



| <b>STUDENT ENROLMENT FORM</b>   |                                    |                     |  |   |                          |                                      |               |  |               |
|---|------------------------------------|---------------------|--|---|--------------------------|--------------------------------------|---------------|--|---------------|
| <b>Course Number</b>  |                                    | <b>Course Title</b> |  |   | <b>Enrolment</b>         |                                      | <b>Period</b> |  | <b>Campus</b> |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| <b>SRTAFE Student ID</b>  |                                    |                     |  | <b>Unique Student Identifier (USI)*</b> |                          |                                      |               |  |               |
| <b>CONCESSION DETAILS</b>   |                                    |                     |  |   |                          |                                      |               |  |               |
| Concession Number   |                                    |                     |  |   | Start Date               |                                      | Expiry Date   |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| ABSTUDY/Austudy   |                                    | Health Care Card    |  |   | Pensioner                |                                      |               | Youth 15-24  |               |
| Prisoner  |                                    | Veteran Health      |  |   | Youth Allowance          |                                      |               | Secondary School Aged Person<br>(17yrs prior to 30/06) |               |
| <b>PERSONAL DETAILS</b>   |                                    |                     |  |   |                          |                                      |               |  |               |
| Title   | Last Name <i>(full legal name)</i> |                     |  | First Name                              |                          |                                      | Middle Name   |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Date of Birth   |                                    |                     |  |   |                          |                                      | Gender        | Male   |               |
| Name Change   |                                    |                     |  |   |                          |                                      |               | Female   |               |
| Name Change Date  |                                    |                     |  |   |                          |                                      |               | Other  |               |
| Postal address  |                                    |                     |  |   |                          | State                                |               | Post Code  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Residential Address   |                                    |                     |  |   |                          | State                                |               | Post Code  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Home Phone  |                                    |                     | Mobile                                       |   |                          | Work Phone                           |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Email   |                                    |                     |  |   |                          |                                      |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Emergency Contact Name  |                                    |                     |  |   | Emergency Contact Number |                                      |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| <b>RESIDENCY STATUS - EVIDENCE AS REQUIRED: DRIVERS LICENCE, PASSPORT, BIRTH CERTIFICATE, CITIZENSHIP</b>                                       |                                    |                     |  |   |                          |                                      |               |  |               |
| Are you an Australian Citizen?<br><i>(please tick)</i>  |                                    | Yes                 | TAFE International ID <i>(if applicable)</i> |   |                          |                                      |               |  |               |
|   |                                    | No                  | Residency Status or Visa Subclass Number     |   |                          |                                      |               |  |               |
| Country of Birth  |                                    |                     | Date of Arrival to Australia                 |   |                          |                                      |               |  |               |
|   |                                    |                     |  |   |                          | Aboriginal or Torres Strait Islander | Yes           | No   |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| <b>GUARDIAN DETAILS FOR STUDENTS UNDER 18 YEARS</b>   |                                    |                     |  |   |                          |                                      |               |  |               |
| Title   | Last Name                          |                     |  | First Name/s                            |                          |                                      |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Guardian Address  |                                    |                     |  |   |                          | State                                |               | Post Code  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Home Phone  |                                    |                     | Mobile                                       |   |                          | Work Phone                           |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Guardian Email  |                                    |                     |  |   |                          |                                      |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| Parent / Guardian Signature   |                                    |                     |  |   |                          | Date                                 |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| I have read the Important Terms and Conditions of Enrolment and agree to abide by these Terms & Conditions and the South Regional TAFE By-Laws. |                                    |                     |  |   |                          | Student Signature                    |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |
| I consent to the payment option I selected being actioned and to being contacted to finalise payment and enrolment.                             |                                    |                     |  |   |                          | Date                                 |               |  |               |
|   |                                    |                     |  |   |                          |                                      |               |  |               |

