

Enrolment Details

Personal Details			
Surname:		Title: Mr/Mrs/Miss/Ms/Dr	Date of birth:
First name:		Middle name/s:	
Home phone:	()	Work:	()
Mobile:		Email:	
Unique Student Identifier (USI), if known:			
If you do not have a USI and would like EHPA Training Services to obtain this on your behalf, please complete the USI Authority at the back of this Enrolment Form.			
What is the address of your usual residence? <i>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's or territory's 'rural property addressing' or 'numbering' system as your residential street address.</i>			
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:			
Suburb, locality or town:			
State/Territory:		Postcode:	
Enrolment Details			
Qualification/ Course to be undertaken:	<u>Emergency Management Course</u>		
	LGAEHRH510A Contribute to the Public Health Emergency Management Plan		<input type="checkbox"/>
	<u>Food Act Legal Management Course</u>		
	LGACOM408A Represent council at legal proceedings		<input type="checkbox"/>
	PSPREG010 Prepare a brief of evidence		
Course start date:			

General Information		
1. Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	
2. Have you ever studied with EHPA Training Services before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. In which country were you born?	<input type="checkbox"/> Australia	<input type="checkbox"/> Other, please specify: _____
4. Do you speak a language other than English at home? <i>If more than one language, indicate the one that is spoken most often.</i>	<input type="checkbox"/> No, English only - Go to question 6 <input type="checkbox"/> Yes, other, please specify: _____	
5. How well do you speak English?	<input type="checkbox"/> Very well <input type="checkbox"/> Well <input type="checkbox"/> Not well <input type="checkbox"/> Not at all	
6. 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 <input type="checkbox"/> Yes, Aboriginal and Torres Strait Islander	
7. Do you consider yourself to have a disability, impairment or long-term condition? If yes, please indicate the area of disability, impairment or long-term condition. (Tick as many as apply)	<input type="checkbox"/> Yes <input type="checkbox"/> No – go to question 8 <input type="checkbox"/> Hearing/deaf <input type="checkbox"/> Intellectual <input type="checkbox"/> Mental illness <input type="checkbox"/> Vision <input type="checkbox"/> Physical <input type="checkbox"/> Learning <input type="checkbox"/> Acquired brain injury <input type="checkbox"/> Medical condition <input type="checkbox"/> Other:	
8. What is your highest COMPLETED school level (tick one box only)	<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 below <input type="checkbox"/> Never attended school – Go to question 11	
9. In which YEAR did you complete that school level?		
10. Are you still attending secondary school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Previous qualifications		
11. Have you SUCCESSFULLY completed any of the following qualifications?	<input type="checkbox"/> Yes – indicate below <input type="checkbox"/> No – Go to Question 12	
<i>If YES, then tick ANY applicable boxes (you may indicate more than one)</i>		
<input type="checkbox"/> Bachelor Degree or Higher Degree <input type="checkbox"/> Advanced Diploma or Associate Degree <input type="checkbox"/> Diploma (or Associate Diploma) <input type="checkbox"/> Certificate I <input type="checkbox"/> Certificate II <input type="checkbox"/> Certificate III (or Trade Certificate) <input type="checkbox"/> Certificate IV (or Advanced Cert/Technician) <input type="checkbox"/> Certificates other than these		
Please list any qualifications you have completed and the year of completion.	1.	Year:
	2.	Year:
	3.	Year:
12. Do you wish to apply for National Recognition or Credit Transfers? If YES, provide certified copies of transcripts from previous qualifications m with this form.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13. Do you wish to apply for Recognition of Prior Learning?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Employment			
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		
Study reason			
Of the following categories, which BEST describes your main reason for undertaking this course?			
<input type="checkbox"/> To get a job	<input type="checkbox"/> It was a requirement of my job		
<input type="checkbox"/> To develop my existing business	<input type="checkbox"/> I wanted extra skills for my job		
<input type="checkbox"/> To start my own business	<input type="checkbox"/> To get into another course of study		
<input type="checkbox"/> To try for a different career	<input type="checkbox"/> For personal interest or self-development		
<input type="checkbox"/> To get a better job or promotion	<input type="checkbox"/> Other reasons		
Employment Details			
Employer's legal name:			
Your position:			
Business address:			
		Postcode:	
Postal address: (if different from above)			
		Postcode:	
Phone:	()	Fax:	()
Email:			
Supervisor:		Position:	
14. Victorian Student Number (VSN) are allocated to all school and VET students up to 24 years of age upon their first enrolment in a Victorian school from 2009 or their first enrolment in a VET training provider from 2011.			
Victorian Student Number – Victorian students only			
If you have not provided a VSN, is this because:		<input type="checkbox"/> I am new to the Victorian Education System. I have never attended a school, TAFE or other VET training provider in Victoria. <input type="checkbox"/> I don't know or don't have my VSN <input type="checkbox"/> This is not applicable to me	
Next of kin/emergency contact			
Name:		Relationship to you:	
Address:			Postcode:
Home phone:	()	Work:	()
Mobile:		Email:	

