

Office use only sec Student Name:	tion: Student ID:				
About this form	0.0 d 0.11 l 2 l				
for enrolment form must please contact us by p incorrect information n and given name(s) as the Student Handbook You can send this form	rest in seeking enrolment into Hope Training College of Australia. This application at be completed in English. If you require any assistance in completing this form, whone or email. Please ensure that all fields are filled in on the form. Missing or may cause delays in the application process. Please provide your family name(s) shown on your National ID. Make sure you read Pre – Enrolment information in a to us by post or email. Please provide of any documentation specified in the dany other requested documents referred to in the course brochure.				
Unique Student Ident	lifier (USI)				
qualification or statem Student Identifier (USI). If you have not yet obt https://www.usi.gov.au	of Australia can be prevented from issuing you with a nationally recognised VET ent of attainment when you complete your course if you do not have a Unique In addition, we are required to include your USI in the data we submit to NCVER. rained a USI you can apply for it directly at u/students/create-your-usi/ on computer or mobile device.				
•	udent Identifier (USI) here:				
Course details					
Course you wish to enol in	☐ CHC33015 Certificate III in Individual Support or ☐ I want to enol only for these units (Unit code only):				
Requested start date					
Pre-Enrolment questi	on section				
satisfy the candidate's should also declare an	assess whether the course for which candidates are applying is suitable to training needs and will assist them with their vocational objectives. Candidates by other learning needs they may have that will assist Hope Training College of e best possible training outcomes.				
□ I am 18 or over 18 years old and will provide evidence of my age					
□ I am not a main app	olicant of an international student visa (Sub Class 500)				
	complete the listed course/s, I am required to spend 120 or more hours on Work apaid work to get experience working in a real environment.				
□ I understand that La course/s	nguage Literacy and Numeracy (LLN) test is required for entry in to listed				

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Or

☐ Equal or Higher qualification from Any Australian Institute and I will provide evidence of achieved qualification.

Please sign the declaration at the end of this document. Information contained in this document must be your personal responses. You must not solicit help or accept assistance from another person.

Privacy Notice

Why we collect your personal information

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. If you do not provide this information, we will be unable to process your enrolment.

How we use your personal information

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

How we disclose your personal information

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.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

How the NCVER and other bodies handle your personal information

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the Privacy Act 1988 / 2021 (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.

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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 us 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 RTO 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

Our contact details are:

Email: info@hope.edu.au

Tel: 1300 46 4673

You may also request our privacy policy if you wish.

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1 PERSONAL DETAILS:					
TITLE: (SELECT ONE ONLY):	□ MRS □ MIS	S 🗆 MS	S OTHER (PLEASE SPECIFY)		
GIVEN NAME:			MIDDLE NAME:		
SURNAME / FAMILY NAME/LAST NAM	E:				
HAVE YOU BEEN KNOWN BY ANY OTH	ER NAME? 🗆 NO, 🛭	☐ YES -			
PREFERRED NAME (IF ANY):			DATE OF BIRTH: DD MM YYYY		
COUNTRY OF CURRENT CITIZENSHIP:			PLACE OF BIRTH:		
GENDER: (SELECT ONE ONLY):	FEMALE	MALE	☐ OTHER (PLEASE SPECIFY)		
2 CONTACT DETAILS:		1			
MOBILE NO.		WORK P	PHONE NO.		
HOME PHONE NO.		SK	YPE ID (IF ANY):		
EMAIL ID:					
3 EMERGENCY CONTACT DETAI	LS:				
NAME:		RELATION	NSHIP WITH YOU:		
MOBILE NO:		EMAIL:			
4 CURRENT ADDRESS:					
BUILDING OR PROPERTY NAME:					
UNIT OR FLAT NO.	STREET NO. & NAM	/IE:			
SUBURB:		STATE:	POST CODE:		
5 MAILING ADDRESS (COMPLETE IF DIFFERENT FROM CURRENT ADDRESS OR GO TO NEXT QUESTION)					
POST OFFICE BOX:					
STREET NO & NAME:			SUBURB:		
POSTAL CODE:					

