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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Have you attended training at PEER before? (please tick) | | | | | | | | | Yes | | | | No | |
| Unique Student Identifier (USI) | | | *If you do not have a USI number, please go to* [*www.usi.gov.au/*](http://www.usi.gov.au/) | | | | | | | | | | | |
| CITB number | | | *If you wish to access CITB funding, please go to* [*www.citb.org.au/*](http://www.citb.org.au/) | | | | | | | | | | | |
| **PERSONAL DETAILS** | | | | | | VETtrak ID (office use only) | | | | | | |  | |
| Full Legal Name for Licensing and USI requirements | | | | | | | | | | | | | | |
| Surname |  | | | | | | Given name(s) | | | | |  | | |
| Title | Mr/ Miss/ Mrs/ Ms/ Other: | | | | | | Preferred name | | | | |  | | |
| Date of birth |  | | | | | | Gender | | | | Male  Female  Other | | | |
| Street address | | |  | | | | Suburb and post code | | | | |  | | |
| Postal address (if different from above) | | |  | | | | Suburb and post code | | | | |  | | |
| Phone | | |  | | | | Email address | | | | |  | | |
| Alternate email address: | | |  | | | | Preferred contact method | | | | | Email  Phone  Mail | | |
| EMERGENCY CONTACT DETAILS | | | | | | | | | | | | | | |
| Name | | |  | | | | Relationship | | | | |  | | |
| Phone number | | |  | | | | Alternate number | | | | |  | | |
| ENROLMENT INFORMATION | | | | | | | | | | | | | | |
| Area | | | Fee for Service  Other | | | | | | | | | | | |
| Course code | | | CPCWHS1001 | | | | Course Name | | | | | White Card | | |
| EMPLOYMENT INFORMATION | | | | | | | | | | | | | | |
| Employer business name | | | |  | | | Employer email | | | | |  | | |
| Phone number | | | |  | | | Contact name | | | | |  | | |
| **ADDITIONAL INFORMATION USED FOR STATISTICAL REPORTING REQUIRED UNDER THE DATA PROVISION REQUIREMENTS 2012** | | | | | | | | | | | | | | |
| Indigenous status | | | | | Aboriginal  Torres Strait Islander  Both  Neither | | | | | | | | | |
| Country of birth | | | | | Australia  Other (Please Specify) | | | | | | | | | |
| Town or city of birth | | | | |  | | | | | | | | | |
| Language spoken at home | | | | | English  Other (Please Specify) | | | | | | | | | |
| Citizen status | | | | | Australian Citizen  Permanent Australian resident  Oversea resident | | | | | | | Visa type  New Zealand citizen living in South Australia | | |
| Are you currently enrolled at school? | | | | | Yes  No | | | | | | | | | |
| Year level successfully completed: | | | | | Did not go to School  Year 8 or below  Year 9  Year 10  Year 11  Year 12 | | | | | | | | | |
| Highest level of education achieved in AUSTRALIA | | | | | Certificate I  Certificate II  Certificate III  Certificate IV  Diploma level  Advanced Diploma/Associate Degree  Bachelor’s degree / higher Education Degree  Miscellaneous Education | | | | | | | | | |
| Labour Force Status | | | Employed – unpaid family business  Full-time employee  Not employed – not seeking employment  Self-employed – not Employing others | | | | | | | Employer  Part-time employee  Unemployed – seeking full-time work  Not stated | | | | |
| Do you have a disability? | | | | | Yes  No | | | | | | | | | |
| If yes, please specify | | | | | Acquired brain disorder  Hearing/ deaf  Intellectual  Learning  Medical condition | | | | Mental illness  Physical  Vision  Unspecified  Other | | | | | |
| Known medical condition | | | | | Yes  No | | If yes, please specify | | | | | | | |
| Reason for study | | It was a requirement of my job  To get a job  To start my own business  To get a better job or promotion  To try for a different career | | | | | | To get into another course of study  To develop my existing business  I wanted extra skills for my job  For personal interest or self-development  Other reasons | | | | | | |
| **Privacy Notice**  Under the Data Provision Requirements 2012, PEER 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) may be used or disclosed by PEER for statistical, administrative, regulatory and research purposes. PEER may disclose your personal information for these purposes to:   * Commonwealth and State or Territory government departments and authorised agencies. * NCVER.   Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:   * populating authenticated VET transcripts; * facilitating statistics and research relating to education, including surveys and data linkage; * pre-populating RTO student enrolment forms; * 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 a student survey which may be administered by a government department or NCVER employee, agent or third party contractor or other authorised agencies. Please note 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 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.  I confirm:  I was provided course information prior to enrolment to make a detailed and informed decision on my enrolment  I confirm that I have read the student handbook and are aware PEER’s Complaints and Appeals Policy and Procedure and PEER’s Privacy Policy as contained on PEER’s website  I authorise/agree for PEER to:   * Communicate and perform Credit Transfer Processes on any transcripts provided by myself from other RTO’s (refer to credit transfer documentation) * Create, locate and update my Unique Student Identifier Number (USI) in order for my Qualification or Statement of Attainment to be generated for Nationally Accredited Training. * Take and use photos, film and other digital media of me and my property in connection with PEER * Use such digital media of me with or without my name and for any lawful purpose, including publicity, illustration, advertising and web content. I authorise PEER, its assignees and transferees to copyright, use and publish the same in print and/or electronically | | | | | | | | | | | | | | |
| Full name |  | | | | | | | | | | | | | |
| Signature |  | | | | | | | | | | | Date | |  |

NOTE: If person giving consent is under 18 years of age at the time of enrolment, consent of their parent/ guardian is required to confirm understanding of attendance requirements and responsibilities of being a student at PEER.

|  |  |  |  |
| --- | --- | --- | --- |
| Parent/ Guardian Signature |  | Date |  |

Office Use Only: The above form was entered and processed by the below PEER employee:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full name |  | Signature |  | Date |  |