Language Literacy & Numeracy (LLN) Assessment

The Language, Literacy, and Numeracy Assessment identifies any specific needs you may have or may encounter during your study. Please answer the questions below.

1. What is your main reason for choosing to do this course?

.....

2. How do you think this course will contribute towards you obtaining your professional objectives?

.....

3. How do you learn best? Give some examples and explain why you think these methods help you learn.

.....

4. If you worked the following number of hours every week and your hourly rate was \$35 per hour, what would be your annual salary before tax?

- Monday - 6 hours
- Tuesday - 8 hours
- Wednesday - 3 hours and
- Saturday - 4 hours.

Annual Salary: \$

5. According to the table below. If planning for an alcohol free major event, how many toilets and wash hand basins would be required for male and female patrons if the total patron attendance was registered at 1589 (male and female inclusive)

Toilet facilities for events without alcohol

Patrons	Male			Female	
	WC	Urinals	Hand basins	WC	Hand basins
<500	1	2	2	6	2
<1000	2	4	4	9	4
<2000	4	8	6	12	6
<3000	6	15	10	18	10
<4000	8	25	17	30	17

Male Requirements: ____WC ____Urinals ____WHB Female Requirements: ____WC ____WHB

Own Work Declaration

I declare the information provided on this enrolment form is true and correct.

Student Name:

Student Signature: Date:

Office Use ONLY –Assessor to complete the section below based on the responses provided in the LLN Assessment

- Student meets the level of LLN skills required for the completion of this course
- Student does not meet the level of LLN skills required based on the assessment, I believe the following adjustments be made to the assessment tasks or tools, to allow for their participation into the course:

.....
.....
.....
.....

- Student does not meet the minimum LLN levels requirements for this course and recommend referral to an external LLN training provider.

Assessor Name: Assessor Signature:

Date:.....

Terms and Conditions of Enrolment

Prior to enrolling in this course, it is important you understand:

- What you are agreeing to
- Our policies and procedures
- Your responsibilities as a student
- Our responsibilities as your Registered Training Organisation.
- That your consumer rights are protected.

Please ensure you read our Student Handbook prior to enrolment, to find out more about your obligations and other key information.

Australian law protects your rights as a consumer. To ensure we comply with these laws we have a cooling off period of 7 days following enrolment. If you believe, the course you have enrolled in does not meet your requirements as set out, it has been miss represented, or unfair you may request a refund within 7 days by completing the Request a Refund Form.

We guarantee that the quality of our training services are fit for purpose and that we maintain our compliance as a Registered Training Organisation as per the requirements of the VET Quality Framework.

Privacy and Personal Information

We collect personal information from individual students in order for EHPA Training Services to carry out its business functions. EHPA Training Services only collects and stores information directly related to the RTO's purpose and legal requirements of providing nationally recognised training and assessment.

In collecting personal information, EHPA Training Services complies with the requirements set out in the Privacy Act 1988 and the relevant privacy legislation and regulations of the states/territories in which the RTO operates.

For further information on EHPA's collection and disclosure of student personal information, as well as student access to their personal records held by EHPA, refer to the Student Handbook.

Fees, Charges and Refunds

EHPA's Fees, Refunds Policy, and Procedure outlined in the Student Handbook. For information, regarding what is included in the course fees, payment of fees and refunds please refer to the Student Handbook available on our [website](#).