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6 ENGLISH LANGUAGE PROFICIENCY LEVEL (SELECT ONLY ONE FROM EACH SECTION)						
DO YOU SPEAK A LANGUAGE OTHER THAN ENGLISH AT HOME? YES NO - ENGLISH ONLY						
IF SELECTED "YES" THEN WHICH LANGUAGE? -						
HOW WELL DO YOU SPEAK ENGLISH?						
□ VERY WELL	□ WELL	□ NOT WELL	□ NOT AT ALL			
7 CULTURAL DIVERSITY (SELECT ONLY ONE FROM EACH SEC	ΠΟΝ)				
IN WHICH COUNTRY WERE YOU	J BORN? □ AUSTRALIA	☐ OTHER (PLEASE SPECIFY)				
ARE YOU AN AUSTRALIAN CIT	IZEN? YES	□ NO IF YOU ARE NOT AUSTRALIAN (CITIZEN			
ARE YOU A PERMANENT RESI	DENT OF AUSTRALIA? YES	□ NO IF YOU ARE NOT PERMANENT I	RESIDENT			
WHICH VISA ARE YOU HOLDIN	G? (PLEASE SPECIFY)					
ARE YOU ABORIGINAL OR TOP	RRES STRAIT ISLANDER ORIGIN?					
□ NO □ ABORIGINAL	☐ TORRES STRAIT ISLANDER	☐ ABORIGINAL & TORRES ST	RAIT ISLANDER			
8 SUPPORT SERVICE (SEL	ECT ALL APPLY TO YOU)					
DO YOU IDENTIFY YOURSELF A	AS HAVING A DISABILITY?					
□ NO	☐ YES - HEARING/DEAF	☐ YES - LEARNING	☐ YES - PHYSICAL			
☐ YES - INTELLECTUAL	☐ YES - VISION	☐ YES - MEDICAL	☐ YES - OTHER			
	EASE PROVIDE MORE DETAIL AND A	DVISE US HOW WE CAN ASSIST YOU	TO ACHIEVE YOUR			
LEARNING?						
9 SCHOOL LEVEL EDUCATIONAL BACKGROUND: (SELECT ONLY ONE)						
WHAT IS YOUR HIGHEST COMP	PLETED SCHOOL LEVEL?	☐ I NEVER ATTENDED SCHO	00L			
☐ YEAR 8 OR BELOW	☐ YEAR 9 OR EQUIVALENT	☐ YEAR 10 OR EQUIV	ALENT			
☐ YEAR 11 OR EQUIVALENT	☐ YEAR 12 OR EQUIVALEN	T □ I AM STILL AT SCH	100L			
WHAT YEAR DID YOUR COMPLETE SCHOOL?						

