

Enrolment Application Form - Domestic



Personal Details			
Surname:		Title: Mr/Mrs/Miss/Ms/Dr	Date of birth:
First name:		Middle name/s:	
Home phone:		Mobile:	
Email:			
Unique Student Identifier (USI)			
Today's date:			

Home Address			
Flat/unit details:		Building:	
Street number:		Street Name:	
Suburb/ city or town:			
State/Territory		Postcode:	
Country			

Postal Address (if different from above)?			
P.O Box			
Suburb, locality or town:			
State/Territory:		Postcode:	

Next of kin / emergency contact			
Name:		Relationship to you:	
Address:			
		Postcode:	
Home phone:	()	Work:	()
Mobile:		Email:	

Enrolment Details			
Course Name	Preferred day and times	Course code (office use only)	Fee
		Total	

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General Information	
1. Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
2. Have you ever studied with BCC Institute before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. In which country were you born?	<input type="checkbox"/> Australia <input type="checkbox"/> Other, please specify: _____
4. Are you an Australian citizen or eligible resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you speak a language other than English at home? If more than one language, indicate the one that is spoken most often.	<input type="checkbox"/> No, English only - Go to question 6 <input type="checkbox"/> Yes, other, please specify: _____
6. How well do you speak English?	<input type="checkbox"/> Very well <input type="checkbox"/> Well <input type="checkbox"/> Not well <input type="checkbox"/> Not at all
7. Are you of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal
8. Do you consider yourself to have a disability, impairment or long-term condition? If yes, please indicate the area of disability, impairment or long term condition. (tick as many as apply)	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 8 <input type="checkbox"/> Hearing/deaf <input type="checkbox"/> Intellectual <input type="checkbox"/> Mental illness <input type="checkbox"/> Vision <input type="checkbox"/> Physical <input type="checkbox"/> Learning <input type="checkbox"/> Acquired brain injury <input type="checkbox"/> Medical condition <input type="checkbox"/> Other:
9. What is your highest COMPLETED school level (tick one box only)	<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent <input type="checkbox"/> Year 8 or below <input type="checkbox"/> Never attended school – Go to question 11
10. In which YEAR did you complete that school level?	
11. Are you still attending secondary school?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous qualifications	
12. Have you SUCCESSFULLY completed any of the following qualifications?	<input type="checkbox"/> Yes – indicate below <input type="checkbox"/> No – Go to Question 12
<i>If YES, then tick ANY applicable boxes (you may indicate more than one)</i>	
<input type="checkbox"/> Bachelor Degree or Higher Degree	<input type="checkbox"/> Advanced Diploma or Associate Degree
<input type="checkbox"/> Diploma (or Associate Diploma)	<input type="checkbox"/> Certificate I
<input type="checkbox"/> Certificate II	<input type="checkbox"/> Certificate III (or Trade Certificate)
<input type="checkbox"/> Certificate IV (or Advanced Cert/Technician)	<input type="checkbox"/> Certificates other than these
Please list any qualifications you have completed and the year of completion.	1. _____ Year: _____
	2. _____ Year: _____
	3. _____ Year: _____
13. Do you wish to apply for Course Credit? If YES, certified copies of transcripts from previous qualifications must be provided with this form.	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Do you wish to apply for Recognition of Prior Learning? If you indicate yes, you will be contacted to discuss this further.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Employment	
Of the following categories, which BEST describes your current employment status? (tick one box only)	
<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Employed – unpaid worker in a family business
<input type="checkbox"/> Part-time employee	<input type="checkbox"/> Unemployed – seeking full-time work
<input type="checkbox"/> Self employed – not employing others	<input type="checkbox"/> Unemployed – seeking part-time work
<input type="checkbox"/> Employer	<input type="checkbox"/> Not employed – not seeking employment

Study reason	
Of the following categories, which BEST describes your main reason for undertaking this course?	
<input type="checkbox"/> To get a job	<input type="checkbox"/> I wanted extra skills for my job
<input type="checkbox"/> To develop my existing business	<input type="checkbox"/> To get into another course of study
<input type="checkbox"/> To start my own business	<input type="checkbox"/> For personal interest or self-development
<input type="checkbox"/> To try for a different career	<input type="checkbox"/> Other reasons
<input type="checkbox"/> To get a better job or promotion	
<input type="checkbox"/> It was a requirement of my job	

Agreement
In signing this Enrolment Application Form you agree:
<ul style="list-style-type: none">• That the information you have provided on this form is true, correct and complete.• That you have read and understood the Student Handbook which can be found on our website www.bankstowncc.edu.au• That you have been provided with appropriate and sufficient information to make an informed decision about your enrolment in this course.• That you have read and understood BCC Institute's Privacy Policy. Information concerning students, including information submitted on the Enrolment Application Form will be used by BCCI or other authorised organisations for the purpose of general student administration, communication, state and national reporting, program monitoring evaluation. The information may be disclosed to the National Centre for Vocational Education Research (NCVER) and/or other authorised agencies and departments. The provision of this information is necessary for both enrolment and re-enrolment. Information provided will be held securely and disposed of securely when no longer needed. You may access your personal information by contacting BCCI.• To provide BCC Institute with up to date and accurate contact details and notify them if anything changes.• That you have been provided with detailed information about the fees and charges associated with your course enrolment including information on all fees (tuition, administration and materials), payment terms and the applicable Refund Policy outlined below.• To be bound by BCC Institute's Student Code of Conduct, and other student policies and procedures as well as National and State legislation and regulations including any variations that are made from time to time.

Refund Policy
<p>The Enrolment Application Fee of \$200 paid at the time of application to BCCI is NON-REFUNDABLE.</p> <p>Students who withdraw from a course and wish to seek a refund or have the amount they owe on their fees reduced, must apply to BCCI using the relevant <i>Withdrawal Form</i> and <i>SC15.1 - Refund Application Form</i> outlining the details and reason for their request.</p> <p>When the refund is approved, BCCI will:</p> <ul style="list-style-type: none"> • Issue a statement detailing how the refund was calculated • Issue the refund within 14 days of receipt of the <i>SC15.1 - Refund Application Form</i>. <p>Refund prior to course commencement</p> <ul style="list-style-type: none"> • 100% refund of course fees where BCCI cancels the course prior to commencement • 90% refund of course fees where the student withdraws 29 days or more prior to the commencing • 80% refund of course fees where the student withdraws 8 - 28 days or more prior to the commencing • 0% refund of course fees where student withdraws 0 - 7 days prior to commencement. <p>Refund after course commencement</p> <ul style="list-style-type: none"> • 0% refund where the student withdraws after commencement. <p>Other circumstances where no refund (0%) will be provided</p> <ul style="list-style-type: none"> • If the enrolment is terminated because of a failure to comply with BCCI's policies • If a student has supplied incorrect, false or misleading information

Student (or guardian if applicable) Signature:		Date:	
Printed Name:			

Office use only	
Student I.D :	
Processed date:	
Enrolment officer signature:	

Under the *Data Provision Requirements 2012*, **BCC Institute** 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 **BCC Institute** for statistical, regulatory and research purposes. **BCC Institute** 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 a VET Statement of Attainment or VET 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 program 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).

Student Declaration and Consent

I 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 Name: _____

Student Signature: _____

Date: _____