- Certificate IV (or advanced certificate/technician)
  - Australian     International
- Certificate III (or trade certificate)
  - Australian     International
- Certificate II
  - Australian     International
- Certificate I
  - Australian     International
- Other education (including certificates or overseas qualifications not listed above)
  - Australian     International

Are you applying for National Recognition or Recognition of Prior Learning (RPL)?  
(If Yes, please attach your application with this Enrolment Form.)

- Yes     No



## Employment Details - Please attach your Curriculum Vitae

<p><b>Which of the following best describes your current employment status?</b> (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).</p>	<p> <input type="checkbox"/> Full-time employee  <input type="checkbox"/> Part-time employee - No. of hours per week: _____  <input type="checkbox"/> Self-employed – not employing others  <input type="checkbox"/> Self-employed – employing others  <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         </p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

## Reason for Study

<p><b>Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship:</b> (Tick <input checked="" type="checkbox"/> ONE box only)</p>	<p> <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 is 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         </p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

## Overseas Student Health Cover (OSHC)

<p><b>Do you have OSHC cover?</b> (If Yes, please attach evidence with this Enrolment Form and provide details).</p>	<p> <input type="checkbox"/> Yes <input type="checkbox"/> No            Provider name: _____            Type: <input type="checkbox"/> Single <input type="checkbox"/> Couple <input type="checkbox"/> Family            Membership number: _____            Expiry Date: _____         </p>
<p><b>If No, would you like ATCWA to arrange OSHC for you?</b> If Yes, please provide details. Please note that the Department of Home Affairs require you to have OSHC coverage for the duration of your student visa).</p>	<p> <input type="checkbox"/> Yes <input type="checkbox"/> No            Type: <input type="checkbox"/> Single <input type="checkbox"/> Couple <input type="checkbox"/> Family            Duration: _____         </p>



### Agent / Marketing

<b>How did you hear about ATCWA?</b>	<input type="checkbox"/> Agent <input type="checkbox"/> Expo <input type="checkbox"/> Events <input type="checkbox"/> Facebook <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Television <input type="checkbox"/> Google <input type="checkbox"/> Newspaper <input type="checkbox"/> Magazine <input type="checkbox"/> Radio <input type="checkbox"/> Other Social Media <input type="checkbox"/> Other (please list) _____
<b>If applying through an education or migration agent, please provide details</b>	Company Name: _____ Agent Representative Name: _____ Email: _____ Phone: _____ MARA Number: _____ QEAC Number: _____
<b>Agent's Signature:</b>	
<b>Agent Stamp:</b>	

### Application Checklist

- Certified evidence of English Language Proficiency (IELTS, TOEFL, PTE, ELICOS, etc.)
- Certified evidence of completing Year 12 or equivalent (with certified translation if not in English)
- Certified copy of passport
- Evidence of financial capacity (if relevant)
- Copy of current visa (if relevant)
- Copy of release letter (if relevant)
- Evidence of OSHC (if relevant)
- Application for Course Credit (if applicable)
- Other (please describe): \_\_\_\_\_

### Explanatory Notes

The following information and conditions of enrolment at ATCWA are provided to applicants for information only. This information does not form a binding agreement between the student and ATCWA. Applicants who meet the admission and/or entry requirements and for whom ATCWA accepts enrolment, will receive a Letter of Offer and Course Acceptance Agreement. A binding agreement is made between the applicant and ATCWA when they return the signed Letter of Offer and Student Course Acceptance Agreement and pay the initial fee as stated in the Letter of Offer and Student Course Acceptance Agreement.

## Enrolment Requirements

To be considered for direct entry to training courses offered by ATCWA, applicants must:

- Complete the Enrolment Form in full;
- Provided evidence to confirm that they have met the criteria for the course in which they are seeking enrolment.

## Supporting Documentation

Please read this section carefully. You will have to provide documentation with your application. If you fail to supply documentation that is required for enrolment, you could jeopardise your application which may result in your application being unsuccessful. Evidence of the qualifications and experience you enter on your application will need to be provided so that we can assess your application to see if we can make you an offer of a place in the course you have selected. The types of documentation you have to provide depends on the types of qualifications and experience you have and your level of English. ATCWA will not return the documents you submit with your application. Therefore, it is important that you ONLY submit certified copies of original documents. A certified document has been witnessed and declared to be a true and correct copy of the original. If you bring original documentation with you, it doesn't have to be certified as staff from ATCWA will verify its authenticity. The following people can certify documents; a Justice of the Peace, a Police Officer, a Postal Manager, a Bank Manager, a School Principal, a Solicitor or an Accountant. Where the documents are not in English, they must be official translations and certified as copied correctly.

## Declaration

You must read the declaration and sign this form for your application to be processed. Unsigned applications will not be considered.

## Terms and Conditions

### 1. PAYMENT OF FEES AND CHARGES:

- 1.1 The Enrolment Fee referred to in the Letter of Offer (LOO) and Student Course Acceptance Agreement included with the Enrolment Form is not refundable if the application is accepted and the applicant wishes to cancel their enrolment. The Application Fee covers the cost of the review of the initial application.
- 1.2 All fees and charges are payable in Australian Dollars prior to or on the due date as specified by ATCWA's LOO.
- 1.3 All fees and charges payable are specified on the Letter of Offer and Student Course Acceptance Agreement and fees payable in accordance with the approved payment plan (where relevant) and upon acceptance of the Letter of Offer and Student Course Acceptance Agreement and Terms and Conditions of enrolment.
- 1.4 Fees and charges for all subsequent study periods are specified by ATCWA on each subsequent invoice issued for each study period.
- 1.5 All late payment of fees will incur a late payment charge of \$50.00 where the fee is less than \$500 or 10% of the tuition fee where the fee is above \$500.00 for each late payment.
- 1.6 Any refund of fees will be in accordance with the ATCWA Refund Policy. <https://bit.ly/2wo40Ep>
- 1.7 A study period/term is considered to be ten (10) academic weeks in duration.

### 2. COOLING OFF PERIOD:

- 2.1 A cooling off period may apply where relevant. Please refer to your Letter of Offer and Student Course Acceptance Agreement.
- 2.2 ATCWA's written agreement, and the right to make complaints and appeals of decisions and action under various processes, does not affect the rights of the student to take action under the Australian Consumer Law if the Australian Consumer Law applies.





## 5. GUARANTEE:

5.1 I, the undersigned, having read and understood the conditions stated herein, agree to guarantee payment of all course fees and course costs incurred by the Applicant in relation to the education and training services provided by ATCWA:

**Print Applicant's Name:**

**Signature of Applicant's Guarantor:**

**Date:**

**Name of Applicant's Guarantor (Please Print in Full):**

**Address of Guarantor:**

**Occupation of Guarantor:**

## Disability Supplement

### Introduction:

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

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

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'

**Enrolment Form**

**Version:** 010

**Responsibility:** CEO

**Published:** 30 SEP 2020

**Review:** 01 OCT 2021

www.atc.wa.edu.au

info@atc.wa.edu.au

+61 8 6377 8270

**Campus:** 8 Francis Street, Perth WA 6000

**ABN:** 34 157 852 367

# Enrolment Form



**Australian Technical College**

**Western Australia**

RTO Code: 41279 | CRICOS No: 03437B

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, Cohn'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.