## COURSE UNIT DETAILS

| COURSE DATES             |             |  |           |                   |                         |               |
|--------------------------|-------------|--|-----------|-------------------|-------------------------|---------------|
|                          |             | Day, Date, Time<br><b>Tuesday, 24th &amp; Wednesday 25th January 2023, 8.30 am to 4.30 pm - VENUE: Boyup Brook CRC</b> |           |                   |                         |               |
|                          |             | Day, Date, Time  |           |                   |                         |               |
| Tick req                 | National ID | Subject Title  | Unit Type | Full Tuition Fees | Concession Tuition Fees | Resource Fees |
| <input type="checkbox"/> | AHCCHM304   | Transport and store chemicals  | C         | \$0.00            | \$0.00                  | \$15.00       |
| <input type="checkbox"/> | AHCCHM307   | Prepare and apply chemicals to control pest, weeds and diseases  | C         | \$0.00            | \$0.00                  | \$20.00       |

| FULL FEES  |         | FEES WITH CONCESSION |         | STUDENT FEE SUMMARY |    |
|------------|---------|----------------------|---------|---------------------|----|
| TOTAL FEES | \$35.00 | TOTAL FEES           | \$35.00 | TOTAL FEES          | \$ |

Enrolment fees + **\$75.00** AusChem Manual = **TOTAL FEES PAYABLE \$**

*Important Information:*

*These fees are subject to change as according to the DTWD Fees and Charges Policy 2023.*

*Final cost of your course fees will be finalised once confirmation of enrolment has occurred.*

| Office use only            |                        |                |
|----------------------------|------------------------|----------------|
| Enrolling Officer Staff ID | Enrolling Officer Name | Enrolment Date |
|                            |                        |                |

| Evidence of Residency <input checked="" type="checkbox"/> |                   |                 |
|---|-------------------|-----------------|
| Drivers Licence   | Birth Certificate | Concession Card |
|   |                   |                 |

**STUDENT STATISTICAL QUESTIONNAIRE**

|   |                                     |                                    |  |
|---|-------------------------------------|------------------------------------|--|
| <b>Aboriginal or Torres Strait Islander</b> | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> | <input type="checkbox"/> <b>Prefer not to answer</b> |
|---|-------------------------------------|------------------------------------|--|

**DISABILITY**

|               |                          |                       |                          |   |                          |                |                          |
|---------------|--------------------------|-----------------------|--------------------------|---|--------------------------|----------------|--------------------------|
| <b>No</b>     | <input type="checkbox"/> | <b>Yes</b>            | <input type="checkbox"/> | <b>IF YES Please tick Disability Type</b> |                          |                |                          |
| Hearing /Deaf | <input type="checkbox"/> | Physical              | <input type="checkbox"/> | Learning                                  | <input type="checkbox"/> | Mental Illness | <input type="checkbox"/> |
| Intellectual  | <input type="checkbox"/> | Mobility              | <input type="checkbox"/> | Vision                                    | <input type="checkbox"/> | Medical        | <input type="checkbox"/> |
| Other         | <input type="checkbox"/> | Acquired brain injury | <input type="checkbox"/> |   | <input type="checkbox"/> |                | <input type="checkbox"/> |

**Would you like to receive advice on support services, equipment and facilities which may assist you ?**

|           |                          |            |                          |
|-----------|--------------------------|------------|--------------------------|
| <b>No</b> | <input type="checkbox"/> | <b>Yes</b> | <input type="checkbox"/> |
|-----------|--------------------------|------------|--------------------------|

**EDUCATIONAL BACKGROUND / Australian (or Equivalent Study)**

|   |                                     |                                    |                          |                                |                          |                   |                          |
|---|-------------------------------------|------------------------------------|--------------------------|--------------------------------|--------------------------|-------------------|--------------------------|
| <b>Highest School Level Completed - Please tick</b> | <input type="checkbox"/>            | <b>Year Completed</b>              | <input type="checkbox"/> |                                |                          |                   |                          |
| Did not got to school                               | <input type="checkbox"/>            | Year 8 or below                    | <input type="checkbox"/> | Completed Year 9 or equivalent | <input type="checkbox"/> | Completed Year 10 | <input type="checkbox"/> |
| Completed Year 11                                   | <input type="checkbox"/>            | Completed Year 12                  | <input type="checkbox"/> | Not Stated - no response       | <input type="checkbox"/> |                   | <input type="checkbox"/> |
| Currently Attending School ?                        | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> | <input type="checkbox"/> |                                | <input type="checkbox"/> |                   | <input type="checkbox"/> |
| School ID (CCID)                                    |                                     |                                    |                          |                                |                          |                   |                          |
| School Name   |                                     |                                    |                          |                                |                          | State             | <input type="checkbox"/> |

*For Under 18 Students Please provide your most recent School Name*

**Highest Level of Participation**

|  |                          |                       |                          |                       |                          |                      |                          |
|--|--------------------------|-----------------------|--------------------------|-----------------------|--------------------------|----------------------|--------------------------|
| <b>Participation Level - Please tick</b> | <input type="checkbox"/> | <b>Year Completed</b> | <input type="checkbox"/> |                       |                          |                      |                          |
| Postgraduate                             | <input type="checkbox"/> | Bachelor              | <input type="checkbox"/> | Certificate / Diploma | <input type="checkbox"/> | Incomplete Course    | <input type="checkbox"/> |
| Secondary Education                      | <input type="checkbox"/> | Other Qualification   | <input type="checkbox"/> | Complete VET Award    | <input type="checkbox"/> | Incomplete VET Award | <input type="checkbox"/> |

**Highest Level of Completion**

|                                       |                          |                                      |                          |                                      |                          |                              |                          |
|---------------------------------------|--------------------------|--------------------------------------|--------------------------|--------------------------------------|--------------------------|------------------------------|--------------------------|
| <b>Completion Level - Please tick</b> | <input type="checkbox"/> | <b>Year Completed</b>                | <input type="checkbox"/> |                                      |                          |                              |                          |
| Postgraduate                          | <input type="checkbox"/> | Bachelor                             | <input type="checkbox"/> | Advanced Diploma or Associate Degree | <input type="checkbox"/> | Diploma or Associate Diploma | <input type="checkbox"/> |
| Cert IV or Adv Cert IV / Technician   | <input type="checkbox"/> | Certificate III or Trade Certificate | <input type="checkbox"/> | Certificate II                       | <input type="checkbox"/> | Certificate I                | <input type="checkbox"/> |
| Certificate other than above          | <input type="checkbox"/> |                                      | <input type="checkbox"/> |                                      | <input type="checkbox"/> |                              | <input type="checkbox"/> |

**STUDY REASON**

|  |                          |  |                          |                                |                          |                                     |                          |
|--|--------------------------|--|--------------------------|--------------------------------|--------------------------|-------------------------------------|--------------------------|
| To get a job                             | <input type="checkbox"/> | To develop my existing business              | <input type="checkbox"/> | To start my own business       | <input type="checkbox"/> | To try for a different career       | <input type="checkbox"/> |
| To get a better job or promotion         | <input type="checkbox"/> | It was a requirement of my job               | <input type="checkbox"/> | I want extra skills for my job | <input type="checkbox"/> | To get into another course of study | <input type="checkbox"/> |
| For personal interest / self development | <input type="checkbox"/> | To get skills for community / voluntary work | <input type="checkbox"/> | Other Reasons                  | <input type="checkbox"/> |                                     | <input type="checkbox"/> |

**EMPLOYMENT BACKGROUND**

|   |                          |                                     |                          |                                      |                          |                                       |                          |
|---|--------------------------|-------------------------------------|--------------------------|--------------------------------------|--------------------------|---------------------------------------|--------------------------|
| Full-time Employee                          | <input type="checkbox"/> | Part-time Employee                  | <input type="checkbox"/> | Self-employed - not employing others | <input type="checkbox"/> | Employer                              | <input type="checkbox"/> |
| Employed - unpaid worker in family business | <input type="checkbox"/> | Unemployed - seeking full-time work | <input type="checkbox"/> | Unemployed - seeking part-time work  | <input type="checkbox"/> | Not employed - not seeking employment | <input type="checkbox"/> |



# Unique Student Identifier (USI) Creation Authorisation

A USI is a reference number made up of numbers and letters. Creating a USI is free. It creates a secure online record of your nationally recognised training that you can access anytime and anywhere, and it's yours for life.

Please complete the following information for South Regional TAFE to create a USI on your behalf with your unique USI retrievable from the USI website [www.usi.gov.au](http://www.usi.gov.au) using the details you provided.

**PLEASE NOTE: The details you provide MUST BE THE SAME as the details on your ID**

- If your ID shows your middle name(s), you **must** list all middle names on your ID
- Include hyphens and apostrophes if your name has them
- ALL information must be listed clearly and accurately in BLOCK letters
- List your names in the same order that they are shown on your identifying document.

## Required Information

First Name: ..... Middle Name: ..... Family Name: .....  
Date of Birth: ..... Country of Birth: ..... Town of Birth: ..... Gender: .....  
Country of Residence – *Australia or please specify other:* .....

## Contact – please complete at least 2 of the 3 options

1 Email: .....  
2 Mobile: .....  
3 Mail: Address: .....  
Town/City: ..... State: ..... Postcode: .....

## ID and Document Number – Please provide two (2) of the following ID numbers:

1 Australian Driver's Licence: ..... State in which issued: .....  
2 Medicare Card No: ..... Expiry: ..... Colour of Card: ..... Ind Ref Number:.....  
3 Australian Passport No: .....  
4 Immi Card: ..... Non-Australian Passport No: .....

## Authorisation for South Regional TAFE to Create a USI on Your Behalf

I ....., authorise South Regional TAFE to apply pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf. I have read my personal information and I consent to its collection, use and disclosure pursuant to the information detailed in the Privacy Notice on page 2 of this USI Creation Authorisation Form and available on the USI website at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>.

Signed: ..... Date: .....

## Privacy Notice

### Consent for collection, use or disclosure of personal information

The following is provided to you on behalf of the Student Identifiers Registrar (Registrar).

You are advised and agree that you understand and consent that the personal information you provide in connection with your application for a Unique Student Identifier (USI):

- Is collected by the Registrar as authorised by the *Student Identifiers Act 2014*.
- Is collected by the Registrar for the purposes of:
  - applying for, verifying and giving a USI;
  - resolving problems with a USI; and
  - creating authenticated vocational education and training (VET) transcripts
- May be disclosed to:
  - Commonwealth and State/Territory government departments and agencies and statutory bodies performing functions relating to VET for:
    - the purposes of administering and auditing VET, VET providers and VET programs;
    - education related policy and research purposes; and
    - to assist in determining eligibility for training subsidies;
  - VET Regulators to enable them to perform their VET regulatory functions;
  - VET Admission Bodies for the purposes of administering VET and VET programs;
  - current and former Registered Training Organisations to enable them to deliver VET courses to the individual, meet their reporting obligations under the VET standards and government contracts and assist in determining eligibility for training subsidies;
  - schools for the purposes of delivering VET courses to the individual and reporting on these courses;
  - the National Centre for Vocational Education Research for the purpose of creating authenticated VET transcripts, resolving problems with USIs and for the collection, preparation and auditing of national VET statistics;
  - researchers for education and training related research purposes;
  - any other person or agency that may be authorised or required by law to access the information;
  - any entity contractually engaged by the Student Identifiers Registrar to assist in the performance of his or her functions in the administration of the USI system; and
- Will not otherwise be disclosed without your consent unless authorised or required by or under law.

The consequences for not providing the Registrar with some or all of your personal information are that the Registrar will not be able to issue you with a USI.

### Privacy policies and complaints

You can find further information on how the Registrar collects, uses and discloses the personal information about you in the [Registrar's Privacy Policy](#) or by contacting the Registrar on [usi@education.gov.au](mailto:usi@education.gov.au) or telephone 1300 857 536; international enquiries +61 2 6240 8740. The Registrar's Privacy Policy contains information about how you may access and seek correction of the personal information held about you and how you may make a complaint about a breach of privacy by the Registrar in connection with the USI and how such complaints will be dealt with.

You may also make a complaint to the Information Commissioner about an interference with privacy pursuant to the *Privacy Act 1988*, including in relation to the misuse or interference of or unauthorised collection, use, access, modification or disclosure of USIs.

#### EXAMPLES OF VALID ID





## Legal Obligations and Code of Conduct

By signing the enrolment form you are agreeing to the South Regional TAFE Terms and Conditions of Enrolment and to abide by all college by-laws, detailed in the college's Student Code of Conduct. These documents are located on the college website: [www.southregionaltafe.wa.edu.au](http://www.southregionaltafe.wa.edu.au) or are available upon request from your lecturer or Student Services.

## Payment of Fees Options

Enrolment is not complete until statutory and RTO based fees and charges are paid; or deferred payment arrangements have been made; or fees and charges have been waived. On enrolment, students must take up one of the following payment options to secure a place at South Regional TAFE.

The indicative fees for a course may differ between training providers due to the units that are included in the course outline. These differences generally result from adapting courses to meet local industry needs.

The actual cost of a course will also vary if different electives are chosen by the student.

1. Pay in full - pay the full amount of fees and charges
2. Sponsor-to-Pay – present a signed authority from an employer to invoice that employer for your fees and charges
3. Payment Plan – pay your fees and charges by direct debit instalment plan: instalments must occur over the training delivery timeframe
4. Financial hardship application – apply on the grounds of severe financial hardship for fees and charges to be waived for courses below Diploma level or concession-eligible Diploma and Advanced Diploma courses
5. VET Student Loan – declare your intent to defer full or part payment of your fees and charges under the Commonwealth Government's VET Student Loan program.

## Concessions

Students who are unable to present proof of concession at the time of enrolment must pay full fees. Students can claim a refund to adjust their tuition fees to the concessional rate if proof of eligibility for concession is provided before they complete a semester or before their units are rescheduled. If the concession is valid for the full enrolment period, then all eligible units commenced within that period attract the concession rate. If the concession is valid for part of the enrolment period, then only eligible units commenced on or after the start date and prior to the expiry of the concession attract the concession rate.

While on a concessional rate, students will still be required to pay full resource and incidental fees.

## VET Student Loan

Students studying a VET Student Loan approved qualification must meet eligibility requirements to apply. A VET Student Loan gives rise to a VET Student Loan Debt that continues to be a debt due to the Commonwealth until it is repaid.

- A VET Student Loan can be used to pay all or part of an eligible student's tuition fees
- The loan may, until the debt is repaid, reduce a student's take-home (after-tax) wage or salary and may reduce the student's borrowing capacity
- A student may wish to seek independent financial advice before applying for a VET Student Loan.

## Unique Student Identifier

All students undertaking nationally recognised training are required to have a USI. The USI gives students access to an online record of their nationally recognised training. The college must verify the USI number a student provides. Students may receive an automated notification when the college uses this function to verify/locate their USI. If you do not give your permission for the college to locate and access your USI, please advise us before enrolling.

There are certain exemptions from the USI. If you are exempt from requiring a USI, the results from your training will not appear on your Vocational Education and Training (VET) transcript accessed through your online USI account.

## Minors

Students under 18 years old at the time of enrolling will need a parent or adult guardian to countersign all legal documents with the college if they are planning to:

- Set up a fees payment plan; or
- Enter into a VET Student Loan agreement

## Withdrawals and Refunds

Students must provide written advice of withdrawal to ensure they are eligible for refunds and that if they have a VET Student Loan, they do not incur a liability under the program. Students who withdraw are entitled to a full refund where:

- A unit is cancelled or rescheduled to a time unsuitable to the student; or
- A student is not given a place due to the class being full

Students enrolled in Diploma and above qualifications have at least 28 days to initiate the grievance procedure before the class cancellation takes final effect.

Students who elect to withdraw in writing before the census date (20% of the unit's duration) will be eligible for a full refund of the course fee for the unit and:

- A full refund of the resource fee if the course is a Diploma, Advanced Diploma included in the VET Student Loan in Western Australia; or
- 50% of the resource fee if the course is below Diploma level.

Students who do not meet the above criteria but would like to apply for a refund of fees due to exceptional circumstances beyond their control can contact [withdrawals@srtafe.wa.edu.au](mailto:withdrawals@srtafe.wa.edu.au) for information. In all cases, relevant documentary evidence (for example a medical certificate) will be required.

Refer to the Student Handbook for other important information regarding:

- |                                 |                           |
|---------------------------------|---------------------------|
| • Student Code of Conduct       | • Safety and health       |
| • Recognition of prior learning | • Credit Transfer         |
| • Withdrawals                   | • Refunds                 |
| • Assessments                   | • Academic Appeals        |
| • Services for students         | • Campus facilities       |
| • Equal opportunity             | • Complaints and feedback |

## Before you Enrol

Before you enrol, ensure you have reviewed the below and where relevant, completed the actions required.

- Confirm the qualification you are enrolling in.
- Check your timetable or the provided course information for:
  - how long the course will take
  - which campus you will need to attend
  - how the training will be delivered and assessed (in a



- classroom, online, in your workplace)
- whether there is someone else involved in the training (employer, third party delivery) and
- what work placement arrangements are involved with the course.
- Be aware that the college has Quality Assurance strategies in place and is bound by the Standards for Registered Training Organisations 2015, which regulate how the organisation functions.
- Nominal hours are not hours of training or instruction. They are used to determine course fees and subsidy levels to reflect the cost to deliver quality training.
- You have the right to make a complaint, free of bias, and you can appeal the judgement decision regarding the result for a Unit of Competency. Both the Complaints and Appeals policies are available on the South Regional TAFE website and are explained in the Student Handbook available on the website or in hard copy upon request.
- You also have the right to be notified and assisted if your training is cancelled due to the college (or a third party training on its behalf) closing or stopping the training.
- As a student, you are obliged to:
  - repay any debt incurred as a result of accepting a VET Student Loan
  - purchase and maintain any equipment and/or resources required to complete your course (you will be advised of what is required) and
  - fulfil the requirements of any government entitlements and subsidy arrangements related to your training.

South Regional TAFE delivers Competency Based Training; an approach to training that places emphasis on what a person can do in the workplace as a result of completing a program of training or based on workplace experience and learning. Ideally, progress within a competency-based training program is not based on time.

South Regional TAFE may make alterations to the planned training program to meet learner needs. This may include accelerating programs of study and a reduction in scheduled teaching hours, supporting students with additional scheduled teaching hours or adjustments to the delivery methodology, including delivery of language, literacy and numeracy support programs; Course in Underpinning Skills for Industry Qualifications (USIQ) and Course in Applied Vocational Study Skills (CAVSS). Where such changes are appropriate, students will be consulted and informed of changes as soon as is practicable.

### Privacy Notice

South Regional TAFE will only pass personal information to third parties under the special circumstances outlined below as per our Privacy Policy. Available on request from your lecturer or Student Services.

The college collects the personal information of its students to complete the enrolment process and to perform surveys. As required under Part 4, section 17 of the *Vocational Education and Training Act 1996*.

Additionally, under the *Data Provision Requirements 2012*, South Regional TAFE is required to collect personal information about you and disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- Populating authenticated VET transcripts
- Facilitating statistics and research relating to education, including surveys and data linkage
- Pre-populating RTO student enrolment forms

- Understanding how the VET market operates, for policy, workforce planning and consumer information; and
- Administering VET, including program administration, regulation, monitoring and evaluation.

You may receive an NCVER student survey which may be administered by a government department or 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)).

For more information about NCVER's Privacy Policy go to <https://www.ncver.edu.au/privacy>.

Your personal information (including the personal information contained in your enrolment) may be used or disclosed to third parties by the college for statistical, regulatory and research purposes, including:

- Employer – when training is paid by your employer
- Commonwealth and State or Territory government departments and authorised agencies
- NCVER
- Parents/guardians of students under the age of 18; and
- Other academic institutions when a student transfers, regarding academic progress at South Regional TAFE.

In order to improve student services and facilitate your participation in Vocational and Educational Training in Western Australia, your information may be given to other TAFE colleges.

Information will also be disclosed as necessary to prevent or lessen a serious or imminent threat to the life or health of a student or another person.

Students will have their personal details and full time enrolment status provided to Transperth as part of the SmartRider verification process used by all state training providers.

By providing us with your personal information, you consent to the college using your information to contact you on an ongoing basis in order to provide you with information we think would be of interest to you, by mail, email, social media, SMS and/or telephone. During any such contact you can choose an opt out action, if desired.

The college may retain trusted third parties to provide services for us, including entities located outside Australia, who will need to have access to your personal information to perform their obligations. The college also has outsourcing arrangements for e-learning platforms, whereby service providers will host information systems and resources. The college may also use a cloud-based service to store and process personal information.

Any personal data sent to these third parties are kept in trust on behalf of the college and the college takes all care to be satisfied with the privacy policies of these third parties prior to engaging their services.

By providing us with your personal information, you consent to us disclosing your information to entities located outside Australia for these purposes, on the basis that we are not required to ensure that any overseas recipient complies with Australian privacy laws.

Throughout the year many photographs and occasionally videos are taken of students and staff taking part in various functions, courses and other events. These photographs may be used in advertisements for the college, in publications, on the South Regional TAFE website, social media channels or displayed on special occasions such as enrolment days. Students or parents/guardians are asked to inform the college in writing if they do not wish their image to be used in these circumstances. If no written request is received, then the college will assume student and/or parent/guardian consent.



## Consent and Health Care Information Form

|  |           |                           |     |      |
|--|-----------|---------------------------|-----|------|
| This information will be provided to relevant South Regional TAFE staff  |           |                           |     |      |
| Student details  |           |                           |     |      |
| Family name:   |           | Given name:               |     |      |
| Date of birth:   | Gender:   | TAFE ID:                  |     |      |
| School Curriculum & Standards Authority ID   |           | Last high school attended |     |      |
| Contact Person 1 – Currently our system has the following details. If the detail is blank, we do not have this information in our system. Please check and amend/add these details accordingly   |           |                           |     |      |
| Name:  |           | Email:                    |     |      |
| Address:   |           | Contact numbers:          |     |      |
|  |           | Home                      | Mob | Work |
| Contact Person 2 – Currently our system has the following details. If the detail is blank, we do not have this information in our system. Please check and amend/add these details accordingly   |           |                           |     |      |
| Name:  |           | Email:                    |     |      |
| Address:   |           | Contact numbers:          |     |      |
|  |           | Home                      | Mob | Work |
| <b>Emergency contact person</b> (please list a person other than the people listed above)  |           |                           |     |      |
| Name:  |           | Contact numbers:          |     |      |
| Address:   |           | Home                      | Mob | Work |
|  |           |                           |     |      |
| <b>Consent</b>   |           |                           |     |      |
| Please identify your relationship to the student listed above (tick one box):  |           |                           |     |      |
| Parent   | Guardian  | Responsible adult         |     |      |
| As the parent/guardian/responsible adult of the above named student, I acknowledge that the information I have provided is correct and I have read and understood the attached document titled <i>Important Information Concerning Students Under 18 Years of Age</i> , and I consent to the student undertaking studies at South Regional TAFE. |           |                           |     |      |
| _____  | _____     | _____                     |     |      |
| Name   | Signature | Date                      |     |      |
| <b>Please note:</b> by signing and returning the attached <i>Consent and Health Care Information form</i> , parents/guardians/responsible adults of students who were born on 01/07/2003 – 30/06/2005 will not be required to complete a <i>Notice of Arrangement form</i> .   |           |                           |     |      |
| <b>Health Care Information</b>   |           |                           |     |      |
| Please list any health conditions that may impact upon their ability to undertake the course:  |           |                           |     |      |
|  |           |                           |     |      |
| Please ensure you contact Student Services or the lecturer to discuss the management of your child/ward's health condition/s.  |           |                           |     |      |
| <b>Note:</b> It is your responsibility to inform the college if any health information changes throughout the period of enrolment.   |           |                           |     |      |
| In the event of an emergency, every effort will be made to contact you in preference to the nominated emergency contact person.  |           |                           |     |      |
| Please return this form to:  |           |                           |     |      |
| Contact person:  |           | Email:                    |     |      |