

## Instructions: Complete all sections by filling in the allocated boxes.

\* 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 number, please let the staff of Sapere know, and they will advise you how to apply for one. Under the Data Provision Requirements 2012 Sapere is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

### 1. PERSONAL DETAILS

TITLE: Please circle option:	Mr	Mrs	Miss	Ms	Other
FAMILY NAME:					
GIVEN NAME/S:					
Gender:	Male	Female	Other	Date of Birth:	

### 2. RESIDENTIAL ADDRESS

### POSTAL ADDRESS

Street Address (Unit No/Street No and Street Name)	PO Box Number or Street Address (Unit No/Street No and Street Name)

### 3. CONTACT DETAILS

Home Telephone No.	Email Address:
Mobile No.	
Emergency contact Name:	Relationship:
Emergency contact Number:	

### 4. LANGUAGE AND CULTURAL DIVERSITY

In which country where you born? <input type="checkbox"/> AUSTRALIA <input type="checkbox"/> OTHER – please specify Country of Birth:
Are you an Australian Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO – If not please provide details and a copy of your <b>Permanent Residency</b>
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 <input type="checkbox"/> YES – PLEASE SPECIFY
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
Are you of Aboriginal and/or Torres Strait Islander Origin? <input type="checkbox"/> NO <input type="checkbox"/> YES, ABORIGINAL <input type="checkbox"/> YES, TORRES STRAIT ISLANDER <input type="checkbox"/> YES, BOTH ABORIGINAL AND TORRES STRAIT ISLANDER

## 5. DISABILITY AND SPECIAL CONSIDERATION

Do you consider yourself to have a disability impairment or long-term condition?  No  Yes

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)

- |  |  |
|--|--|
| <input type="checkbox"/> Hearing/deaf                  | <input type="checkbox"/> Physical                  |
| <input type="checkbox"/> Intellectual                  | <input type="checkbox"/> Learning                  |
| <input type="checkbox"/> Mental Illness                | <input type="checkbox"/> Acquired brain impairment |
| <input type="checkbox"/> Vision                        | <input type="checkbox"/> Medical condition         |
| <input type="checkbox"/> Other Please provide details: |  |

## 6. SCHOOLING

What is your highest COMPLETED school level in Australia?

- |  |   |
|--|---|
| <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 in Australia |

In which year did you complete that school level? \_\_\_\_\_

## 7. PREVIOUS QUALIFICATIONS ACHIEVED

Have you SUCCESSFULLY completed any of the qualifications listed?

- |   |  |
|---|--|
| <input type="checkbox"/> Bachelor's degree or higher degree     | <input type="checkbox"/> Advanced diploma or associate degree  |
| <input type="checkbox"/> Diploma (or associate diploma)         | <input type="checkbox"/> Certificate IV (or advanced certificate/technician)                                 |
| <input type="checkbox"/> Certificate III (or trade certificate) | <input type="checkbox"/> Certificate II  |
| <input type="checkbox"/> Certificate I                          | <input type="checkbox"/> Other education (including certificate or overseas qualifications not listed above) |

Please provide details (full name) of qualification and where qualification was received:

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## 8. SKILLS RECOGNITION

Do you wish to apply for RPL or skills recognition  YES  NO

If you answered YES, our training manager will contact you with further information.

## 9. STUDY REASON

Of the following categories select one which BEST describes the main reason you are undertaking this Course. Please choose one option

- |  |  |
|--|--|
| <input type="checkbox"/> 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 wanted extra skills for my job          | <input type="checkbox"/> To get into another course of study |
| <input type="checkbox"/> For personal interest or self-development | <input type="checkbox"/> Other reasons                       |

## 10. EMPLOYMENT BACKGROUND

Of the following categories, which BEST describes your current employment status? Please choose one option:

- |  |  |
|--|--|
| <input type="checkbox"/> Full-time employee                            | <input type="checkbox"/> Part-time employee                    |
| <input type="checkbox"/> Self-employed – not employing others          | <input type="checkbox"/> Self-employed – employing others      |
| <input type="checkbox"/> Employed – unpaid worker in a 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 |

## 11. COURSE DETAILS

<b>BSB30115 Certificate III in Business</b>	
Please circle funding option:	<b>Fee for Service</b>
Signed:	Date:

## 12. ADMINISTRATION FEE

**(FEE FOR SERVICE)**

_____ agree to pay the Administration Fee outlined in the Course information Guide, and understand the <i>Fees, Charges and Refund Policy</i> regarding the Administration Fee
Signed:

## 13. UNIQUE STUDENT IDENTIFIER (USI)

If you have not yet obtained a USI you can apply for it directly at <https://www.usi.gov.au/create-your-USI/> on computer or mobile device. Please note that if you would like to specify your gender as 'other' you will need to contact the USI Office for assistance.

