



Application for Enrolment Form

Intended Course of Study						
Course Code Course Name			lame			
Personal Details						
	name that yo			Jnique Student Identific		ng any middle names. If you do use.
Title	Given na	Given names Family Name (Surname)				
Enter your birth date (Day/month/year)		Gender (Tick ONE box only)			
/ / M			☐ Male	☐ Femal	e	Other
Enter your contact information						
Home phone (including area code)			Mobile			
Email	address					
Alternative email address (optional)						
Enter contact information in case of emergency						
Emergency contact Relationship to you name		ionship to you	En	nergency conta	act number	

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What is the address of your usual residence?

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 or territory's 'rural property addressing' or 'numbering' system as your residential street address.

Building/property name is the official place name or common usage name for an address site, including the name of a building, Aboriginal community, homestead, building complex, agricultural property, park or unbounded address site.

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	
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	

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Language and Cultural Diversity					
In which country were you born?					
☐ Australia	Other – please specify:				
Do you speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)					
☐ No – Englis	h only				
Are you of Abor (For persons of bo	iginal or Torres Strait Islander origin? oth Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)				
☐ No	☐ Yes, Aboriginal ☐ Yes, Torres Strait Islander				
Disability					
Do you conside	r yourself to have a disability, impairment or long-term condition?				
☐ Yes	☐ No (Go to the next section)				
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 on the following page for an explanation of the following disabilities.					
☐ Hearing/dea	☐ Hearing/deaf ☐ Acquired brain impairment				
☐ Physical	☐ Physical ☐ Vision				
☐ Intellectual	☐ Intellectual ☐ Medical condition				
☐ Learning ☐ Other:					
☐ Mental illness					
If you answered YES to the above question do you require any assistance to participate in this course?					
☐ No	☐ Yes (We'll arrange a meeting to discuss this with you)				

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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 postpolio 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.

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Schooling				
What is your highest COMPLETED school level? 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. (Tick ONE box only)				
☐ Completed Year 12 ☐ Completed Year 9 or equivalent				
☐ Completed Year 11 ☐ Completed Year 8 or lower				
☐ Completed Year 10 ☐ Never attended school				
Are you still enrolled in secondary or senior secondary education?				
☐ Yes ☐ No				
Previous Qualifications Achieved				
Have you SUCCESSFULLY completed any of the qualifications listed below	ow?			
☐ Yes ☐ No				
Yes (if yes, please enter one of these Prior Education Achievement Recognition Identifiers any applicable qualification level.) A – Australian E– Australian equivalent I – International Note: If you have multiple Prior Education Achievement Recognition Identifiers for any one qualification, use the following priority order to determine which identifier to use 1. A – Australian 2. E– Australian equivalent 3. I – International				
	Α	E	ı	
☐ Bachelor Degree or Higher Degree				
Advanced Diploma or Associate Degree				
□ Diploma (or Associate Diploma) □ □ □				
☐ Certificate IV (or Advanced Certificate/Technician) ☐ ☐ ☐				
☐ Certificate III (or Trade Certificate) ☐ ☐ ☐				
□ Certificate II □ □ □				
□ Certificate I □ □ □				
☐ Certificates other than the above				

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Employer Details					
Enter your current employment information (where applicable)					
Employer organisation name	Your position				
Supervisor name					
Employers street address					
Suburb, locality or town					
State/territory				Postcode	
Telephone				Fax	
Email					
Website					
Employment					
Of the following categories, which BEST describes your current employment status?					
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). (Tick ONE box only)					
☐ Full-time employee ☐ Employed – unpaid worker in a family business					
Part-time employee		☐ Unemployed – seeking full-time work			
☐ Self-employed – employing others ☐ Unemployed – not seeking employment					

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Occupation				
Which of the following classifications BEST describes your current or recent occupation? (Tick ONE box only) If unemployed, go to the next question.				
☐ Managers	☐ Sales Workers			
☐ Professionals	☐ Machinery Operators and Drivers			
☐ Technicians and Trade Workers	☐ Labourers			
☐ Community and Personal Service Workers	Other:			
☐ Clerical and Administrative Workers				
Industry				
Which of the following classifications BEST describes the Industry of your current or previous Employer? (Tick ONE box only) If unemployed, go to the next question.				
☐ Agriculture, Forestry and Fishing	☐ Financial and Insurance Services			
☐ Mining	☐ Rental, Hiring and Real Estate Services			
☐ Manufacturing	☐ Professional, Scientific and Technical Services			
☐ Electricity, Gas, Water and Waste Services	☐ Administrative and Support Services			
☐ Construction	☐ Public Administration and Safety			
☐ Wholesale Trade	☐ Education and Training			
Retail Trade	☐ Health Care and Social Assistance			
☐ Accommodation and Feed Services	☐ Arts and recreation Services			
☐ Transport, Postal and Warehousing	☐ Other Services			
☐ Information Media and telecommunications				

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Study Reason					
Study Reason – Of the following categories, which BEST describes your main reason for undertaking this course / traineeship? (Tick ONE box only)					
☐ To get a job	☐ I wanted extra skills for my job				
☐ To develop my existing business	☐ To get into another course of study				
☐ To start my own business	☐ For personal interest or self-development				
☐ To try for a different career	☐ To get skills for community / voluntary work				
☐ To get a better job or promotion	☐ Other reasons				
☐ It was a requirement of my job					
Unique Student Identifier					
From 1 January 2015, BETTERLINK GROUP 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). 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. 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)					
In providing my USI, I confirm BETTERLINK GROUP is authorised to collect, use and disclose my student identifier for the purposes required under the <i>Student Identifiers Act 2014</i> .					
I understand that I will receive a notice regarding BE my USI.	ETTERLINK GROUP's use of this information to confirm				
I understand that BETTERLINK GROUP's name included in the notice may be different to the name they are familiar with – the name of the organisation verifying my USI is <i>Betterlink Business Consultancy & Training Services Group.</i>					

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Privacy Notice & Applicant Declaration

Privacy Notice

Under the *Data Provision Requirements 2012*, BETTERLINK GROUP 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 BETTERLINK GROUP for statistical, administrative, regulatory and research purposes. BETTERLINK GROUP 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).

BETTERLINK GROUP retains a record of personal information about all individuals with whom we undertake any form of business activity. BETTERLINK GROUP 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, BETTERLINK GROUP 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.

BETTERLINK GROUP 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 services 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 BETTERLINK GROUP collects, uses and discloses your personal information generally, including how you can make a complaint about a breach of privacy, please refer to BETTERLINK GROUP privacy policy which can be found within the Student Handbook and on the web at www.betterlinkgroup.edu.au

This Privacy Policy 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.



Applicant 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.

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 BETTERLINK GROUP.

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

Marketing Use Content

I give BETTERLINK GROUP permission to use photos in public material and social media (including any photos where I may be recognised) as may be useful.

Lauthoring images of my participation in training to be used by RETTERLINK CROLID for future marketing

and business purposes.	participation in training to be used	I DY BETTERLINK	GROUP for future marketing		
I understand that I retain	the right to withdraw my consent a	at any time.			
☐ I choose to opt-out of this marketing and usage consent.					
Applicant Signature:		Date:			
		Time of signing:			
*Parental/guardian consent is required for all students under the age of 18.					
Parent / Guardian Name:					
Parent / Guardian		Date:			
Signature:		Time of signing:			

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