



Student Enrolment form

Smart and Skilled funded course

Personal Details (Please use block letters)

Surname: _____

Given name: _____

Former Surname: _____

Other names: _____

Unique Student Identifier: _____

If you do not have a USI and would like that Superior Training Centre apply on your behalf, you must authorise us to do so and declare that you have read the privacy information located at <http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx>.

I have read the privacy statement and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at <http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx>

I understand that I may receive a National Centre for Vocational Education Research (NCVER) student survey.

Student signature: _____ **Date:** _____

(Please go to page no. 7 to fill an application for USI)

Gender: Male Female

Date of birth: / /

Residential Address:

Street name and number

Suburb, locality or town

Postcode

Home phone number

Mobile:

Email address



Which course are you enrolling in? Choose one only

Trainee or Apprentice

- Electrotechnology (Career Start), **Traineeship**, UEE22011, Certificate II
- Electronics, **Traineeship**, UEE21911, Certificate II
- Electrotechnology Electrician, **Apprenticeship**, UEE30811, Certificate III
- Split Air-Conditioning & Heat Pump Systems, **Apprenticeship**, UEE01111, Certificate II
- Air-Conditioning & Refrigeration, **Apprenticeship**, UEE32211, Certificate III

Full Qualification

- Electrotechnology (Career Start), UEE22011, Certificate II
- Electronics, UEE21911, Certificate II
- Electrotechnology Electrician, UEE30811, Certificate III
- Split Air-Conditioning & Heat Pump Systems, UEE20111, Certificate II
- Air-Conditioning & Refrigeration, UEE32211, Certificate III

Language and Diversity

Which country were you born in? _____

Which town/city were you born in? _____

Which language do you speak at home? _____

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

How well do you speak English?

- Very well Well Not well Not at all

What is your residency status?

Australian Citizen

Permanent Resident

Other, please specify _____



Are you of Aboriginal or Torres Strait Islander origin? No Yes

Yes, Torres Strait Islander Yes, Aboriginal

Schooling

Are you still attending secondary school? Yes No

What is your highest COMPLETED school level? (Please tick ONE box only)

Year 12 or equivalent Year 11 or equivalent Year 10 or equivalent

Year 9 or equivalent Year 8 or equivalent Never attended school

In which YEAR did you complete that school level? _____

Have you achieved any qualifications since turning 17?

Yes, while still in school

Yes, after leaving school

No

If yes, please select:

Foundation

Certificate I

Certificate II

Certificate III

Certificate IV and above

Certificate IV and above with acquired disability

Diploma



Are you registered, or intending to be registered, in an apprenticeship or traineeship for this qualification in NSW?

- Yes, registered Trainee/Apprentice
- Yes, intend to be registered Trainee/Apprentice
- No

Have you undertaken any other Smart and Skilled qualification this calendar year?

- No Yes

Employment

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

Please tick ONE box only

- Employed – unpaid worker in a family business Employer
- Full-time employee Not employed – not seeking employment
- Part-time employee Self-employed- not employing others
- Unemployed – seeking full-time work Unemployed – seeking part-time work

Do you have a disability?

- Yes, I have a disability
- No, I am a dependent child or spouse of a person receiving a disability support pension
- No disability

If yes, please tick relevant item(s) below

- Hearing/Deaf Physical
- Intellectual Learning
- Mental Illness Acquired Brain Impairment
- Vision Medical Condition Other



Are you living in NSW social housing or are you or your household on the NSW Housing Register?

No Yes

Indicate your welfare status:

- I am a welfare recipient
- I am the dependent child or spouse of a person receiving a disability support pension
- I am not a welfare recipient

If YES, please specify:

- Age Pension
- Carer Payment
- Farm Household Allowance
- Sickness Allowance
- Special Benefit
- Widow Allowance
- Widow Pension
- Youth Allowance
- Austudy
- Exceptional Circumstance Relief Payment
- Family Tax Benefit Part A – Maximum Rate
- Parenting Payment (single)
- Veteran’s Affairs Pensions
- Veteran’s Children Education Scheme
- Wife Pension

Reason for Study

Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship? (Tick ONE box only)

- To get a job
- To develop my existing business
- To start my own business
- To try a different career
- To get a better job or promotion
- It was required of my job
- To gain extra skills for my job
- To get another course of study
- Personal interest
- Other reasons



Planned start date _____ (by training provider)

Planned end date _____ (by training provider)

Are you an Employment Service Provider client?

Yes No

Employment Service Provider Organisation/ID _____

Employment Service Provider Client ID _____

Have you been referred to this training by an employment Service Provider client?

Yes No

Employment Service Provider referral ID _____

I can provide appropriate evidence of long term unemployed status

Yes No

We are obliged to demonstrate that we have confirmed your identity. We kindly ask you to provide the following, where applicable:

100 points of ID Proof of Long term unemployment status Citizenship status

Applicant Declaration

I acknowledge that the information provided is true and correct. 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 Superior Training Centre Pty Ltd.

I also give my permission to Superior Training Centre for the release of the images/tests/information to Employers and government agencies for reporting purposes, or to use them for educational, promotional and visibility materials.

Signature: _____ **Date** / /



APPLICATION FOR UNIQUE STUDENT IDENTIFIER

I give permission for the Administration Staff at Superior Training Centre Pty Ltd to create a Unique Student Identifier (USI) on my behalf.

STUDENT NAME: _____ DATE: _____

STUDENT SIGNATURE: _____

I therefore provide the following details:

FULL NAME: _____

DATE OF BIRTH: / /

COUNTRY OF BIRTH: _____

TOWN/CITY OF BIRTH: _____

HOME ADDRESS: _____

HOME TELEPHONE NUMBER: _____ MOBILE NUMBER: _____

EMAIL ADDRESS: _____

DRIVERS LICENSE NUMBER: _____ STATE _____

PASSPORT OR AUSTRALIAN BIRTH CERTIFICATE NUMBER: _____

MEDICARE NO: (plus number on card relating to student): _____ / _____

INFORMATION REGARDING UNIQUE STUDENT IDENTIFIER

From 2015, school students participating in nationally recognised training must have a Unique Student Identifier (USI). The USI will provide students with the ability to obtain a complete record of their Vocational Education and Training (VET) enrolments and achievements from a single online source. Students often need to provide evidence of their academic achievements, for example when applying for a job or to undertake further study.

The USI enables students to obtain a full transcript of all the accredited VET training they have undertaken from the time the USI comes into effect, or an extract showing the achievements they wish to see. A student must provide their USI to their training provider before the training provider can issue a statement of attainment or qualification. While students can apply for their own USI, schools can also apply on behalf of students with the student's permission. Suggested forms of ID for young students would be a Medicare number, Australian Birth Certificate or Citizenship Certificate.

Further information about the USI also available at:

<http://www.industry.gov.au/skills/regulationreformsandinitiatives/uniquestudentidentifierforvet/Pages/default.aspx>