



Student Enrolment Form 2017

71-81 Pearcedale Parade, Broadmeadows VIC 3047
Ph: 03 93098531 or email: admin@banksiagardens.org.au
ABN 54 264 568 661
www.banskiagardens.org.au

Welcome to Banksia Gardens Community Services! Please take your time to fill out this form.

Thank you for your cooperation.

Personal Details

Last Name: _____

First Name: _____ Title: Mr Mrs Miss Ms

Date of Birth: ____/____/____ Gender: M F

Home Address: _____

Postcode: _____

Telephone: Home _____ Work _____ Mobile _____

Email: _____

Emergency Contact

Full Name: _____

Relationship to you: _____

Telephone: Home _____ Work _____ Mobile _____

Office Use only:

Student Number: _____ USI Number: _____

Date of Enrolment: _____

Course Name: _____ Term: _____

Amount paid: _____ Receipt No: _____

Method of payment (please circle): Cash Cheque EFT

Staff name: _____ ACFE Fee for Service

Notes:

Cultural Diversity and Languages

Are you of Aboriginal and Torres Strait Islander origin? Y N

Country of birth: _____

Language you speak at home: English Other: _____

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

Student Support

If you have any needs that would cause a barrier to your learning or assessment, please let us know. Banksia Gardens will work with you to identify what reasonable adjustments or flexibility you may need in order to participate.

Do you consider yourself to have a disability? No Yes

If Yes, please tick which ones from the list below – you may tick more than one:

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

Do you have a condition that may affect your participation in class? Yes No

If Yes, what support would you require:

Previous School Education

Are you still attending Secondary School? No Yes

What Year did you leave Secondary School? _____

What is your highest COMPLETED school level? - Tick one box only:

- Did not go to school Year 9 or equivalent Year 11
 Year 8 or below Year 10 Year 12

What country did you complete this school level? _____

Do you have a Victorian School Number (VSN)?

No Yes, but I don't know the number

Yes Please provide the number) _____

Further Education

Have you **successfully completed** any of the following qualifications?

- Bachelor Degree or Higher Degree Certificate III (or Trade Certificate)
 Advanced Diploma or Associate Certificate II
 Diploma or Associate Diploma Certificate I
 Certificate IV (or adv. certificate/technician)

Work

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

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

If you are working, please state which industry:

Privacy Notice

Banksia Gardens Community Services is required by State and Commonwealth funding departments to gather the personal information above for reporting and statistical purposes. All information is subject to the Information Privacy Principles Privacy Act 2000. All information provided will be stored securely to maintain your privacy and confidentiality. All records are destroyed by shredding when the date for storage expires. Your personal information is not given to any person without your prior consent. To access or update your record contact the Administration on 9309 8531.

USE AND DISCLOSURE OF TRAINING RELATED INFORMATION

I give Banksia Gardens Community Services employees, government or funding-body auditors the right to view training related information and files held in my name. Each student has the opportunity to access their training related information and files held by Banksia Gardens Community Services. To access this information, a request must be made in writing to the CEO.

TERMS AND CONDITIONS

By signing this form I hereby accept the terms and conditions of enrolment. I understand that if I withdraw within two (2) weeks of commencement I will be given a refund less 10% administrative cost. After this time I will forfeit my fees in total.

Signature: _____

Date: / /

PHOTOGRAPHIC IMAGES, VIDEO IMAGES, WRITING AND QUOTATIONS

I give my consent and approval for the use of my photographic images, video images, writing and quotations, by Banksia Gardens Community Services for promotional activities. I also confirm that no payment or benefit will be sought by me for the use of any of the above by Banksia Gardens Community Services. I understand that I retain the right to withdraw my consent at any time prior to the publication of photographic images, video images, writing and quotations.

Signature: _____

Date: / /