Enter your Unique Student Identifier (USI) if you already have one  
Unique Student Identifier

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## 14. TERMS AND CONDITIONS

I have read the Student Information Handbook and Course Information Guide.

I understand as part of this course I am required to undertake practical assessments within a regulated education and care service and I am required to work/volunteer a **minimum of 120 hours - Certificate III in Early Childhood Education and Care, and a minimum of 240 hours - Diploma of Early Education and Care, 30 hours of this to be with babies and toddlers (birth to 24 months) in a regulated education and care service**

## 15. DECLARATION

I understand that the information I have supplied on this form is, to the best of my knowledge and understanding, complete and correct. I understand that providing false, incomplete or misleading information may lead to the refusal of my application or cancellation of my enrolment at any time. I give permission to obtain official records from any educational institutions attended by me. I also authorise Sapere Education and Training to supply any relevant official records to education institutions to which I am seeking admission and to government bodies/institutions. I understand that Sapere Education and Training will not disclose information provided by me on this form to third parties, without my written consent, except to other educational institutions, to government bodies, as required or authorised by law or in accordance with Sapere Education and Training's Privacy Policy and USI Privacy Statement.

By signing this form, I confirm that I supplied all the relevant information required; I have read and understood that declaration above; and I accept the terms and conditions of this application.

Student Signature:

Parent/Guardian Signature:

(under 18 years of age)

Date:

## Student Agreement

### Accepting this Agreement

1. You will have accepted this Agreement by signing at the end of this form.

2. The date you sign this Agreement is the Agreement date
3. You will need to be in paid employment to secure enrolment in this course. .
4. If you are not an Australian Citizen, you will provide Sapere Education and Training with a copy of your Permanent Residency with this Enrolment Form.

## Your Obligations

5. By accepting this Agreement, you:
  - a. have read and agree to comply with the Student Hand Book and Course Information Guide.
  - b. confirm that you fulfil all entry requirements.
  - c. confirm that all information provided to Sapere Pty Ltd at the time of enrolment was accurate and complete, including anything that may impact on your ability to complete the course (such as a disability).
  - d. Agree to pay all requisite fees associated with your course if applicable.
6. You acknowledge that the Course Fee does not include
7. It is your responsibility to inform Sapere Pty Ltd in writing within seven (7) days of any corrections or changes to your personal details, including name, residential or postal address, email address, phone numbers, payment options and banking details.
8. It is your responsibility to retain a copy of all assessments submitted to Sapere Pty Ltd for the duration of your course.
9. You must maintain a current email address for the duration of your course and you acknowledge that Sapere Pty Ltd will sometimes communicate with you this way.

## Sapere Pty Ltd Obligations

10. Under this Agreement, Sapere Pty Ltd agrees to:
  - a. supply you with course materials
  - b. provide you with access to learning and administrative support; and
  - c. grade your assessments;

Sapere Pty Ltd will provide you with course materials, assessments and support of your course as you

- a. Successfully complete the requirement of the course; and
- b. Pay all Fees outlined in the Course Information Guide.
- c. Sapere will provide feedback and grade your assessments

1. On successful completion of all assessments and the full payment of the Course Fee, Sapere will issue you appropriate certification for your course.
2. Sapere may make changes to your course (including units, learning materials and assessments).

## Paying Your Course Fees

3. If you are paying your Course Fee by instalments, you must:
  - a. Complete an instalment Request Agreement; which will be approved by the CEO
  - b. Pay all such instalments on or before the due date.
4. If you fail to pay any part of the Course Fee by the due date, Sapere Pty Ltd reserves the right to:
  - a. withhold provision of course materials;
  - b. withhold grading of assessments; and

# STUDENT ENROLMENT APPLICATION FORM



- c. notify relevant credit agencies of your default.

## Other terms

1. The course material that Sapere Pty Ltd provides to you shall become your property. However, the content of the course materials, including copyright and all other such intellectual property rights contained therein, remain the property of Sapere Pty Ltd. You may not reproduce any part of the course materials or assessments.
2. If you are under 18 years of age, your parent or guardian must sign this Agreement and sign the Parent or Guardian Declaration on the Pre-Enrolment Form. Under this Agreement, the parent or guardian is responsible for payment of the Course Fee.
3. That you have read through the Student Handbook and the Course Information Guide and have understood the contents and if further explanations needed have had it explained to you by on of Sapere Pty Ltd Administration Staff.

**Name of Student:**

**Name of Witness:**

Signature:

Date:

Signature:

Date:

**Name of Parent or Guardian:**

(if student is under 18 years of age)

Signature:

Date: