

Participant Enrolment Agreement

Course NAME: _____

Participant Details

Participant's Full Name: _____ Male Female
(Family or Surname) (Given Names)

Ten Digit Alphanumerical Unique Student Identifier (USI) (if known): _____
(If USI is not known, follow instructions located at the rear of this form)

Usual Address: _____
(Please provide the physical address (street number and name not post office box) where you usually reside rather than any temporary address at which you reside for training, work or other purposes before returning to your home.
If you are from a rural area use the address from your state's or territory's 'rural property addressing' or 'numbering' system as your residential street address.)

_____ (Suburb) _____ State _____ P/Code

Your Postal Address if different from above:

Postal Address: _____

_____ (Suburb) _____ State _____ P/Code

Phone: (Home) _____ (Mob) _____ Date of Birth: ____/____/____

Email Address: _____

Emergency Contact: _____ Tel No. _____ Relationship: _____

ID Verified by: (Record D/L or Passport # etc.): _____

Course Start Date: _____

Residency Status

Australian Citizen Permanent Resident Holder of Green Medicare Card

Visa Holder (Please provide visa class _____)

Please note that MBA cannot offer enrolments to the students whose visa restriction on study rights. We also can't offer enrolment to participants on student visa. It is your responsibility to ensure that you hold valid visa to undertake assessment services. Information about your visa can be obtained from <https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing>.

MBA representative to complete: Visa Status checked N/A Yes Rep Name: _____

Employment Status

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

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

Employer Details (If applicable)

Business Name: _____

ABN: _____

Address: _____

Contact Name: _____ Email Address: _____

Phone: _____ Fax: _____

Cultural Background

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

Were you born in Australia? Yes No

If no, what is your Country of Birth: _____

Do you speak a language OTHER THAN English at home? Yes No

If YES, which language do you usually speak? _____

How well do you speak English? Very Well Well Not Well Not at All

Do you require any language, literacy or numeracy assistance? Yes No

Education

What is your highest COMPLETED school level?

Never attended school Year 8 or below Year 9 or equiv Year 10 or equiv

Year 11 or equiv Year 12 or equiv

In which YEAR did you complete that school level? _____

Are you still attending secondary school: Yes or No

Since leaving school, have you COMPLETED any of the following qualifications?

- Trade Certificate Advanced/Technician Certificate
 Other Certificate Associate Diploma
 Undergraduate Diploma Degree or Postgraduate Diploma

If YES, what was the name of the qualification(s)? _____

Disability

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

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)

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

If you require assistance for a disability, please advise how we may assist you: _____

Study Reason

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

- | | |
|---|--|
| <input type="checkbox"/> To get a job | <input type="checkbox"/> It was a requirement of the job |
| <input type="checkbox"/> To develop my existing business | <input type="checkbox"/> I wanted extra skills for my job |
| <input type="checkbox"/> To start my own business | <input type="checkbox"/> To get into another course of study |
| <input type="checkbox"/> To try for a different career | <input type="checkbox"/> For personal interest or self development |
| <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> Other reasons |

Referral

Are you referred by the by an agent Yes No

Agent Business Name:

Recognition of Prior Learning

RPL is available for this assessment program.

Privacy Statement and Student Declaration.

As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us.

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

Under the Data Provision Requirements 2012, Melbourne Building Academy's Pty. Ltd is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the *Privacy Act 1988* (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.

The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (DESE), Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation
- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the

NCVER’s Privacy Policy at www.ncver.edu.au/privacy.

If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below.

DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how the DESE will handle your personal information, please refer to the DESE VET Privacy Notice at <https://www.dese.gov.au/national-vet-data/vet-privacy-notice>.

Surveys

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

Contact information

At any time, you may contact Melbourne Building Academy’s Pty. Ltd to:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

The information you have provided will remain private and confidential. I have read and accepted the terms and conditions of the fees and refund policy as described in the Participant Handbook.

I give permission for Melbourne Building Academy’s to record evidence of my participation and assessment, in written, verbal, photographic (including video) formats.

Participant 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.

I also confirm that I hold a visa that allows me to participate in the training (if applicable).

Participant Signature Date

**Training Agreement
(to be completed by the participant at enrolment)**

I _____ (insert full legal name) agree to undertake training with Melbourne Building Academy, in the following course:

[_____]

During the course of this program, I understand and acknowledge that:

My rights and obligations, as defined in the Participant Handbook include:

1. My obligation at all times to conduct myself safely and in adherence to all relevant legislation.
2. I will actively attempt all training and assessment tasks with serious effort.
3. That I will comply with all safe and lawful requests
4. I will arrive on time and will return on time from all breaks.
5. That I will not bully, abuse, vilify or fail to treat all people participating, associated with, or in the vicinity of Melbourne Building Academy training venues with the utmost respect and courtesy.

Melbourne Building Academy's rights and obligations include:

6. To provide quality training and assessment services, compliant to the RTO Standards 2015, in a competent manner through the provision of quality resources and staff resulting in the issuance of AQF statement of attainment.
7. Assessment be performed by qualified assessors with the required knowledge and currency in the needs of industry.
8. Guaranteeing to provide assessment services to customers who have met their obligations with regard to completion of enrolment details, and financial payments
9. Guaranteeing that in the event that Melbourne Building Academy cannot deliver a course, a full refund of all monies paid to Melbourne Building Academy will be refunded to the purchaser.
10. Committing that training will not be offered to participants who fail to wear PPE or fail to pay for the course.
11. Choosing to terminate a customer's training if they fail to uphold these standards
12. Keeping participants informed of any changes in the service delivery including trainers, our ownership, the engagement of third parties or any other aspect of the participants training experience.

Agreed to and accepted by Participant:

Signed Date

Agreed to and accepted by Melbourne Building Academy Representative:

Signed Date

Print Name:.....

Instructions for obtaining your own Unique Student Identifier

As from 1st January, 2015, students, wishing to graduate from a Vocational Education and Training course (a VET Course) are required to obtain a Unique Student Identifier (USI).

As from 1st January, 2015, a RTO cannot issue a qualification to a student unless that student provides the RTO with their USI. The USI will allow the Government to permanently record the awarding of this qualification to the individual.

Thus from 1st January, 2015, unless exemptions apply, all training successfully delivered will be recorded by the Government.

To obtain your USI, you will need to:

1. Obtain it yourself from www.usi.gov.au by providing information about yourself similar in content to that on your driver's licence, or

2. Authorise a third party such as this RTO to obtain it on your behalf. To enable us to generate your USI, you will need to:

1. Accurately complete this enrolment form, ensuring that the details you provide match your ID.

2. Provide us with one of the following form of unique identification:

- Driver's Licence
- Medicare Card
- Australian Passport
- Visa (with Non-Australian Passport) for international students
- Birth Certificate (Australian) *please note a Birth Certificate extract is not sufficient
- Certificate Of Registration By Descent
- Citizenship Certificate
- ImmiCard

3. Nominate the preferred method of contact so that your USI activation notice can be sent to you, options include, email, phone or mailing address.

4. Complete the form over page.

Once your USI has been generated, you should:

- write down your USI somewhere safe or enter it into your phone for safe keeping.
- activate your USI account at some stage in the near future.
- if you do not activate your account, your USI still works.
- when you do activate your account, you will be required to add some security questions and choose a password.

PLEASE NOTE: The USI System checks for duplicate entries and will report any suspected duplicates

Unique Student Identifier Generation Authority

I, _____, authorise Melbourne Building Academy to generate my Unique Student Identifier (USI) on my behalf.
(Insert full name)

I willing provide the following Identification: (tick form of ID provided)

- Driver’s Licence
- Medicare Card
- Australian Passport
- Visa (with Non-Australian Passport) for international students
- Birth Certificate (Australian) *please note a Birth Certificate extract is not sufficient
- Certificate Of Registration By Descent
- Citizenship Certificate
- ImmiCard

My preferred form of contact for the USI activation notice is: (tick preferred method)

- Email
- Phone
- My mailing address.

Signed: _____ Date: _____
(Sign your name here)

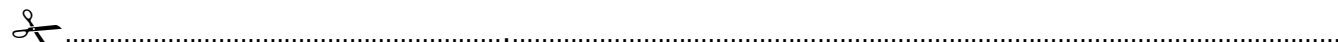
Office Use Only:

I, _____ acknowledge receipt of the above form of ID.
(Insert full name)

Signed: _____ Date: _____
(Sign your name here)

I, _____ acknowledge that I have had the above form of identification returned to me
(Insert full name)

Signed: _____ Date: _____
(Sign your name here)



Your USI Number is:

Please

- write down your USI somewhere safe or enter it into your phone for safe keeping.
- activate your USI account at some stage in the near future.
- if you do not activate your account, your USI still works.
- when you do activate your account, you will be required to add some security questions and choose a password.