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10 HIGHER LEVEL EDUCATIONAL BACKGROUND: (SELECT ALL APPLY TO YOU)							
AUSTRALIAN QUALIFICATIONS:							
□ CERTIFICATE I □ CERTIFICATE II □ CERTIFI	CATE III CERTIFICATE IV/ADVANCE CERTIFICATE						
☐ DIPLOMA OR ASSOCIATE DIPLOMA ☐ A	ADVANCE DIPLOMA OR ASSOCIATE DEGREE						
☐ OTHER QUALIFICATION (PLEASE SPECIFY)							
NON – AUSTRALIAN QUALIFICATIONS:	NON – AUSTRALIAN QUALIFICATIONS:						
11 RECOGNITION PROCESSES							
IS THIS THE FIRST TIME YOU HAVE ENROLLED AT HOP	E TRAINING COLLEGE OF AUSTRALIA ☐ YES, ☐ NO						
ARE YOU APPLYING FOR RECOGNITION OF PRIOR LEA	RNING (RPL) \square YES, \square NO						
ARE YOU APPLYING FOR CREDIT TRANSFER (CT) OF A	NY UNIT/S □ YES, □ NO						
IF YES THEN PROVIDE DETAIL OF UNIT/S YOU ARE API	PLYING FOR CREDIT TRANSFER:						
12 PURPOSE OF STUDY (SELECT ONLY ONE WHICH B	EST DESCRIBES YOU)						
☐ TO GET A JOB ☐ TRY DIFFERENT CAREER	☐ I WANTED EXTRA SKILLS FOR MY JOB						
☐ TO DEVELOP MY EXISTING BUSINESS	$\ \square$ TO GET A BETTER JOB OR PROMOTION						
\Box TO GET INTO ANOTHER COURSE OF STUDY	☐ TO START MY OWN BUSINESS						
☐ IT WAS A REQUIREMENT OF MY JOB	☐ FOR PERSONAL INTEREST OR SELF-DEVELOPMENT						
☐ OTHER REASON (PLEASE SPECIFY)							
13 CURRENT EMPLOYMENT STATUS (SELECT ONLY ONE WHICH BEST DESCRIBES YOU)							
☐ FULL TIME EMPLOYEE	☐ PART TIME EMPLOYEE						
☐ UNEMPLOYED – SEEKING FULL TIME WORK ☐ UNEMPOYED – SEEKING PART TIME WORK							
□ UNEMPLOYED – NOT LOOKING FOR WORK □ UNPAID FAMILY WORKER							
□ EMPLOYER	□ EMPLOYER □ SELF – EMPLOYED						

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14 SELECT YOUR COURSE & FEE/PAYMENT PLANS

Pricing for individuals registering for courses will be at the published rate in the Marketing Flyer /Information Flyer and on the website.

- The enrolment fee is non-refundable after 7 days of cooling off period is over, if offer letter signed and fee paid.
- Other special offers and discounts may be marketed from time to time
- For fee breakdown please visit our fee section on <u>www.hope.edu.au</u> or collect/download student handbook.
- Our learning resource are including into the course fee

COURSE SPECIALISATION/S	ENROLMENT FEE	TUITION FEE	TOTAL FEE		
CHC33015 CERTIFICATE III IN INDIVUDAL SUPPORT:					
☐ AGEING + HOME & COMMUNITY + DISABILITY	333 AUD	1517 AUD*	1850 AUD*		

*We cannot accept a one-time payment of more than \$1500

PAYMENT PLAN OPTIONS:

DIRECT DEBIT (EZI DEBIT)

The course fee can be paid through direct debit options to avoid late fee charges. The direct debit arrangement can be made directly by the college or through third-party service providers, e.g. Ezi Debit. We are offering flexible / customize payment plan as per student needs. For more details, please discuss with our enrolment representative.

PAYING MANUALLY

We are encouraging our students to set up direct debit, but in some cases, if the student wants to pay manually through EFTPOS or Cash can be arranged with fix payment dates. The college will add a \$15 late fee with every delayed payment.

SELECT ONE	SELECT ONE	AMOUNT WISH TO PAY	INSTALMENT START DATE
□ DIRECT DEBIT	□ WEEKLY		
☐ MANUALLY CASH/EFTPOS/BANK TRASNFER	☐ FORTNIGHTLY ☐ MONTHLY		

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COURSE / TUITION FEE REFUND OPTIONS:

COOKSE/ TOTTION FEE REPOND OF HONS.					
SCENARIO	REFUND (in % of total course fee)				
Enrolment fee (\$333.00)	non-refundable after 7 days of cooling off period is over				
Withdrawal after 1 week and before completion of 2 weeks from enrolment date					
Withdrawal after 2 weeks and before completion of 3 weeks from enrolment date	80%				
Withdrawal after 3 weeks and before completion of 4 weeks from enrolment date	70%				
Withdrawal after 4 weeks and before completion of 5 weeks from enrolment date	60%				
Withdrawal after 5 weeks and before completion of 6 weeks from enrolment date	50%				
Withdrawal after 6 weeks and before completion of 7 weeks from enrolment date	40%				
Withdrawal after 7 weeks and before completion of 8 weeks from enrolment date	30%				
Withdrawal after 8 weeks and before completion of 9 weeks from enrolment date	20%				
Withdrawal after 9 weeks and before completion of 10 weeks from enrolment date	10%				
Withdrawal after 10 weeks and before completion of 11 weeks from enrolment date	0%				
If College stopped delivering a course because RTO sanction by regulatory authorities	Full fee (Included Enrolment fee) will be refunded				
RPL Application Fee	Non – refundable if offer accepted				

