

STUDENT ENROLMENT FORM

RTO ID: 5897

Course:Course Code:
Personal details
Title: ☐ Mr ☐ Mrs ☐ Miss ☐ Other
First Name: Surname:
Previous surname (if applicable):
Date of Birth: Day/month/year Gender: □ Female □ Male □ Other
Contact details
Residential Address:
Suburb: State: Postcode:
Postal Address (if different from residential):
Telephone (H): (Mobile):
Email:
Unique Student Identifier (USI) – visit www.usi.gov.au to apply for a USI
Do you have a USI T YES - Your USI No.
No or I don't remember I authorise Ignite Education to obtain/search for my USI on my behalf through the USI website. (Attach ID).
<u>Learner Unique Identifier (LUI)</u> – only applicable to School Based Traineeships
Learner Unique Identifier (LUI)
Employment Status - tick one box that best describes your current employment status.
☐ Fulltime employee ☐ Part time employee ☐ Self-employed — not employing others
☐ Employer ☐ Employed unpaid work in a family business ☐ Unemployed seeking fulltime work
☐ Unemployed seeking part time work ☐ Unemployed not seeking work

Schooling
Are you still at school? ☐ YES ☐ NO (if YES what grade are you in):
What is your highest COMPLETED school level?
☐ Did not go to school ☐ Year 8 or below ☐ Year 9 or equivalent ☐ Year 10 or equivalent
☐ Year 11 or equivalent ☐ Year 12 or equivalent
In which year did you complete that school level?
Language & Cultural Diversity
Country of Birth: In which country were you born? ☐ Australia ☐ Other (please specify)
If other, please tick □ Australian Citizen/Permanent resident □ New Zealand citizen □ N/A Language: □ English □ Other (please specify)
If other, how well do you speak English? ☐ Very Well ☐ Well ☐ Not Well ☐ Not at all
Indigenous Status:
Are you of Aboriginal or Torres Strait Islander origin?
□ No □ Yes Aboriginal □ Yes Torres Strait Islander
Prior Education Have you successfully completed any of the following qualifications? ☐ Yes (Tick below) ☐ No ☐ Bachelor or Higher Degree level ☐ Advanced Diploma or Associate Degree level ☐ Diploma Level ☐ Certificate IV ☐ Certificate III ☐ Certificate II ☐ Certificate I Are you currently enrolled in a course? ☐ YES ☐ NO If yes list course name:
Would you like to apply for recognition of prior learning or credit transfer ?
☐ YES ☐ NO (Information on RPL & Credit Transfer is contained in Ignites Student Handbook)
Disability — Please read page 7 of this document the "Disability supplement" for further information Do you consider yourself to have a disability, impairment or long-term condition? ☐ YES ☐ NO - If YES please indicate the area/s of impairment:
□ Acquired Brain Impairment □ Hearing/Deaf □ Intellectual □ Vision □ Learning
☐ Mental Illness ☐ Physical/Mobility ☐ Medical Condition ☐ Other:
Do you have any of the following conditions that we may need to be aware of whilst in our care? □ Diabetes □ Anxiety □ Depression □ ADD / ADHD □ Problem Gambling □ Alcohol & or Drug related issues □ Other:

Study Reason To get a job To develop my existing business To start my own business To try a different career To get a better job or promotion It was a requirement of my job I wanted extra skills for my job To get into another course of study For personal interest or self-development To get skills for community/voluntary work Other reasons Marketing Source Where did you obtain information regarding Ignite Education? Google Employment Agency Shopping Centre Government Website Problem Gambling Word of mouth Other: Emergency Contact Name: Relationship: Home Phone: Home Phone:

Email:

Student enrolment and policy acceptance declaration

I	_, declare that the information supplied by me on this form is true
and correct in every detail. I understand that thes	se details are confidential and protected by privacy laws. I give my
consent to Ignite Education to release my name, d	late of birth, contact details and statistical information to the
relevant State Government bodies for the purpose	e of auditing, regulation of training, obtaining feedback and as
statistical information.	

