

TSF 408 Short Course Enrolment Form

Please use BLOCK LETTERS when filling out this form, and ensure that all sections are completed, and appropriate tick boxes marked as applicable. Information collected on this enrolment form is confidential and will not affect you as an individual in your studies.

1. Personal Details

Title (Mr, Miss, Ms, Mrs, Other):

Surname:

(if Single Name only, enter here)

First Name:

Middle Name(s):

Date of Birth: / /

Current Age:

Town/City of Birth:

2. Gender

Male Female Indeterminate / Intersex / Unspecified please tick one)

3. Your Contact Details

Home Phone:

Mobile Phone:

Email Address:

Work Phone:

Preferred Contact Method: via Mobile Phone via Email via Post (address below) (please tick one)

4. Your Emergency Contact

Name:

Relationship:

Home Phone:

Mobile Phone:

Work Phone:

5. Your Address Details

USUAL RESIDENTIAL ADDRESS (Not a PO Box)

What is the address and postcode of the suburb, locality or town which you usually live?

Street Address (mandatory):

City/Town:

State:

Postcode:

POSTAL ADDRESS (please tick if same as usual Residential Address)

Address (optional):

City/Town:

State:

Postcode:

6. Language and Cultural Diversity

Are you of Aboriginal/Torres Strait Islander origin?

No

Yes, Aboriginal

Note: For persons of both Aboriginal and Torres Strait Islander origin tick both boxes yes

Yes, Torres Strait Islander

In which country were you born?

Australia

Other (please specify below)

Do you speak a language other than English at home?

No (English only)

Yes (please specify below)

How well do you speak English?

Very Well

Well

Not well

Not at all

7. Schooling

Are you still attending secondary school*? No Yes

(*Refers to any government, non-government, independent or Catholic school; or a student registered for home schooling in Victoria)

What is your highest **COMPLETED** school level?

Tick one box only

- Completed Year 12 Completed Yr. 9 or equivalent
 Completed Year 11 Completed Yr. 8 or lower
 Completed Year 10 Never attended school

In which year did you complete the highest nominated school level?

8. Employment Status

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

Tick one box only

- Employed – unpaid worker in a family business Full time employee
 Self-employed – not employing others Part time employee
 Self-employed –employing others Employer
 Not employed – not seeking employment
 Unemployed – seeking full time work
 Unemployed – seeking part time work

Where are you employed?

How many employees are at your current employer? Up to 20 Over 20

9. Disability

Do you consider yourself to have a disability, impairment or long-term condition? Yes No

If yes, please tick **ALL** areas of disability, impairment or long-term condition.

- Hearing/deaf Intellectual Medical condition
 Mental illness Physical Vision
 Acquired brain impairment Learning Other (please provide details)

10. Study Reason

Of the following reasons, which **BEST** describes your main reason for undertaking this course / traineeship / apprenticeship?

Tick one box only

- To get a job It was a requirement of my job
 To develop my existing business I wanted extra skills for my job
 To start my own business To get into another course of study
 To try for a different career For personal interest or self-development
 To get a better job or promotion Other Reasons

How did you find out about the course you are enrolling in?

Tick one box only

- Westvic Staffing Solutions (WSS) WSS - Flyer Social Media (e.g. Facebook)
 WSS - Job Services WSS - Website Apprentice Centre
 WSS - Group Training Radio advertising Newspapers
 WSS - Staff Member School supplied information Workplace
 WSS - Current/Past Student Word of mouth Other (please specify)

11. Short Course to be enrolled in

Enrolment Date: / / 20__

Course Code:

Course Title:

12. Student Declaration

I (students full name)

in seeking to enrol in:

Short Course:

Declare the information provided in this form to be true and accurate:

Signed (Student):

Date:

13. STUDENT EVIDENCE OF ID

OFFICE USE ONLY

I confirm that in relation to (students full name):

I have sighted **one** of the following original documents (or a certified photocopy of the original):

- | | |
|---|---|
| <input type="checkbox"/> an Australian Birth Certificate (not Birth Extract) | <input type="checkbox"/> a current Australian Passport |
| <input type="checkbox"/> a current New Zealand Passport | <input type="checkbox"/> a Naturalisation Certificate |
| <input type="checkbox"/> a current green Medicare Card | <input type="checkbox"/> a signed Declaration by a relevant referee |
| <input type="checkbox"/> a current drivers licence | <input type="checkbox"/> a current learner permit |
| <input type="checkbox"/> a Proof of Age card | <input type="checkbox"/> a "Keypass" card |
| <input type="checkbox"/> a Student ID card | <input type="checkbox"/> other form of photo ID: |
| <input type="checkbox"/> formal documentation issued by the Australian Department of Immigration and Citizenship confirming permanent residence | |

14. ADMINISTRATION CHECKS

OFFICE USE ONLY

Internal Checking

Westvic Staffing Solutions – ID Confirmation

Yes

No

Westvic Staffing Solutions -

SMS record

SMS No.: _____