In the unlikely circumstance where EHPA is not able to provide the course as outlined within their agreement, the student may be eligible for a refund in accordance with EHPA's Fees, Charges and Refund Policy (outlined in the Student Handbook).

Complaints and Appeals

All students have the right to make a complaint or appeal an assessment about any of EHPA's training, assessment, services, decisions, and products (etc.).The complaints and appeals process outlined in the Student Handbook is available on our [website](#). To make a complaint or appeal, please follow the processes outlined in the Student Handbook.

Protection of fees

EHPA Training Services does not take more than \$1500.00 for course fees in advance.

EHPA Training Services will not charge students more than \$1500 in course fees, for a breakdown of the course fees please course flyers available on our web site. In the event the course fees are in excess of \$1500.00, fees are charged in instalments according to the payment plan.

EHPA is committed to providing the student with the training and assessment services required to achieve the units they are enrolling into and will provide every reasonable opportunity for a student to complete their course and achieve competency in all units.

Issuance of qualifications

Within thirty days (30) of the successful completion assessments and payment of the course fees, EHPA will issue you with a statement of attainment showing the units of competency achieved by you during the course.

EHPA Training Services reserves the right to withhold the Statement of Attainment until payment is received, except where EHPA Training Services is not permitted to do so by law.

Re-Issuing Statements and Qualifications

Records of and statements of unit achievement are kept on record for a period of at least thirty (30) years. Students can request copies of any of these statements or qualifications at any time for an additional charge. Refer to the current Fees, Charges and Refund Policy for the current fee.

Agreement

Enrolment Form

RTO ID: 40670

In signing this Enrolment Form you agree:

- That the information you have provided is true, correct and complete.
- That you received appropriate and sufficient information to make an informed decision about your enrolment in this course.
- That you read and understood EHPA's Policies in the Student Handbook, including the information on privacy.
- That you have access to the detailed information about the fees and charges associated with your course enrolment including information on tuition fees, administration fees, materials fees, payment terms, accommodation and our Refund Policy.
- To provide EHPA Training Services with up to date and accurate contact details and notify us if anything changes.
- To be bound by EHPA's Student Code of Conduct, and other student policies and procedures as well as National and State legislation and regulations including any variations that are made from time to time.

Student Signature:		Date:	/ /
Printed Name:			
If the student is under 18 years of age:			
Parent/Guardian Name:			
Contact Details:			
Signature:		Date:	/ /

Unique Student Identifier (USI) Authority Form

If you are studying nationally recognised training in Australia from 1 January 2015, you will be required to have a Unique Student Identifier (USI).

Your USI links to an online account that contains all your training records and results (transcript) that you have completed from 1 January 2015 onwards. Your results from 2015 will be available in your USI account in 2016.

When applying for a job or enrolling in further study, you will often need to provide your training records and results (transcript). One of the main benefits of the USI is the ability to provide students with easy access to their training records and results (transcript) throughout their life.

You can access your USI account online from your computer, tablet, or smart phone anytime.

If you do not already have a Unique Student Identifier (USI) and you want EHPA Training Services to apply for a USI to the Student Identifiers Registrar (Registrar) on your behalf, EHPA Training Services will provide to the Registrar the following items of personal information about you:

- your name, including first or given name(s), middle name(s) and surname or family name as they appear in an identification document;
- your date of birth, as it appears, if shown, in the chosen document of identity;
- your city or town of birth;
- your country of birth;
- your gender; and
- your contact details.

When we apply for a USI on your behalf, the Registrar will verify your identity. The Registrar will do so through the Document Verification Service (DVS) managed by the Attorney-General's Department which is built into the USI online application process if you have documents such as a Medicare card, birth certificate, driver licence, Australian passport, citizenship document, certificate of registration by descent, ImmiCard or Australian entry visa.

If you do not have a document suitable for the DVS and we are authorised to do so by the Registrar we may be able to verify your identity by other means. If you do not have any of the identity documents mentioned above, and we are not authorised by the Registrar to verify your identity by other means, we cannot apply for a USI on your behalf and you should contact the Student Identifiers Registrar.

