

# STES STUDENT ENROLMENT FORM

<b>Given Names:</b>					<b>Surname:</b>													
<b>Full Address:</b>					<b>Suburb and Post Code:</b>													
<b>Postal Address:</b>	<input type="checkbox"/> Same as the above				<b>Suburb and Post Code:</b>													
<b>Phone:</b>			<b>Email:</b>			<b>USI:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please complete the form using a '✓' in the appropriate boxes.

**Birth Date (DD / MM / YYYY)**

**Gender (Tick one box only)**

Male

Female

Other

**In which country were you born?**

Australia

Other – Please specify

**Do you speak a language other than English at home?**

No, English only

Yes, other – Please specify

**Are you of Aboriginal or Torres Strait Islander origin?**

No

Yes, Aboriginal

Yes, Torres Strait Islander

**Do you consider yourself to have a disability, impairment or long-term condition?**

Yes

No

**If YES, please select the area(s) in the list: (You may indicate more than one area)**

Hearing/deaf

Physical

Intellectual

Learning

Mental illness

Acquired brain impairment

Vision

Medical condition

Other

**What is your highest COMPLETED school level? (Tick one box only)**

Year 12 or equivalent

Year 11 or equivalent

Year 10 or equivalent

Year 9 or equivalent

Year 8 or below

Never attended school

**Are you still enrolled in secondary or senior secondary education?** Yes   
No

**Have you SUCCESSFULLY completed any of the qualifications listed below?** Yes   
No

**If YES, tick ANY applicable boxes.**

Bachelor degree or higher degree

Advanced diploma or associate degree

Diploma (or associate diploma)

Certificate IV (or advanced certificate/technician)

Certificate III (or trade certificate)

Certificate II

Certificate I

Other education (including certificates or overseas qualification not listed above)

**Of the following categories, which BEST describes your current employment status? (Tick one box only)**

Full-time employee

Part-time employee

Self employed - not employing others

Self employed - employing others

Employed - unpaid worker in a family business

Unemployed - seeking full-time work

Unemployed - seeking part-time work

Not employed - not seeking employment

**Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship? (Tick one box only)**

To get a job

To develop my existing business

To start my own business

To try for 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

Other reasons

## STES PRE-ENROLMENT FORM

In this exercise, you will be undertaking a self-analysis of your current skills. We will use this information to identify a suitable course/duration for you. If you are unsure of your current skills, please inform any of the STES Trainers or the Training Manager.

<b>Years of experience in the industry</b>	<input type="checkbox"/> None	<input type="checkbox"/> 1 – 2 years	<input type="checkbox"/> 2 – 5 years	<input type="checkbox"/> 5+ years
<b>Completed similar course before?</b>	<input type="checkbox"/> No	<input type="checkbox"/> Yes If yes, when: _____		
<b>Existing High Risk Work Licence?</b>	<input type="checkbox"/> No	<input type="checkbox"/> Yes If yes, specify class(es): _____		

High Risk	No of years operating machine	Make / Model of machine
LF		
LO		
EWP		
DG		
RG		
Cranes		
Non-High Risk	No of years operating machine	Make / Model of machine
GTA / CSE		
WAH		
Firefighting		
TH		
Loadshifting		
Others		

Pre-Practical Checklist	
1. Do you have any existing medical conditions which may interfere with your ability to participate in practical activities?	<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, briefly describe:
2. Do you have fear of heights?	<input type="checkbox"/> No <input type="checkbox"/> Yes
3. Do you have difficulties entering confined spaces?	<input type="checkbox"/> No <input type="checkbox"/> Yes
4. Any other comments / concerns (if applicable)?	<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, briefly describe:
Reference	
Name of Supervisor/Manager	
Contact Detail (Mobile or Email)	
Agreement	
I understand that:	
<ul style="list-style-type: none"> <li>- If the course I am enrolled to has any requirements for evidence of on-the-job experience or practice with a particular machine, I need to provide the evidence, in the form required by STES, before I can be issued with an accredited Statement of Attainment.</li> <li>- I have to satisfy any pre-requisite units if they exist.</li> <li>- Without the Unique Student Identifier (USI), I will not be able to receive my Statement of Attainment.</li> <li>- I am expected to contribute and participate in class discussion and group activities.</li> <li>- I must act in a manner which does not adversely affect the learning of other participants in the course or interferes with the rights or obligations of STES or its Trainer/Assessors.</li> <li>- I will need to demonstrate my knowledge and understanding of the material and may be required to complete a practical exercise before I can be assessed for competence.</li> <li>- Assessment involves written exercise but if I have difficulty understand any of the materials or required further assistance, I can and should find help.</li> <li>- If I am assessed as 'Not Yet Competent', I should talk to the Assessor/Training Manager about the options available to me, which may include further opportunity to practice my skills or request a copy of the Appeal Procedures.</li> <li>- I will have access to student feedback forms, which I can either request or may be asked to complete at the end of my training.</li> </ul>	

## PRIVACY STATEMENT & STUDENT DECLARATION

### Privacy Notice

Under the *Data Provision Requirements 2012*, Skills Training & Engineering Services (STES) 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 STES for statistical, regulatory and research purposes. STES 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](http://www.ncver.edu.au)).

### Student Declaration and Consent

I agree to the Agreement and 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 SIGNATURE [or electronic acknowledgement] ..... [DATE] .....

PARENT/GUARDIAN SIGNATURE [or electronic acknowledgment]\* ..... [DATE] .....

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