Note: Refund request needs to be submitted in written or by email. Request time will be calculated based on time when request will be submitted. If refund request received after hours by email that will be considered in next working day's request. For more details on refund policy, please refer to Student Handbook

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15 COMPUTER / IT SKILL ASSESSMENT (SELECT ONLY ONE WHICH BEST DESCRIBES YOU)

Hope Training College of Australia delivers major part of study online. Therefore, it is very important to provide your current level of knowledge regarding use of computer.

MY SKILL LEVEL	NO EXPERIENCE	NEED SUPPORT	COMPETENT
I can start and shut down computer and related equipment e.g. printer etc.			
I know how to use USB memory stick, CD memory disk.			
I know how to connect with WIFI			
I can create, delete, copy, move and rename files/folders			
I can create, save, delete, move or rename a word and pdf document/s			
I understand how to change font style, size, and colour, change margins, line paragraph spacing, use tabs when dealing with word or pdf files.			
I can add, delete and edit header and footer of any word file.			
Insert page numbers, file name, date time, pictures, bullet & numbered lists			
Insert and edit tables			
Use clip art, shapes, text boxes			
Enter and understand web addresses (www)			
Search for and access resources and information through a search browser			
Download, store and print information from the Internet			
Reference material sourced from the Internet			
Understand the use of copyright material form electronic sources			
Create, write and send an email			
Use functions in emails, such as: copy, past, font size & style,			
Attach files, open attachments, store and print attachments			

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17	TERMS	S AND CONDITIONS OF YOUR ENROLMENT				
	\Box I agree to be bound by the College's Student Code of Conduct, policies, and procedures whilst					
	remain an enrolled student.					
	\Box I agree to pay all fees and charges relating to my enrolment, unless payment is to be made by my					
	employer or other contracted third party, in which case a purchase order or authority to invoice letter					
	will be presented at time of fees payment.					
	\square I acknowledge and agree to the terms and conditions.					
	By sign	ning this form, I certify that the information provided is true and correct. I further certify that:				
	1.	I acknowledge that any false information and/or failing to disclose any relevant information on my				
		application for enrolment may result in the withdrawal of any offer and/or cancellation of enrolment at				
		the discretion of Hope Training College of Australia.				
	2.	I have received the student handbook, read, and understood all the contents of it.				
	3.	I have received the course fees plan and payment plan information (if applicable) and have been				
		informed of the refund policy.				
	4.	I have read and understood the relevant course information and I agree to the course requirements.				
	5.	If applicable to my course, I have received the information about any materials, documents and / or				
		resources which I have to provide/or obtain myself.				
	6.	If applicable to my course, I have been informed about the practical placement requirements which I				
		must attend to achieve my qualification.				
	7.	I acknowledge that my Certificate and/ or Statement of Attainment will be issued by Hope Training				
		College of Australia within 30 days from being deemed competent in my course; however, release of				
		my certificate or statement of attainment may be delayed if all payments have not been received in				
		full, or I have not provided my Unique Student Identifier number;				
	8.	I understand that my personal information is protected by law under the Privacy Act 1988 and Privacy				
		Amendment Act 2014 and is collected by Hope Training College of Australia to assess my eligibility of				
		enrolment. The information is required to process my application. My information may be used by Hope				
		Training College of Australia. Personal information will only be provided to other persons or agencies with				
		my permission or where required by law				
	ENROL	LING STUDENT DECLARATION OF UNDERSTANDING				
	ΔΡΡΙΙ(CANT FULL NAME:				
	/ (
	SIGNA	TURE: DATE:				

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