I declare that I have read, understood and agree with the following:	Initial
Ignite Educations Student Handbook, incorporating Code of Conduct, Client Services Policies	
(complaints, refunds, appeals), Assessment Policy and the Classroom Policies and Procedures.	
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.	
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 <i>National Vocational Education and Training Regulator Act 2011</i> (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 <i>Privacy Act 1988</i> (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 Education,	
Skills and Employment (DESE), 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 <u>www.ncver.edu.au/privacy</u> .	
DESE 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 DESE	
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will handle your personal information, please refer to the DESE VET Privacy Notice at https://www.dese.gov.au/national-vet-data/vet-privacy-notice.	

<u>Surveys</u> 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	ct Ignite Education 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 							
PHOTOGRAPHIC CONSE	NT						
I, the undersigned perso	n agree to and provide permission for the photographic, v	ideo, audio or					
	onic recording of me to be collected by Ignite Education. I						
use or reproduction of any image/recording referred to above for the purposes of assessment							
	naterials related to the activities, programs without acknow						
	o remuneration or compensation. The image/recording n						
print, electronic, or video media, and may be available to a global audience through the internet.							
REFUND POLICY		de e e e e e e e e e e e e e e e e e e					
Clients who withdraw from a course prior to the commencement of the course maybe entitled to							
•	are provided on a sliding scale determined by the amount	-					
provide. For a full copy of the Refund Policy refer to the student handbook, visit our website							
www.ignite.edu.au, or contact us.							
FEES							
By signing this enrolment form you acknowledge that you are responsible for payment of course fees. I understand that enrolment is accepted under the condition that my contribution fees are							
paid at enrolment unless a payment plan has been agreed with Ignite Education.							
Signature: Date:							
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Under the age of 18 years?

lt s	studen	t is	under	the a	age of	18	years	a	Paren	t or	Guar	dian	must	sign	bel	ow:
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Parent or Guardian Name:	
Signature:	Date:

CERTIFICATE 3 GUARANTEE STUDENTS ONLY

Student Contribution Fees represent the total non-government subsidised portion of essential training costs for the participant to undertake the qualification. These fees include tuition, services, materials and all other costs associated with delivering the training and the awarding of the qualification to the participant. All Student Contribution Fees are to be paid on enrolment.

Cert	ificate 3 Gu	uarantee Participant R	equirements	5:			
	of high s I am 15 I have fi	hold nor am I undertakir school OR Certificate IV o years of age or older nished secondary school Australian or New Zealar	and I am no lo	ligher L onger at	evel Skills program)	mpleted outside
have	completed	nat I will no longer be elig a Certificate level III qual ployment Survey within t	ification and it	t is a red	quirement of the p	rogram that I com	
Nar	ne:						
Sigr	nature:				Date:		
(Pai	rent or Gu	ardian if under 18 ye	ears)				
Par	ent or Gua	rdian Name:					
Sigr	nature:				Date:		
<u>Pa</u>	yment [<u>Details</u>					
payr	nent is receiv	tions must be paid on en ved. Payment plans can ormation is listed on all c	be negotiated				
		thod of payment: edit or Debit Card	l Payment F	Plan (fo	or course fees o	ver \$500)	
	COURSE			NON-C	ONCESSIONAL NTS	CONCESSION	AL STUDENTS
	Certificate III in Hospitality SIT30616 (15 UNITS)				(\$3.33 PER UNIT)	\$25.00 (\$1.66	S PER UNIT)
	Certificate III in Business BSB30120 (13 UNIT		UNITS)	\$50.00	(\$3.84 PER UNIT)	\$25.00 (\$1.92 PER UNIT)	
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OFFICE USE ONLY – STUDENT PAYMENT D Date Amount P					S	Receipt No:	
	Paid:		7 dillouit I			iteceipt 140.	
Name: Signature:							

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.

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.

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.

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.

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.

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.

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.

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.

Medical condition

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, Crohn's disease, cystic fibrosis, asthma or diabetes.

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