

## LIHE Enrolment Form

### 1. Course Details

<b>Employer</b>	
<b>Course Title</b>	
<b>Course Code</b>	

### 2. Personal Details (Please tick below preferred contact method – Email\* or Mobile\*)

<b>Title</b>	Mr <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/>	<b>Occupation</b>	
<b>Surname</b>		<b>Given Name/s</b>	
<b>Date of Birth</b>		<b>Gender</b>	Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>
<b>Unit/Building - Street Number &amp; Street Name</b>			
<b>Suburb</b>		<b>Postcode</b>	
<b>Postal Address</b>			
<b>Suburb</b>		<b>Postcode</b>	
<b>Home Phone</b>		<b>Mobile <input type="checkbox"/>*</b>	
<b>Email <input type="checkbox"/>*</b>			

### 3. Victorian Student Number - Do you have a Victorian Student Number (VSN)?

Yes <input type="checkbox"/> (please enter below)  _____	No <input type="checkbox"/> (Please choose <u>one</u> below) I have never attended school or a VET training providers in Victoria <input type="checkbox"/> I have been issued a VSN/USI but have forgotten the number <input type="checkbox"/> I am not sure what this is <input type="checkbox"/>
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### 4. Residential Status

<b>What is your current Australian residential status?</b> (Please tick one box only)	Australian citizen <input type="checkbox"/> Holder of a permanent Resident Visa of Australia <input type="checkbox"/> New Zealand Citizen <input type="checkbox"/> Other Visa type (please specify) _____ <input type="checkbox"/>
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### 5. Cultural Diversity

<b>In which Country &amp; City/Town were you born?</b>	<b>Country:</b> Australia <input type="checkbox"/> Other (Please specify) _____ <b>City/Town:</b> _____	<b>Are you of Aboriginal or Torres Strait Islander origin?</b>	No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> Yes, Both <input type="checkbox"/>
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## 6. Language

<b>What language do you speak at home?</b>	English <input type="checkbox"/> Other (Please specify) _____	<b>How well do you speak English?</b>	Very well <input type="checkbox"/> Well <input type="checkbox"/> Not well <input type="checkbox"/> Not at all <input type="checkbox"/>
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## 7. Disability

LIBERTY INSTITUTE OF HEALTH AND EDUCATION <b>Do you consider yourself to have a disability or long term condition?</b>		No <input type="checkbox"/> Yes <input type="checkbox"/>
(If yes, please indicate the area/s of disability, impairment or long term condition below)		
Acquired brain impairment <input type="checkbox"/>	Mental illness <input type="checkbox"/>	
Hearing/deaf <input type="checkbox"/>	Physical <input type="checkbox"/>	
Intellectual <input type="checkbox"/>	Vision <input type="checkbox"/>	
Learning <input type="checkbox"/>	Other <input type="checkbox"/>	
Medical condition <input type="checkbox"/>	Other _____	

## 8. Secondary School

<b>Are you still attending secondary school?</b>		No <input type="checkbox"/> Yes <input type="checkbox"/>
(If No, please indicate the highest COMPLETED school level)		
Completed Year 12 <input type="checkbox"/>	Completed Year 9 or equivalent <input type="checkbox"/>	
Completed Year 11 <input type="checkbox"/>	Completed Year 8 or lower <input type="checkbox"/>	
Completed Year 10 <input type="checkbox"/>	Never attended school <input type="checkbox"/>	
<b>At which School did you complete that level?</b> (eg: Melbourne High) _____		
<b>In which year did you complete that School level?</b> (eg: 2010) _____		

## 9. Prior Qualification Achieved

<b>Have you successfully COMPLETED any of the below qualifications?</b>		No <input type="checkbox"/> Yes <input type="checkbox"/>
<u>A=Australian E= Australian Equivalent INT= International</u> (If yes, please indicate the qualifications you have COMPLETED)		
<b>Bachelor Degree or Higher Degree</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/> <b>Advanced Diploma or Associate Degree</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/> <b>Diploma or Associate Diploma</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/> <b>Certificate IV or Advanced Certificate/Technician</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/>	<b>Certificate III or Trade Certificate</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/> <b>Certificate II</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/> <b>Certificate 1</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/> <b>Other Certificates not listed</b> A <input type="checkbox"/> E <input type="checkbox"/> INT <input type="checkbox"/>	
<b>If you have an International qualification, has it been skill assessed here in Australia?</b>		
<input type="checkbox"/> Yes <input type="checkbox"/> No <b>OR</b> <input type="checkbox"/> No, I don't have a qualification obtained overseas.		

## 10. Employment

<b>Of the following categories, which BEST describes your employment situation?</b>	
Full time employee <input type="checkbox"/>	Not employed, not seeking work <input type="checkbox"/>
Part time employee <input type="checkbox"/>	Unemployed seeking full-time work <input type="checkbox"/>



Employer <input type="checkbox"/>	Unemployed seeking part-time work <input type="checkbox"/>
Self-employed – not employing others <input type="checkbox"/>	Employed unpaid worker in a family business <input type="checkbox"/>

**11. Which of the following classification BEST describes your current occupation?**

**If never employed go to Question 13. Tick one box only**

1. Manager/Team Leader/Supervisor <input type="checkbox"/>	5. Clerical & Administrative Worker <input type="checkbox"/>
2. Professional <input type="checkbox"/>	6. Sales Worker <input type="checkbox"/>
3. Technician or Trade Worker <input type="checkbox"/>	7. Machinery Operator or Driver <input type="checkbox"/>
4. Community & Personal Service Worker <input type="checkbox"/>	8. Labourer <input type="checkbox"/>
	9. Other <input type="checkbox"/>

