

BSBSMB401 Student enrolment form

Instructions:

If you are completing this form you must read the complaints and appeals policy on pages 16 of the student handbook, learner rights, refunds pages 15, withdrawal page 16, prior to completing or submitting this form. In addition If your doing this course face to face, sighted original documents are acceptable. If completing this course via distance, you will need to submit copies of listed identification via Email to contact@sitedu.com.au or post to 1690 David Low Way, Coolum Beach, Sunshine Coast, QLD 4573.

Qualification information		
CPC40110 Certificate IV in Building and Construction (Building)	<input type="checkbox"/>	
Check the box against the course you are enrolling into:		
Course	# of units	Non-funded student fee
BSBSMB401 Establish legal and risk requirements of small business	1	\$150.00 <input type="checkbox"/>

Student identification – You will need to provide 2 of the following ID as evidence of your identity.		
Australian citizen, Permanent resident or New Zealand citizen and residency		
<ul style="list-style-type: none"> • Australian full birth certificate or birth certificate extract <input type="checkbox"/> • Passport <input type="checkbox"/> • Medicare Card (green only) <input type="checkbox"/> • Visa <input type="checkbox"/> 	<ul style="list-style-type: none"> • Driver's License (Front & Back) <input type="checkbox"/> • Immicard <input type="checkbox"/> • Certificate of Registration by Descent <input type="checkbox"/> • Telephone account <input type="checkbox"/> • Bank statement <input type="checkbox"/> 	<ul style="list-style-type: none"> • Statement from a real estate agent or <input type="checkbox"/> • Any formal documentation stating the participant's full name and current residential address <input type="checkbox"/>

Personal details: * 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 [name of RTO] 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		
FAMILY NAME:		GIVEN NAMES:
DATE OF BIRTH: DD/MM/YY	GENDER: Male <input type="checkbox"/> Female <input type="checkbox"/>	
CONTACT DETAILS:		
HOME PHONE:		WORK PHONE:
MOBILE:	EMAIL ADDRESS:	ALTERNATIVE EMAIL ADDRESS(OPTIONAL):

What is the address of your usual residence?		
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.		
Building/property name	Flat/unit details	
Street or lot number (e.g. 205 or Lot 118)	Street name	
Suburb, locality or town	State/territory QLD	Postcode 4561

What is your postal address (if different from above)		
Building/property name	Flat/unit details	
Street or lot number (e.g. 205 or Lot 118)	Street name	
Suburb, locality or town	State/territory	Postcode

Language and cultural diversity	
In which country were you born? Australia <input type="checkbox"/> 1101	Other – please specify (If you were not born in Australia. Indicate which country)
Town or city of Birth (<i>specify</i>)	

Do you speak a language other than English at home? (if more than one language, indicate the one that is spoken most often)	
No, English only <input type="checkbox"/> 1201 (English only – go to question 9)	Yes, other – please specify
Are you of Aboriginal or Torres Strait Islander origin? No <input type="checkbox"/>	Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/>
Are you an Australian Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	Australian Permanent resident? Yes <input type="checkbox"/> No <input type="checkbox"/>
New Zealand Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	A refugee and humanitarian visa holder? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you a permanent resident in Queensland? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you permanently employed in Queensland? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you a Health care Card holder? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Disability	
Do you have a disability, impairment or long-term condition?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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)	
Hearing/deaf <input type="checkbox"/> 11	Physical <input type="checkbox"/> 12 Intellectual <input type="checkbox"/> 13
Learning <input type="checkbox"/> 14	Mental illness <input type="checkbox"/> 15 Acquired brain impairment <input type="checkbox"/> 16
Vision <input type="checkbox"/> 17	Medical condition <input type="checkbox"/> 18 Other <input type="checkbox"/> 19

Schooling & Education: 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.	
What is your highest COMPLETED school level? (Tick ONE box only)	
Year 12 or equivalent <input type="checkbox"/> 12	Year 11 or equivalent <input type="checkbox"/> 11 Year 10 or equivalent <input type="checkbox"/> 10
Year 9 or equivalent <input type="checkbox"/> 09	Year 8 or below <input type="checkbox"/> 08 Never completed any primary or secondary level education <input type="checkbox"/> 02
In which YEAR did you complete that school level?	
Are you still attending secondary school? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Previous qualifications achieved: Have you completed any of the following qualifications?

Yes No

If YES, then tick ANY applicable boxes.

