

STES STUDENT ENROLMENT FORM

| | | | | | | | | | | | | | | | | | |
|------------------------|--|--|---------------|--|------------------------------|-------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Given Names: | | | | | SURNAME: | | | | | | | | | | | | |
| Full Address: | | | | | Suburb and Post Code: | | | | | | | | | | | | |
| Postal Address: | <input type="checkbox"/> Same as the above | | | | Suburb and Post Code: | | | | | | | | | | | | |
| Phone: | | | Email: | | | USI: | <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.

| | | | | |
|--|-------------------------------|---|--------------------------------------|-----------------------------------|
| Years of experience in the industry | <input type="checkbox"/> None | <input type="checkbox"/> 1 – 2 years | <input type="checkbox"/> 2 – 5 years | <input type="checkbox"/> 5+ years |
| Completed similar course before? | <input type="checkbox"/> No | <input type="checkbox"/> Yes If yes, when: _____ | | |
| Existing High Risk Work Licence? | <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"> - 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. - I have to satisfy any pre-requisite units if they exist. - Without the Unique Student Identifier (USI), I will not be able to receive my Statement of Attainment. - I am expected to contribute and participate in class discussion and group activities. - 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. - 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. - Assessment involves written exercise but if I have difficulty understand any of the materials or required further assistance, I can and should find help. - 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. - 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. | |

PRIVACY STATEMENT & STUDENT DECLARATION

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 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 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 fulfil 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 Skills Training and Engineering Services (STES) 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

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 [DATE]

PARENT/GUARDIAN SIGNATURE* [DATE]

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

