



Intercept Group Pty Ltd
"Training Beyond Compare"



Participant Enrolment Form- RMS (v7.3)

Unique Student Identifier (USI)

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 Male Female

First Name _____ Last Name _____

Home Address _____

Suburb _____ State _____ Postcode _____

Postal address _____

Date of birth _____ Phone _____

Email _____

Employed by RMS YES NO

Drivers Licence _____

White Card Number _____

Reason for attending New Entrant Recertification Renewal

Course attending Traffic Controller Implement TCPs PWZTMP

LANGUAGE & CULTURAL DIVERSITY			
Country of Birth	<input type="checkbox"/> Australia <input type="checkbox"/> OTHER, please specify-		
Do you speak another language other than English at home?	<input type="checkbox"/> No, English only	<input type="checkbox"/> Yes, please specify	
Are you of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> No	<input type="checkbox"/> Yes Aboriginal	<input type="checkbox"/> Yes, Torres Strait Islander
SCHOOL HISTORY			
<input type="checkbox"/> Year 12 or equivalent	<input type="checkbox"/> Year 11 or equivalent	<input type="checkbox"/> Year 10 or equivalent	<input type="checkbox"/> Year 9 or equivalent
<input type="checkbox"/> Year 8 or equivalent	<input type="checkbox"/> Never attended school	<input type="checkbox"/> Still at school	
PREVIOUS QUALIFICATIONS <input type="checkbox"/> None			
<input type="checkbox"/> Bachelor or higher Degree	<input type="checkbox"/> Advanced Diploma or Associated Degree	<input type="checkbox"/> Diploma or Associated Diploma	<input type="checkbox"/> Cert IV (or Advanced Certificate/ Technician)
<input type="checkbox"/> Cert III or Trade Cert	<input type="checkbox"/> Certificate II	<input type="checkbox"/> Certificate 1	<input type="checkbox"/> Other Certificates
EMPLOYMENT			

<input type="checkbox"/> Full time employee	<input type="checkbox"/> Part time employee	<input type="checkbox"/> Self-employed – not employing others	<input type="checkbox"/> Employer
<input type="checkbox"/> Employed – unpaid worker in a family business	<input type="checkbox"/> Unemployed – seeking full time work	<input type="checkbox"/> Unemployed – seeking part time work	<input type="checkbox"/> Not employed – not seeking employment
DISABILITIES			
<input type="checkbox"/> No	<input type="checkbox"/> Yes, please specify below – more than one box may be ticked		
	<input type="checkbox"/> Hearing/Deaf	<input type="checkbox"/> Physical	<input type="checkbox"/> Intellectual
	<input type="checkbox"/> Learning	<input type="checkbox"/> Mental Illness	<input type="checkbox"/> Acquired Brain Impairment
	<input type="checkbox"/> Vision	<input type="checkbox"/> Medical Condition	<input type="checkbox"/> Other

From 1st January 2015, Registered Training Organisations (RTOs) are required to collect and verify a Unique Student Identifier (USI) for all students. Students must have a USI that has been verified before they can be issued with their qualification. For detailed information regarding ethical standards, access and equity, complaints, assessments and participant's rights, please refer to our website www.admireworkplacesafety.com.au or ask your trainer to view the AWS Participant Handbook.

- I authorise AWS to verify and or search for my USI.
- I acknowledge the offer of the participant handbook.
- I understand my rights and responsibilities as an AWS course participant.
- I agree to participate in site inductions and follow direction from AWS trainers to ensure training is conducted safely.

Privacy Notice

Under the *Data Provision Requirements 2012*, Admire Workplace Safety 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 and your training activity data) may be used or disclosed by Admire Workplace Safety for statistical, regulatory and research purposes. Admire Workplace Safety may disclose your personal information for these purposes to third parties, including:

- School- if you are a secondary student undertaking VET, including a school-based apprenticeship/traineeship;
- Employer- if you are enrolling in training paid by your employer;
- Commonwealth and State or Territory government departments and authorised agencies;
- NCVER;
- Organisations conducting student surveys; and
- Researchers.

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- Issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts;
- Facilitating statistics and research relating to education, including surveys;
- 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 an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. 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 VET Data Policy and all NVCER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

Student 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.

Student Name _____

Student Signature _____ Date _____

Parent/Guardian Signature* _____ Date _____

*Parental/Guardian consent is required for all students under the age of 18.

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RMS Participant Enrolment Form v7.3Dec18