

Enrolment Form - Queensland

Students who would like to enrol in a program or qualification must complete **all** areas of the Enrolment Application Form. Please note that the information contained with this document may be supplied to, and used by governments and other agencies for administration and research in accordance with legislative requirements. To watch a short video on "How to Make Your Enrolment Count" view <https://youtu.be/Rd8Cd4H6kNA>.

1. Course Details

Qualification Name			
Qualification Code			
Short Courses			
Delivery Method	<input type="checkbox"/> Classroom <input type="checkbox"/> Recognition <input type="checkbox"/> Blended	<input type="checkbox"/> Work based Training and Assessment <input type="checkbox"/> e-Learning	
Proposed Course Dates			
Do you wish to apply for Credit Transfer? If yes, please attach relevant transcript(s)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

2. Personal Details

When completing the table below please write the name used when you applied for your Unique Student Identifier (USI), including any middle names and provide the physical address where you usually reside rather than a temporary address which you reside for training, work or other purposes.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Ms <input type="checkbox"/> Miss	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
First Name		Surname	
Middle Name		Former Name (if applicable)	
Unique Student Identifier (USI)		Date of Birth Note: Proof of age required	____ / ____ / ____ Date / Month / Year
Residential Address Note: Proof of current address required			
Suburb		State	Post Code
Postal Address (if different from above)		State	Post Code
Email Address			
Home Phone		Work Phone	
Mobile Phone		Emergency Phone	
Emergency Contact			

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3. Disability/ Special Need

All information is collected, stored and destroyed confidentially. The information collected below will be used to support students who have a special need or an additional support requirement by the development of an individualised learning and assessment plan. For government subsidised students who have a disability fee concessions maybe available.

Do you have a disability, impairment or long term condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please select the areas in the following list. NOTE: You may select more than one area.
<input type="checkbox"/> Hearing/Deaf <input type="checkbox"/> Physical <input type="checkbox"/> Intellectual	<input type="checkbox"/> Learning <input type="checkbox"/> Mental Illness <input type="checkbox"/> Vision <input type="checkbox"/> Medical Condition <input type="checkbox"/> Other <input type="checkbox"/> Acquired brain impairment
Has your disability ever been assessed by a health professional/specialist?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you on a disability support pension?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a dependent child or spouse of a person in receipt of a disability support pension?	<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Language and Cultural Diversity

Are you an Australian Citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Evidence of citizenship/ residency/visa § Attach evidence to application form	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> Medicare card <input type="checkbox"/> Passport <input type="checkbox"/> Naturalisation Certificate <input type="checkbox"/> Certificate of Evidence of Resident Status (CERS) <input type="checkbox"/> Visa <input type="checkbox"/> Other Click here to enter text.		
If you are not an Australian Citizen or Permanent Resident list your Visa Type.	Visa Type _____ § Attach evidence to application form		
In which country were you born?	<input type="checkbox"/> Australia	<input type="checkbox"/> Other – Please Specify _____	
Do you speak a language other than English at home?	<input type="checkbox"/> No	<input type="checkbox"/> Yes – Please Specify _____	
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		
Are you Aboriginal or Torres Strait Islander? NOTE: For persons of both Aboriginal and Torres Strait Islander origin, tick both YES boxes.	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander		

5. Schooling

What is the highest level of school that you completed?	<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent	<input type="checkbox"/> Year 9 or equivalent <input type="checkbox"/> Year 8 or below
In what year did you complete that school level?		
Are you still attending secondary school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you currently studying with another Registered Training Organisation (RTO)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you registered for a Traineeship?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If currently registered or awaiting registration for a Queensland Traineeship identify your Apprenticeship Centre.	Click here to enter text.	

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6. Previous Qualification achieved

Have you successfully completed a qualification?		<input type="checkbox"/> Yes <input type="checkbox"/> No If YES, tick the applicable boxes	
<input type="checkbox"/> Bachelor degree or higher degree	<input type="checkbox"/> Certificate IV (or advanced certificate technician)	<input type="checkbox"/> Certificate I	
<input type="checkbox"/> Advanced diploma or associate degree	<input type="checkbox"/> Certificate III (or trade certificate)	<input type="checkbox"/> Certificates other than the above	
<input type="checkbox"/> Diploma or associate diploma	<input type="checkbox"/> Certificate II		
Have you started a qualification that was not completed?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		If YES, what qualification _____	
		What Training Organisation? _____	
Did you complete your qualification(s)?		<input type="checkbox"/> Whilst at school <input type="checkbox"/> Since leaving school <input type="checkbox"/> This calendar year	
Was your qualification funded under the Certificate 3 Guarantee Program?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Please list all qualifications and the year that they were completed. NOTE: If applying for credit transfer please attach a copy of your Qualification and Transcript of Results.	Qualification	Year	

7. Employment

Of the following categories, which best describes your current employment status?	
<input type="checkbox"/> Full Time employee <input type="checkbox"/> Part-employee <input type="checkbox"/> Employer	<input type="checkbox"/> Self-employed – not employing others <input type="checkbox"/> Unemployed – seeking full-time work <input type="checkbox"/> Employed – unpaid in a family business <input type="checkbox"/> Not employed – not seeking employment
Are you currently registered with a Job/ Employment Service Provider?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If YES – Please provide the following details Name of Job/ Employment Service Provider Employment Service Provider Client ID (JSID)	Click here to enter text. Click here to enter text.

8. Study Reason

Of the following categories, which best describes your reason for undertaking this course / traineeship / apprenticeship?			
<input type="checkbox"/> To get a job	<input type="checkbox"/> To try for a different career	<input type="checkbox"/> I wanted extra skills for my job	<input type="checkbox"/> For personal reasons or self-development
<input type="checkbox"/> To develop my existing business	<input type="checkbox"/> To get a better job or promotion	<input type="checkbox"/> To get into another course of study	<input type="checkbox"/> Other reasons
<input type="checkbox"/> To start my own business	<input type="checkbox"/> Job		

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9. Funding Options

Certificate 3 Guarantee	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fee for Service	<input type="checkbox"/> Yes	<input type="checkbox"/> No

10. Concession

I would like to apply for the concession fee	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>Concession fee eligibility</p> <p>Note:</p> <ul style="list-style-type: none"> You must provide suitable evidence to qualify for a concession fee – Please attach § 	<input type="checkbox"/> Pensioner Concession Card <input type="checkbox"/> Evidence of Disability <input type="checkbox"/> Commonwealth Health Care Card <input type="checkbox"/> Partner or dependent of a person who holds a Pensioner Concession Card <input type="checkbox"/> Partner or dependent of a person who holds a Health Care Card <input type="checkbox"/> Aboriginal or Torres Strait Islander <input type="checkbox"/> Adult Prisoner	

11. Fee Free Training Arrangements

I would like to apply under the Fee Free Training Arrangement.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>Note:</p> <ul style="list-style-type: none"> You must provide suitable evidence to qualify for Fee Free Training – Please attach § The student must enrol and start training by the end of the calendar year following the completion of year 12 	<input type="checkbox"/> Senior Statement <input type="checkbox"/> Statement of Results Issued by the Queensland Studies Authority	

12. Unique Student Identifier

From 1 January 2015 all students undertaking nationally recognised training must have a Unique Student Identifier (USI) and provide that USI to their Registered Training Organisation for verification. If you do not have a USI number, you can apply directly at <http://www.usi.gov.au/create-your-usi/>. BSI Learning is not able to issue AQF certification documentation (your certificate, record of results or statement of attainment) without a verified USI.

Read the permission statements below and tick if consent is provided.

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> also contained on page 6 of the enrolment form.

I give my permission to BSI Learning to **apply** for a USI on my behalf pursuant to subsection 9(2) of the Student Identifiers Act 2014

I agree to provide one of the forms of identity required to create a USI • Australian Driver Licence • Medicare Card • Passport • Non –Australian Passport with Australian Visa • Immicard •Citizenship Certificate • Certificate of Registration by Descent • QCS Letter.

I give permission for BSI Learning to **verify** my USI.

In accordance with section 11 of the Student Identifiers Act 2014 BSI learning will securely destroy all personal information which is collected from individuals solely for the purpose of applying for a USI as soon as practicable (after the application has been made or when the information is no longer needed for that purpose, unless required by or under any law to retain it).

13. Referral

How did you hear about BSI Learning	<input type="checkbox"/> Website <input type="checkbox"/> TV/Radio advertising <input type="checkbox"/> Newspaper Advertising	<input type="checkbox"/> Employer <input type="checkbox"/> Other _____
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14. Declarations and Consent

All information provided to BSI Learning as part of the enrolment process is true and correct to the best of my knowledge and understanding. I am aware of the consequences that may arise from providing false, misleading or incomplete information, including the cancellation of my enrolment or the withdrawal of the offer made.		<input type="checkbox"/> Yes <input type="checkbox"/> No
I understand that personal information collected by BSI Learning may be supplied to, and used by governments and other agencies for administration, regulation and research. I understand that my information may be disclosed to my employer (if I am enrolled in training paid by my employer) or school (if I am a school based apprentice /trainee or VET in Schools student) if applicable. I understand that personal information required by the Department of Education and Training will be securely stored by BSI Learning for a period of no less than 6 years after which it will be securely destroyed. I consent for the information collected to be used, and disclosed by BSI Learning in accordance with legal, regulatory and data provision requirements.		<input type="checkbox"/> Yes <input type="checkbox"/> No
I have been provided with the relevant Student Fact sheet published on the Department of Training website.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
I understand that I am required, when accessing a Queensland Government subsidised training place to complete a Student Training and Employment Survey within three months of completing or discontinuing my training. I agree to complete this survey as directed.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
I am aware that I may receive a National Centre for Vocational Education Research (NCVER) student survey and that I will be required to participate in an evaluation.		<input type="checkbox"/> Yes <input type="checkbox"/> No
I would like to enrol in this course having been provided with sufficient information (e.g. student handbook, pre-enrolment information, and course and fee information) in which to make an informed decision prior to enrolment.		<input type="checkbox"/> Yes <input type="checkbox"/> No
I agree to the fee/s being charged, payment terms and refund policy and procedure.		<input type="checkbox"/> Yes <input type="checkbox"/> No
I have been made aware of the expectations and rules regarding accessing a Certificate 3 Guarantee subsidised training place and understand that I will not be eligible for a government subsidised training place once I have completed the program in which I am enrolling.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
I am aware of my rights and responsibilities as a student and agree to abide by the policies and procedures of the organisation outlined in the Student Handbook and on the BSI Learning Website.		<input type="checkbox"/> Yes <input type="checkbox"/> No
I agree for photos taken in the course of training to be used in marketing/advertising materials including social media. I understand that any photos taken will not be provided to another party without my consent.		<input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name	____ / ____ / ____	
Signature	Day / Month/ Year	
Parent/Guardian Name Required if Student is under 18 years of age	Parent /Guardian Signature Required if Student is under 18 years of age	
Full Name:	Signature:	Date:
Parent/Guardian Name: Required if Student is under 18 years of age	Signature:	Date:

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Australian Government 2016 USI Privacy Notice

Instructions: The following information is provided to you on behalf of the Student Identifiers Registrar (Registrar) www.usi.gov.au when an RTO applies for a USI on behalf of a student. It is a requirement of your enrolment that you read the below information prior to the provision of consent.

You are advised and agree that you understand and consent that the personal information you provide in connection with your application for a Unique Student Identifier (USI):

- is collected by the Registrar as authorised by the *Student Identifiers Act 2014*.
- is collected by the Registrar for the purposes of:
 - applying for, verifying and giving a USI;
 - resolving problems with a USI; and
 - creating authenticated vocational education and training (VET) transcripts;
- may be disclosed to:
 - Commonwealth and State/Territory government departments and agencies and statutory bodies performing functions relating to VET for:
 - the purposes of administering and auditing VET, VET providers and VET programs;
 - education related policy and research purposes; and
 - to assist in determining eligibility for training subsidies;
 - VET Regulators to enable them to perform their VET regulatory functions;
 - VET Admission Bodies for the purposes of administering VET and VET programs;
 - current and former Registered Training Organisations to enable them to deliver VET courses to the individual, meet their reporting obligations under the VET standards and government contracts and assist in determining eligibility for training subsidies;
 - schools for the purposes of delivering VET courses to the individual and reporting on these courses;
 - the National Centre for Vocational Education Research for the purpose of creating authenticated VET transcripts, resolving problems with USIs and for the collection, preparation and auditing of national VET statistics;
 - researchers for education and training related research purposes;
 - any other person or agency that may be authorised or required by law to access the information;
 - any entity contractually engaged by the Student Identifiers Registrar to assist in the performance of his or her functions in the administration of the USI system; and
- will not otherwise be disclosed without your consent unless authorised or required by or under law.

The consequences for not providing the Registrar with some or all of your personal information are that the Registrar will not be able to issue you with a USI.

Privacy policies and complaints

You can find further information on how the Registrar collects, uses and discloses the personal information about you in the [Registrar's Privacy Policy](#) or by contacting the Registrar on usi@education.gov.au or telephone the Skilling Australia Information line on 13 38 73, international enquiries +61 3 5454 5280. The Registrar's Privacy Policy contains information about how you may access and seek correction of the personal information held about you and how you may make a complaint about a breach of privacy by the Registrar in connection with the USI and how such complaints will be dealt with.

You may also make a complaint to the Information Commissioner about an interference with privacy pursuant to the *Privacy Act 1988*, including in relation to the misuse or interference of or unauthorised collection, use, access, modification or disclosure of USIs.