

International Student Enrolment form

 Melbourne (VIC) Campus
 Brisbane (QLD) Campus

Personal Information

Note to the Student: Please complete all the fields of this form.

Family Name*			
Given Name*			
Preferred Name		Student ID Number	
<p>*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 and want MILCOM Institute to apply for a USI on your behalf, you must write your name, including any middle names, exactly as written in the identity document you choose to use for this purpose. See section on USI further down this document for a detailed explanation.</p>			
GENDER	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other or non-disclosed		
DATE OF BIRTH		Mobile Number	
EMAIL			

Address in Australia

Unit Number: _____ Street Number: _____ Street Name: _____
 Suburb/Town: _____ State: _____ Postcode: _____

Overseas Address

Unit Number: _____ Street Number: _____ Street Name: _____
 Suburb/Town: _____ State: _____ Country: _____
 Postcode: _____

Emergency Contact

Emergency Contact Name:	
Relationship:	Mobile no.:

Qualifications Selection

I am enrolled in the following course/s (Please tick in the box):

- BSB30120 Certificate III in Business
- BSB40120 Certificate IV in Business
- BSB50120 Diploma of Business
- BSB60120 Advanced Diploma of Business
- BSB50420 Diploma of Leadership and Management
- BSB60420 Advanced Diploma of Leadership and Management
- ICT60220 Advance Diploma of Information Technology (Telecommunications Network Engineering)
- BSB80120 Graduate Diploma of Management (Learning)
- General English I (From 01 to 58 Weeks as applicable) **Please specify Weeks: _____**

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English for Academic Purpose I (up to 34 Weeks as applicable) **Please specify Weeks:** _____
 Other Please Specify:

Intake Date: ___/___/_____

Credit Transfer /RPL

Do you wish to apply for Recognition Prior Learning (RPL), Credit Transfer (CT)?

Yes No
 If yes: RPL CT
 (Please contact Admin for Credit Transfer and submit with supporting documents, such as an official transcript or Statement of attainment).

LANGUAGE AND CULTURAL DIVERSITY (Tick the appropriate boxes)

Country of Birth Australia Other – please specify _____

Town/City of Birth **Citizenship**

ATSI STATUS

Are you of Aboriginal or Torres Strait Islander origin?

No
 Yes, Aboriginal Yes, Torres Strait Islander

LANGUAGE IDENTIFIER (Tick the appropriate boxes)

Do you speak a language other than English at home?

No, English only Yes, other (please specify): _____

How well do you speak English?

Very Well Well Not well Not at all

EMPLOYMENT (Tick the appropriate boxes)

Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

- | | |
|---|--|
| <input type="checkbox"/> Full-time employee | <input type="checkbox"/> Employed - unpaid worker in a family business |
| <input type="checkbox"/> Part-time employee | <input type="checkbox"/> Unemployed - Seeking full-time work |
| <input type="checkbox"/> Self-employed - Not employing others | <input type="checkbox"/> Unemployed - Seeking part-time work |
| <input type="checkbox"/> Employer | <input type="checkbox"/> Not employed - Not seeking employment |

Which of the following classifications BEST describes your current or recent occupation? (Tick ONE box only) (if never employed, skip this question)

- | | |
|--|---|
| <input type="checkbox"/> 1 – Managers | <input type="checkbox"/> 2 – Professionals |
| <input type="checkbox"/> 3 – Technicians and Trade Workers | <input type="checkbox"/> 4 – Community and Personal Service Workers |
| <input type="checkbox"/> 5 – Clerical and Administrative Workers | <input type="checkbox"/> 6 – Sales Workers |
| <input type="checkbox"/> 7 – Machinery Operators and Drivers | <input type="checkbox"/> 8 – Laborer |
| <input type="checkbox"/> 9 – Other | |

Which of the following classifications BEST describes the Industry of your current or previous Employer? (Tick ONE box only) (If never employed, skip this question)

- | | |
|--|---|
| <input type="checkbox"/> A – Agriculture, Forestry and Fishing | <input type="checkbox"/> B – Mining |
| <input type="checkbox"/> C – Manufacturing | <input type="checkbox"/> D – Electricity, Gas, Water and Waste Services |
| <input type="checkbox"/> E – Construction | <input type="checkbox"/> F – Wholesale Trade |
| <input type="checkbox"/> G – Retail Trade | <input type="checkbox"/> H – Accommodation and Food Services |
| <input type="checkbox"/> I – Transport, Postal and Warehousing | <input type="checkbox"/> J – Information Media and Telecommunications |
| <input type="checkbox"/> K – Financial and Insurance Services | <input type="checkbox"/> L – Rental, Hiring and Real Estate Services |
| <input type="checkbox"/> M – Professional, Scientific and Technical Services | <input type="checkbox"/> N – Administrative and Support Services |
| <input type="checkbox"/> O – Public Administration and Safety | <input type="checkbox"/> P – Education and Training |
| <input type="checkbox"/> Q – Health Care and Social Assistance | <input type="checkbox"/> R – Arts and Recreation Services |
| <input type="checkbox"/> S – Other Services | |

SCHOOLING (Tick the appropriate boxes)

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

<input type="checkbox"/> Completed Year 12 or	<input type="checkbox"/> Completed Year 11 or equivalent	<input type="checkbox"/> Completed Year 10 or
<input type="checkbox"/> Completed Year 9 or equivalent	<input type="checkbox"/> Completed Year 8 or lower	<input type="checkbox"/> Never Attended School

In which year did you complete that school level? _____

Are you still attending secondary school? Yes No

Name of last / current secondary school attended: _____

PREVIOUS QUALIFICATION ACHIEVED (Tick the appropriate boxes)

Have you SUCCESS FULLY completed any of the following qualifications? Yes No

- | | |
|--|---|
| <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Bachelor Degree or Higher Degree | <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate III (or Trade Certificate) |
| <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Advanced Diploma or Associate Degree | <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate II |
| <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Diploma (or Associate Diploma) | <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate I |
| <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate IV (or Advanced Certificate/Technician) | |
| <input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificates Other than Above | |

(If Yes, please select one of these Prior Education Achievement Identifier to any applicable qualification level and attach qualification certificate/evidence)

A–Australia

E–Australian Equivalent

I–International

International qualification has been assessed and recognized in Australia No Yes

Qualification Assessed & Recognized: _____

Attached is the copy of my international qualification

DISABILITY (Tick the appropriate boxes)

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

Yes No

If yes, please indicate the areas of disability, impairment or long-term condition (You may indicate more than one area)

- | | | | | |
|--|---------------------------------------|--|-----------------------------------|---|
| <input type="checkbox"/> Hearing/Deaf | <input type="checkbox"/> Learning | <input type="checkbox"/> Vision | <input type="checkbox"/> Physical | <input type="checkbox"/> Mental Illness |
| <input type="checkbox"/> Medical Condition | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Acquired Brain Impairment | <input type="checkbox"/> Other | |

Please note: If you have a disability, you will need to discuss with the Course Advisor the suitability of the course before your enrolment is accepted.

STUDY REASON (Tick the appropriate boxes)

Which of the following categories, best describe your main reason for undertaking this course?

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

Do you have any special learning needs?

- Yes (Discuss your requirement with the BD/Trainer or the Admin staff of MILCOM)
- No

Do you have digital capability (sufficient computer skills) to take online training for any part of the course?

- Yes
- No (Discuss your requirement with the BD/Trainer or the Admin staff of MILCOM)

UNIQUE STUDENT IDENTIFIER (USI)

Who needs a USI and why?

All students doing nationally recognised training need to have a Unique Student Identifier (USI). If you are a new or continuing student undertaking nationally recognised training, you need a USI in order to receive your qualification or statement of attainment.

Do you have a Unique Student Number?

- YES Please provide your USI Number: _____
- NO Please log-in and create your USI number - <https://www.usi.gov.au/students/create-your-usi>

PRIVACY STATEMENT

Information is collected on this form and during your enrolment in order to meet our obligations under the ESOS Act and the National Code 2018; to ensure student compliance with the conditions of their visas and their obligations under Australian immigration laws generally. The authority to collect this information is contained in the Education Services for Overseas Students Act 2000, the Education Services for Overseas Students Regulations 2001 and the National Code of Practice for Providers of Education and Training to Overseas Students 2018. Information collected about you on this agreement and during your enrolment can be provided by MILCOM Institute, the Commonwealth including the TPS or state or territory agencies, in certain circumstances, to the Australian Government and designated authorities; in accordance with the Privacy Act 1988. In other instances, information collected on this form or during your enrolment can be disclosed without your consent where authorized or required by law.

Under the *Data Provision Requirements 2012*, **MILCOM Institute** 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 document and during the course of your study), may be used or disclosed by **MILCOM Institute** for statistical, administrative, regulatory and research purposes. **MILCOM Institute** may disclose your personal information for these purposes to:

- Commonwealth and State or Territory government departments and authorized 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 authorized agencies. Please note you may opt out of the survey at the time of being contacted.

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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).

STUDENT DECLARATION

PRIVACY STATEMENT & GENERAL DECLARATION

I understand that:

- 1) The *Data Provision Requirements 2012* (refer www.comlaw.gov.au) requires the College to provide the national regulator ASQA, with student and training activity data and quality indicator data which may include information I provide in this enrolment form.
- 2) Information is required to be provided in accordance with the Australian Vocational Education and Training Management Information Statistical Standard (AVETMISS) guidelines.
- 3) I can access details of AVETMISS from www.ncver.edu.au.
- 4) The Federal Government may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, and reporting and/or research activities.
- 5) The collection, release and access to data is governed by a set of protocols and policies which set out the principles and commitments for the storage and disclosure of vocational education and training information, are determined by the Ministerial Council for Tertiary Education and Employment.
- 6) The Education Services for Overseas Students Act 2000 requires the College to provide the Federal Government with information relating International student enrolments and academic progress.

I have been advised by MILCOM Institute that:

- 1) My personal information provided on this enrolment form will be kept private, confidential and secure by all College staff.
- 2) MILCOM will release data to the relevant authorities if required.
- 3) I may be contacted and requested to participate in a National Centre of Vocational Education Research survey or audit or internal review. For more information in relation to how student information may be used or disclosed please contact MILCOM CEO.
- 4) I understand that MILCOM will not issue a certificate and/or statement of attainment until all the appropriate documentation has been completed, signed, and all fees have been paid.

I give permission for the RTO to:

- 1) Create a Unique student identifier (USI) on my behalf **AND/OR** check my details of my USI
- 2) Access my personal USI information
- 3) Or their representative to obtain Medical Treatment in the event of an emergency. I indemnify MILCOM Institute of their representative.
- 4) **I consent/I do not consent** to the use of my photos/videos/testimonials/interviews to be used in MILCOM Institute promotional materials prepared for the marketing purposes in Australia and overseas.
- 5) I agree and will abide with all the terms and conditions specified in the MILCOM Institute Student Handbook.

By signing below, I acknowledge and agree to the above:

I declare that all the information provided above in this Enrolment Form is true and accurate.

Signature:

Date:

OFFICE USE ONLY

Any Additional Information/Comment (if any)