

*\* required field*

| <b>*Qualification Code</b> | <b>*Qualification Name</b> |
|----------------------------|----------------------------|
|                            |                            |

| <b>STUDENT INFORMATION</b> |  |                                   |  |
|----------------------------|--|-----------------------------------|--|
| <b>*Surname:</b>           |  | <b>*Date of birth: dd/mm/yyyy</b> |  |
| <b>*First name(s):</b>     |  | <b>*Gender:</b>                   | M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/> |

| <b>RESIDENTIAL ADDRESS</b>       |  |                        |  |
|----------------------------------|--|------------------------|--|
| <b>Building / property name:</b> |  |                        |  |
| <b>Flat / unit:</b>              |  | <b>*Street / lot:</b>  |  |
| <b>*Street name:</b>             |  | <b>*Suburb / town:</b> |  |
| <b>*Postcode:</b>                |  | <b>*State:</b>         |  |

| <b>POSTAL ADDRESS (Same as Residential <input type="checkbox"/> )</b> |  |                        |  |
|---|--|------------------------|--|
| <b>Building / property name:</b>                                      |  |                        |  |
| <b>Flat / unit:</b>   |  | <b>*Street / lot:</b>  |  |
| <b>*Street name:</b>  |  | <b>*Suburb / town:</b> |  |
| <b>*Postcode:</b>   |  | <b>*State:</b>         |  |

| <b>CONTACT INFORMATION (please provide at least one phone number)</b>  |  |   |  |                              |  |
|--|--|---|--|------------------------------|--|
| <b>Home phone:</b>   |  | <b>Work phone:</b>                      |  | <b>Mobile phone:</b>         |  |
| <b>*Email:</b>   |  |   |  |                              |  |
| <b>*Do you give Everthought permission to email you as needed for the purposes of the course's conduct? Yes <input type="checkbox"/> No <input type="checkbox"/></b> |  |   |  |                              |  |
| <b>Please provide Everthought with emergency contact information.</b>  |  |   |  |                              |  |
| <b>*Emergency Contact Name:</b>  |  | <b>*Emergency contact relationship:</b> |  | <b>*Best contact number:</b> |  |

| <b>* Unique Student Identifier (USI)</b>   |  |
|--|--|
| From 1 January 2015, Everthought Educations can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we submit to NCVET. If you have not yet obtained a USI you can apply for it directly at <a href="https://www.usi.gov.au/students/create-your-usi/">https://www.usi.gov.au/students/create-your-usi/</a> on computer or mobile device, otherwise, Everthought can apply for one on your behalf. To allow us to apply for one for you, please provide authorisation below, and include at least one form of ID information. |  |
| <b>USI</b>   |  |
| I authorise Everthought Education to apply pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf, and I have read and understood the USI Face Sheet and Privacy Notice available on the Everthought Education website.  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| I have read and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed at <a href="https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf">https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf</a>   | Yes <input type="checkbox"/> No <input type="checkbox"/> |

**\*Identification**

\*Please provide **at least one** of the below forms of ID. If you have authorised Everthought to apply for a USI on your behalf, this will be used.

|                         |                 |  |                      |  |
|-------------------------|-----------------|--|----------------------|--|
| Driver's Licence        | Licence Number  |  | Issuing State        |  |
| Medicare Card           | Card Number     |  | Individual Reference |  |
|                         | Card Colour     |  | Expiry Date          |  |
| Australian Passport     | Passport Number |  |                      |  |
| Immicard                | Immicard number |  |                      |  |
| Citizenship Certificate | Stock Number    |  | Acquisition Date     |  |

In accordance with section 11 of the Student Identifiers Act 2014, Everthought will securely destroy personal information which we collect from individuals solely for the purpose of applying for a USI on their behalf as soon as practicable after we have made the application, or the information is no longer needed for that purpose.

**COMMENTS:**

Please list any questions you may have and / or any relevant personal details pertaining to your course enrolment (i.e. qualifications to be considered for RPL):

|   |  |  |  |                        |  |
|---|--|--|--|------------------------|--|
| What best describes your current employment status? | <input type="checkbox"/> Full time employee<br><input type="checkbox"/> Part time employee<br><input type="checkbox"/> Employer<br><input type="checkbox"/> Self-employed – not employing others<br><input type="checkbox"/> Employed – unpaid work in a family business           | <input type="checkbox"/> Unemployed – seeking part time work<br><input type="checkbox"/> Unemployed – seeking full time work<br><input type="checkbox"/> Not employed – not seeking work |  |                        |  |
| Are you still attending school?                     | <input type="checkbox"/> Yes <input type="checkbox"/> No   |  |  |                        |  |
| What is the highest school level you completed?     | <input type="checkbox"/> Did not go to school<br><input type="checkbox"/> Completed Year 8 or below<br><input type="checkbox"/> Completed Year 9 or equivalent   | <input type="checkbox"/> Completed Year 10 or equivalent<br><input type="checkbox"/> Completed Year 11 or equivalent<br><input type="checkbox"/> Completed Year 12 or equivalent         |  |                        |  |
| In which country were you born?                     |  | Do you speak a language other than English at home?  |  | If YES, what language? |  |
| Do you have any prior qualifications?               | <input type="checkbox"/> No previous qualifications<br><input type="checkbox"/> Bachelor degree or higher degree level<br><input type="checkbox"/> Advanced diploma or associate degree level<br><input type="checkbox"/> Diploma level<br><input type="checkbox"/> Certificate IV | <input type="checkbox"/> Certificate III<br><input type="checkbox"/> Certificate II<br><input type="checkbox"/> Certificate I<br><input type="checkbox"/> Miscellaneous Education        |  |                        |  |
| Do you consider yourself to have a disability?      | <input type="checkbox"/> No disability<br><input type="checkbox"/> Yes, please specify by choosing the appropriate area below. More information on these areas can be found by referring to the Disability Supplement at the bottom of this form.                                  |  |  |                        |  |

|  |  |  |
|--|--|--|
|  | If yes, do you think you will require any assistance to participate in this course?  | <input type="checkbox"/> No<br><input type="checkbox"/> Yes (we will arrange a meeting to discuss this with you) |
|  | If yes, do you require any specific treatment in the event of an emergency? Please specify.  |  |
|  | <input type="checkbox"/> Hearing/Deaf <input type="checkbox"/> Acquired brain impairment <input type="checkbox"/> Physical<br><input type="checkbox"/> Mental Illness <input type="checkbox"/> Learning <input type="checkbox"/> Medical condition<br><input type="checkbox"/> Vision <input type="checkbox"/> Intellectual<br><input type="checkbox"/> Other: _____                         |  |
| Indigenous status:                                       | <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander<br><input type="checkbox"/> Aboriginal and Torres Strait Islander <input type="checkbox"/> Neither Aboriginal nor Torres Strait Islander   |  |
| What is the main reason you are undertaking this course? | <input type="checkbox"/> To get a job <input type="checkbox"/> To get a better job or promotion<br><input type="checkbox"/> To develop my existing business <input type="checkbox"/> It was a requirement of my job<br><input type="checkbox"/> To start my own business <input type="checkbox"/> I wanted extra skills for my job<br><input type="checkbox"/> To try for a different career |  |

|  |   |
|--|---|
| Have you previously undertaken this style of training?      Yes <input type="checkbox"/> No <input type="checkbox"/><br>If yes, was it successful? Why / why not?  |   |
|  |   |
| Do you think you will have any challenges with the required level of study?      Yes <input type="checkbox"/> No <input type="checkbox"/><br>If yes, please outline what these may be. <i>A trainer will make contact to discuss your needs and required assistance.</i> |   |
|  |   |
| How did you find Everthought?  | <input type="checkbox"/> Google <input type="checkbox"/> Website <input type="checkbox"/> Facebook<br><input type="checkbox"/> Friend <input type="checkbox"/> QBCC<br><input type="checkbox"/> Other: _____<br><input type="checkbox"/> Trainer: _____ |
| You may be required to have access to a computer and internet. Do you have access to a computer and internet for study purposes?   | Yes <input type="checkbox"/><br>No <input type="checkbox"/>   |

**Please carefully read Privacy Notice and Student Declaration and acknowledge that you have read these prior submitting the enrolment form.**

Under the *Data Provision Requirements 2012*, Everthought Education 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), may be used or disclosed by Everthought Education for statistical, administrative, regulatory and research purposes. Everthought Education may disclose your personal information for these purposes to:

- Commonwealth and State or Territory government departments and authorised agencies; and
- NCVER.

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER 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 a student survey which may be administered by a government department or NCVER employee, agent or third-party contractor or other authorised agencies. Please note 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 National 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>.

Everthought Education retains a record of personal information about all individuals with whom we undertake any form of business activity. Everthought Education must collect, hold, use and disclose information from our clients and stakeholders for a range of purposes.

As a government registered training organisation, regulated by the Australian Skills Quality Authority, Everthought Education is required to collect, hold, use and disclose a wide range of personal and sensitive information on Students in nationally recognised training programs. This information requirement is outlined in the National Vocational Education and Training Regulator Act 2011 and associated legislative instruments.

Everthought Education must require and confirm identification however in services delivery to individuals for nationally recognised course programs. We are authorised by Australian law to deal only with individuals who have appropriately identified themselves. That is, it is a Condition of Registration for all RTOs under the National Vocational Education and Training Regulator Act 2011 that we identify individuals and their specific individual needs on commencement of service delivery and collect and disclose Australian Vocational Education and Training Management of Information Statistical Standard (AVETMISS) data on all individuals enrolled in nationally recognised training programs. Other legal requirements, as noted earlier in this policy, also require considerable identification arrangements.

For information about how Everthought Education collects, uses and discloses your personal information generally, including how you can make a complaint about a breach of privacy, please refer to Everthought Education's Privacy Policy and Procedure which can be found within the Student Handbook and on its website.

This Privacy Policy and Procedure contains information about how individuals may access and seek correction of the personal information held by us, and how to complain about a breach of privacy, and how we will deal with such a complaint.

In providing your personal information as requested and signing this notice, you are confirming your receipt of, and understanding of these details, and providing your consent for the collection, storage, use and disclosure of your personal information as outlined.

### **Student Declaration**

1. I declare that the information I have provided to the best of my knowledge is true and correct.
2. In making this application for enrolment, I am aware of the consequences that may arise from providing false, misleading or incomplete information, including the cancellation of my enrolment or the withdrawal of any offer made by Everthought Education.

3. I acknowledge that my driver's licence is current and understand that Everthought Education has taken a copy as proof of my identify.
4. I understand that this application applies only to the course stated on page 1 of this Form.
5. I understand that Everthought Education is responsible for all my training and assessment related to this course and also for issuing my AQF certification documentation on my successful completion.
6. I have read and understand all of Everthought Education's services as outlined in the Application & Enrolment Information Sheet. I have sought clarification from Everthought Education where I did not understand any of the information presented.
7. I consent to the collection, use and disclosure of my personal information in accordance with the **Privacy Notice** above. I understand and consent to information contained in this Form provided to State and Commonwealth government departments and their authorised agencies, such as the NCVER. This includes to funding bodies. I have read and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed and NCVER policies, procedures and protocols published on NCVER's website at [www.ncver.edu.au](http://www.ncver.edu.au).
8. I have received all the information I need to make an informed decision about whether this is the right course for me, including access to Everthought Education's **Student Handbook** (domestic).
9. I have been advised of and understand my rights, obligations and responsibilities when enrolling with Everthought Education and know that I may reference these in the **Student Handbook** or Everthought Education's website.
10. I have received all course details, including any fee payment (including where my employer will pay on my behalf) and other student incidental expenses (where relevant to the course), have been provided to me and explained.
11. It has also been explained and I accept that in exceptional and unforeseen circumstances out of Everthought Education's control, the fees and charges may increase during my course. I understand that I have the right to withdraw in this instance.
12. I have received information and understand my rights, such as how to lodge a complaint or appeal, how to request a fee refund and the privacy of my personal information as well as my responsibilities as a Everthought Education student.
13. I understand that my image and comments may be used in print and electronic promotional material and any communications for commercial and non-commercial purposes in all media, including the internet and throughout the world, without seeking any remuneration or compensation for the same for an unlimited time period. I acknowledge that Everthought Education own and shall own all rights, title and interest (including copyright). I warrant that I have full power to enter into this release. Where I do wish to provide permission, I have included a comment below (in the Comments section).
14. My eligibility for a government subsidised place through the QLD funding has been explored with me. I have been informed that enrolment in this course may impact my future entitlement to government subsidised training.
15. I understand and agree to undertake an **Upfront Assessment of Need**, such as my literacy and numeracy skills, as part of this application and understand that pending the outcome of this assessment, I may not be offered further training services.
16. Should I be accepted to enrol in this course, I agree to all the terms and conditions outlined within the **Student Handbook**, including the **Student Code of Conduct**, and as explained to me.

Where applicable and where I am under 18 years of age, I confirm that my parent/s/guardian were provided with all the information outlined above.

**Student Name**

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**Signature**

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**Date**

---

**Parent/Guardian Signature  
(if under 18)**

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**Disability Supplement**

Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.

**'Hearing/deaf'**

Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

**'Physical'**

A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

**'Intellectual'**

In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

**'Learning'**

A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

**'Mental illness'**

Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.

**'Acquired brain impairment'**

Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

**'Vision'**

This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

**'Medical condition'**

Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic fibrosis, asthma or diabetes.

**'Other'**

A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.