In accordance with section 11 of the Student Identifiers Act 2014 Cth (SI Act), we will securely destroy personal information we collect from you solely for the purpose of applying for a USI on your behalf, as soon as practicable after the USI application has been made, or the information is no longer required for that purpose, unless we are required to by law to retain it.

The personal information about you we provide to the relevant government authority, including your identity information, is protected by the Privacy Act 1988 Cth (Privacy Act). The USI Act protects the collection, use and disclosure of your USI.

If you ask EHPA Training Services to make an application for the student identifier on your behalf, EHPA Training Services declares that it complies with the terms and conditions to access the online student identifier portal and submit the application; including the declaration, EHPA Training Services has given you via the privacy notice.

Privacy policies and complaints

You can find further information on how the Registrar collects, uses and discloses the personal information about you in the Registrar's Privacy Policy or by contacting the Registrar on (email/telephone). The Registrar's Privacy Policy contains information about how you may access and seek correction of the personal information held about you and how you may make a complaint about a breach of privacy by the Registrar in connection with the USI and how such complaints will be dealt with.

You may also make a complaint to the Information Commissioner, about an interference with privacy pursuant to the Privacy Act, which includes the following:

- misuse or interference of or unauthorised collection, use, access, modification or disclosure of USIs; and
- a failure by us to destroy personal information collected only for applying for a USI on your behalf.

For information about how EHPA Training Services collects, uses and discloses your personal information generally, including how you can make a complaint about a breach of privacy, please refer to EHPA Training Services privacy policy found on the EHPA Training Services website

Identification Evidence	
When we create a USI on behalf of a student or when a student creates their own USI, the USI Registry System will confirm the details entered match exactly with those on the student's chosen form of ID from the list below. Please tick the relevant form of ID below and enter the details required for that form of ID.	
<input type="checkbox"/> Driver's Licence State/Territory issued: _____ License number: _____	<input type="checkbox"/> Australian Passport Document Number: _____
<input type="checkbox"/> Medicare Card Card Number: _____ Ref Number: _____	<input type="checkbox"/> Citizenship Certificate Acquisition Date: _____ Stock Number: _____
<input type="checkbox"/> Birth Certificate (Australian) *please note a Birth Certificate extract is not sufficient State/Territory issued: _____ Registration Number: _____ Date printed/issued: _____	<input type="checkbox"/> Visa (with Non-Australian passport) Passport Number: _____ Country of Issue: _____
<input type="checkbox"/> Certificate of Registration by Descent Acquisition Date: _____	<input type="checkbox"/> ImmiCard Card Number: _____

Student Declaration

You confirm that you understand and consent that the personal information you provide to us in connection with your application for a USI:

- is collected by the Registrar for the purposes of:
 - applying for, verifying and giving a USI;
 - resolving problems with a USI; and
 - creating authenticated vocational education and training (VET) transcripts;
- may be disclosed to:
 - Commonwealth and State/Territory government departments and agencies and statutory bodies performing functions relating to VET for:
 - the purposes of administering and auditing Vocational Education and Training (VET), VET providers and VET programs;
 - education related policy and research purposes; and
 - to assist in determining eligibility for training subsidies;
 - VET Regulators to enable them to perform their VET regulatory functions;
 - VET Admission Bodies for the purposes of administering VET and VET programs;
 - current and former Registered Training Organisations to enable them to deliver VET courses to the individual, meet their reporting obligations under the VET standards and government contracts and assist in determining eligibility for training subsidies;
 - schools for the purposes of delivering VET courses to the individual and reporting on these courses;
 - the National Centre for Vocational Education Research for the purpose of creating authenticated VET transcripts, resolving problems with USIs and for the collection, preparation and auditing of national VET statistics;

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- researchers for education and training related research purposes;
- any other person or agency that may be authorised or required by law to access the information;
- any entity contractually engaged by the Student Identifiers Registrar to assist in the performance of his or her functions in the administration of the USI system; and
- will not otherwise be disclosed without your consent unless authorised or required by or under law.

Student Full Name: _____

I authorise EHPA to obtain a USI on my behalf.

Student Signature: _____ Date: _____