Bachelor degree or higher degree <input type="checkbox"/> 008	Advanced diploma or associate degree 410 <input type="checkbox"/>	Diploma (or associate diploma) <input type="checkbox"/> 420
Certificate IV (or advanced certificate/technician) <input type="checkbox"/> 511	Certificate III (or trade certificate) <input type="checkbox"/> 514	Certificate II <input type="checkbox"/> 521
Certificate I <input type="checkbox"/> 524	Other education (including certificates or overseas qualifications not listed above) <input type="checkbox"/> 990	

Employment: Of the following categories, which BEST describes your current employment status?

(Tick ONE box only)

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).

Full-time employee <input type="checkbox"/> 01	Part-time employee <input type="checkbox"/> 02	Self-employed – not employing others <input type="checkbox"/> 03	Self-employed – employing others <input type="checkbox"/>
Employed – unpaid worker in a family business <input type="checkbox"/> 05	Unemployed – seeking full-time work <input type="checkbox"/> 06	Unemployed – seeking part time work <input type="checkbox"/> 07	Not employed – not seeking employment <input type="checkbox"/> 08

How long have you worked in construction industry?

Study reason

Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship (Tick ONE box only)

To get a job <input type="checkbox"/> 01	To develop my existing business <input type="checkbox"/> 02	To start my own business <input type="checkbox"/> 03
To try for a different career <input type="checkbox"/> 04	To get a better job or promotion <input type="checkbox"/> 05	It was a requirement for my job <input type="checkbox"/> 06
I wanted extra skills for my job <input type="checkbox"/> 07	To get into another course of study <input type="checkbox"/> 08	For personal interest of self development <input type="checkbox"/> 12
Other reasons <input type="checkbox"/> 11		

Student services

Indicate which services you require assistance with? (You can tick more than one box)

Recognition of Prior Learning Yes <input type="checkbox"/> No <input type="checkbox"/>	Credit Transfer Yes <input type="checkbox"/> No <input type="checkbox"/>	Language Literacy and Numeracy Yes <input type="checkbox"/> No <input type="checkbox"/>	One on one mentoring Yes <input type="checkbox"/> No <input type="checkbox"/>
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Unique Student identifier:

From 1 January 2015, we [insert RTO name] 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 <http://www.usi.gov.au/create-your-USI/> on computer or mobile device. Please note that if you would like to specify your gender as 'other' you will need to contact the USI Office for assistance.

Enter your Unique Student Identifier (USI) (if you already have one) Unique Student Identifier (USI)

USI application through your RTO (if you do not already have one)

Application for Unique Student Identifier (USI)

If you would like us [insert RTO name] 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.

I Authorise **Staysafe Industry Training** 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 (which may include sensitive information) pursuant to the information detailed at <<https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>>

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

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).

Please ensure that the name written in 'Personal Details' section is exactly the same as written in the document you provide below

Australian Driver's Licence

State: _____ Licence Number: _____

Medicare Card

Medicare card number _____
Individual reference number (next to your name on Medicare card): ____

Card colour: (select which applies)
Green Expiry date ____/____/____ (format MM/YYYY)
(month/year)

Yellow Blue Expiry date ____/____/____ (format DD/MM/YYYY)
(day/month/year)

Australian Birth Certificate

State/Territory _____
Details vary according to State/Territory (see note above)

Australian Passport

Passport number _____

Non-Australian Passport (with Australian Visa)

Passport number _____ Country of issue _____

Immicard

Immicard Number _____

Citizenship Certificate

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

Certificate of Registration by Descent

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

In accordance with section 11 of the *Student Identifiers Act 2014*, [insert RTO name] 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.

Student contribution fee:

I agree to pay the fee of \$150 due at enrolment or prior to completion **Yes**

Change of address

It is required that if there is a change of address, employment and other contact details that you will notify the RTO immediately.

Australian Consumer mechanism

Staysafe Industry Training will ensure that all information in relation to training and assessment services offered is concise and accurate and not misleading at the time of publication. Consumers have rights under the Australian Consumer Law (ACL) 2011 to receive the services that have been offered in the agreement or enrolment form and within a reasonable timeframe as indicated.

Privacy Statement and student declaration

Privacy Notice

Under the *Data Provision Requirements 2012*, [insert RTO name] 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 [insert RTO name] for statistical, regulatory and research purposes. [insert RTO name] 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).

Student Declaration and Consent

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 NAME

STUDENT SIGNATURE:

PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE (or electronic acknowledgement)

**Parental/guardian consent is required for all students under the age of 18.*

DATE: