



Privacy Statement & Student Declaration

Privacy Notice

Under the *Data Provision Requirements 2012*, Jenard Training 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 Jenard Training for statistical, regulatory and research purposes.

Jenard Training may disclose your personal information to third parties, for the following purposes 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 qualification or statement of attainment, and producing 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).

Student Declaration and Consent

I declare that the information I have provided in the following enrolment form, 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

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

*PARENT/GUARDIAN SIGNATURE DATE



Enrolment Form

Personal details

1. Enter your full name *

Family name (surname)

Given names

* Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names. If you do not yet have a USI, see section on the USI at the end of this form for a detailed explanation.

2. Enter your birth date

Day/month/year | | |

3. Gender (Tick ONE box only)

Male

Female

Other

4. Enter your contact details

Home phone _____ Work phone _____

Mobile _____ Email address _____

Alternative email address (optional) _____

5. What is the address of your usual residence?

Please provide the physical address where you usually reside. (street number and name not PO box)

Building/property name

Flat/unit details

Street or lot number (e.g. 205 or Lot 118)

Street name

Suburb, locality or town

State/territory

Postcode

6. What is your postal address (if different from above)?

Building/property name

Flat/unit details

Street or lot number (e.g. 205 or Lot 118)

Street name

Postal delivery information (e.g. PO Box 254)

Suburb, locality or town

State/territory

Postcode

Language and cultural diversity

7. In which country were you born?

Australia 1101

Other – please specify

8. Do you speak a language other than English at home?

(If more than one language, indicate the one that is spoken most often)

No, English only

1201

Yes, other – please specify

9. Are you of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)

No

Yes, Aboriginal

Yes, Torres Strait Islander

Disability

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

Yes Y

No N **No – Go to question 12**

11. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

(You may indicate more than one area) Please refer to the Disability supplement for an explanation of the following disabilities.

Hearing/deaf 11

Physical 12

Intellectual 13

Learning 14

Mental illness 15

Acquired brain impairment 16

Vision 17

Medical condition 18

Other 19

Schooling

12. What is your highest COMPLETED school level? (Tick ONE box only)

If you are currently enrolled in secondary education, the *Highest school level completed* refers to the highest school level you have actually completed and not the level you are currently undertaking. For example, if you are currently in Year 10 the *Highest school level completed* is Year 9.

Year 12 or equivalent 12

Year 11 or equivalent 11

Year 10 or equivalent 10

Year 9 or equivalent 09

Year 8 or below 08

Never attended school 02

Never completed any primary or secondary level education – go to question 14

13. Are you still enrolled in secondary or senior secondary education?

Yes	<input type="checkbox"/>	Y
No	<input type="checkbox"/>	N

Previous qualifications achieved

14. Have you SUCCESSFULLY completed any of the qualifications listed in question 15?

Yes	<input type="checkbox"/>	Y
No	<input type="checkbox"/>	N

No – go to question 16

15. If YES, tick ANY applicable boxes.

Bachelor degree or higher degree	<input type="checkbox"/>	008
Advanced diploma or associate degree	<input type="checkbox"/>	410
Diploma (or associate diploma)	<input type="checkbox"/>	420
Certificate IV (or advanced certificate/technician)	<input type="checkbox"/>	511
Certificate III (or trade certificate)	<input type="checkbox"/>	514
Certificate II	<input type="checkbox"/>	521
Certificate I	<input type="checkbox"/>	524
Other education (including certificates or overseas qualifications not listed above)	<input type="checkbox"/>	990

Employment

16. Of the following categories, which BEST describes your current employment status?

(Tick ONE box only)

For casual, seasonal, contract and shift work, use the current number of hours worked per week to determine whether full time (35 hours or more per week) or part-time employed (less than 35 hours per week).

Full-time employee	<input type="checkbox"/>	01
Part-time employee	<input type="checkbox"/>	02
Self employed – not employing others	<input type="checkbox"/>	03
Self employed – employing others	<input type="checkbox"/>	04
Employed – unpaid worker in a family business	<input type="checkbox"/>	05
Unemployed – seeking full-time work	<input type="checkbox"/>	06
Unemployed – seeking part-time work	<input type="checkbox"/>	07
Not employed – not seeking employment	<input type="checkbox"/>	08

Study reason

17. 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	<input type="checkbox"/>	01
To develop my existing business	<input type="checkbox"/>	02
To start my own business	<input type="checkbox"/>	03
To try for a different career	<input type="checkbox"/>	04
To get a better job or promotion	<input type="checkbox"/>	05
It was a requirement of my job	<input type="checkbox"/>	06
I wanted extra skills for my job	<input type="checkbox"/>	07
To get into another course of study	<input type="checkbox"/>	08
For personal interest or self-development	<input type="checkbox"/>	12
Other reasons	<input type="checkbox"/>	11

Unique Student Identifier (USI)

From 1 January 2015, you must have a USI to enrol at Jenard Training to complete any nationally recognised VET qualifications or courses. If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-USI/> on computer or mobile device.

18. Enter your Unique Student Identifier (USI)

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Disability supplement

Introduction

The purpose of the Disability supplement is to provide additional information to assist with answering the disability question. 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.

If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

‘11 – 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.

‘12 – 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.

‘13 – 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.

‘14 – 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.

‘15 – 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.

‘16 – 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.

‘17 – 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.

‘18 – 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.

‘19 – 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.