**12. Of the following classification which BEST describes your current Employer?**

**If never employed go to Question 13 Tick one box only**

A. Agriculture, Forestry and Fishing <input type="checkbox"/>	K. Financial & Insurance Services <input type="checkbox"/>
B. Mining <input type="checkbox"/>	L. Rental, Hiring & Real Estate Services <input type="checkbox"/>
C. Manufacturing <input type="checkbox"/>	M. Professional, Scientific & Technical Services <input type="checkbox"/>
D. Electricity, Gas, Water & Waste Services <input type="checkbox"/>	N. Administrative & Support Services <input type="checkbox"/>
E. Construction <input type="checkbox"/>	O. Public Administration & Safety <input type="checkbox"/>
F. Wholesale Trade <input type="checkbox"/>	P. Education & Training <input type="checkbox"/>
G. Retail Trade <input type="checkbox"/>	Q. Health Care & Social Assistance <input type="checkbox"/>
H. Accommodation & Food Services <input type="checkbox"/>	R. Arts & Recreation Services <input type="checkbox"/>
I. Transport, Postal & Warehousing <input type="checkbox"/>	S. Other Services <input type="checkbox"/>
J. Information Media & Telecommunications <input type="checkbox"/>	

**13. Study Reason**

**Of the following categories, which BEST describes your main reason for undertaking this course/traineeship? (Please tick one box only)**

To get a job <input type="checkbox"/>	To get a better job or promotion <input type="checkbox"/>
To start my own business <input type="checkbox"/>	To develop my existing business <input type="checkbox"/>
It was a requirement of my job <input type="checkbox"/>	To try for a different career <input type="checkbox"/>
To get into another course of study <input type="checkbox"/>	I wanted extra skills for my job <input type="checkbox"/>

**14. Unique Student Identifier**

Please list your Unique Student Identifier (USI) \_\_\_\_\_

**If you do not know your Unique Student Identifier, please continue reading.**

As of September 2014, students are able to apply for a Unique Student Identifier (USI). A USI account will contain all of a student's nationally recognized training records and results from 1st January 2015 onwards. A student's results from 2015 will be available in their USI account in 2016. In order to be issued any certificates or statements from 1st January 2015 a USI will be required. The process to apply for a USI takes a few only a few minutes. For more information on the Unique Student Identifier (USI) or to apply please visit [www.usi.gov.au](http://www.usi.gov.au)

☐ Please tick if you will apply for a Unique Student Identifier (USI) and forward the number to LIBERTY INSTITUTE OF HEALTH AND EDUCATION **OR**

☐ Please tick if you give College Name permission to apply for a Unique Student Identifier (USI) on your behalf

In order to apply for a USI please provide the following: Town/City of Birth

Medicare No (10 Digits):

Individual Reference#:

Card Color:

Valid To:

**STUDENT DECLARATION**

Please note that the student applying for the course must complete all sections of this form.

**I acknowledge and agree to the terms described in this declaration statement:**

- I acknowledge and agree to the terms described in this Privacy Statement.  
I am aware that my enrolment is subject to successful assessment of the pre-training review and LLN testing. I understand that entry levels are set according to the relevant Training and Assessment Strategy and that if I am unsuccessful in meeting the entry requirements, I will receive communication that I am "Not eligible to enter qualification". The reasons for this will be stated in the communication.
- I certify that the information supplied by me on all parts of this form is complete and true.
- I understand that any false, untrue or misleading information may result in refusal, cancellation or termination of my enrolment.
- I declare that the information I have provided, including evidence to confirm my date of birth, is true and accurate.
- LIBERTY INSTITUTE OF HEALTH AND EDUCATION has provided me with information relating to the USI in the form of:
  - a)** Information hand out Including privacy information & **b)** Fact sheet – Student information for the USI

*I authorize and consent to the collection, use and disclosure of my Personal Information in the manner outlined above.*

I give permission to LIBERTY INSTITUTE OF HEALTH AND EDUCATION to create, maintain, access and record my USI information. I understand LIBERTY INSTITUTE OF HEALTH AND EDUCATION will where necessary:

access the USI register and apply for a USI to be created on my behalf and/or  
access and verify my USI information retained on the USI register.

- I have been made aware of and have been provided/advised about the relevant Policies & Procedures of the institute which are available on the website and agree to be bound by them.
- I give permission for the information contained in this enrolment form to be released to the Australian Government & State Governments for use in Australian Vocational Education and Training Information System (AVETMISS) for research and statistical purposes only. I understand that I may be contacted to participate by Department to participate in a survey conducted by NCVER; and/ or a Department-endorsed project; and /or participate in the Department's annual student outcome survey; and/or contacted for audit or review relating to your training. This provides valuable feedback on the delivery of VET programs in Victoria.
- I declare that I have been provided a copy of institute's Statement of Fees and understand the costs and duration regarding my course/s.

I understand that by signing this enrolment form, I agree to the terms described above and all information I have provided on this form is accurate and sufficient.

**Student Name:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Note: If under 18 years of age at the time of giving consent, then the consent of their guardian is required*

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



## 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 National Vocational Education and Training Regulator Act 2011 (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 Privacy Act 1988 (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 datalinkage; and understanding the VET market.

The NCVER is authorized 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 [www.ncver.edu.au/privacy](http://www.ncver.edu.au/privacy).

If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below.

DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfill specified functions and activities. For more information about how the DESE 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>.

### Surveys

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 us 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



### Access, correction and complaints

You have the right to seek access to or correction of your own personal information. You may also complain if you believe your privacy has been breached.

For more information in relation to how student information may be used or disclosed please contact us.

	Y/N	Initial	Date
Entered into SMS			//
Evidence of student ID on file Drivers Licence <input type="checkbox"/> Medicare <input type="checkbox"/> Other _____ <input type="checkbox"/>			//
USI obtained/created			//
Fees paid			//

