

Application for Enrolment

All details **MUST** be completed

Qualification / Course Name			
Qualification / Course Name			
Course Date Organ	isation or Employment Agency		
Student Details			
Mr First Name		Middle Name	
Miss Surname Ms		Gender Female Male Other	
Unique Student Identifier (USI) (to obtain USI, log onto usi.gov.au)			
Date of Birth Mo	bbile	Home Phone	
Email Address			
Residential Address		Postcode	
Postal Address Same as above - or -			
Country of Birth	C	ity of Birth	
Are you an Australian Citizen? Yes No If No, what Visa type are you on?			
Emergency Contact	Relationship to you	Phone	
Are you Aboriginal or Torres Strait Islander? No Yes, Aboriginal Yes, Torres Strait Islander Yes, Aboriginal and Torres Strait Islander			
What best describes your employment status?	What language do you speak	Prior Education	
Fulltime employee	at home? (please specify)	What is your highest level of school completed?	
Part time employee Self employed		Still at school	
Unemployed, seeking part-time work	How well do you speak English?	Year 12 Year 11 Year 10 Year 9 or below	
Unemployed, seeking fulltime work	Very well Not well	Never attended	
Not employed, not seeking employment	Well Not at all	What year did you finish school?	
Do you consider yourself to have a disability or impairment? No Yes What is your highest level of education completed?			
Physical Intellectual Learning Hearing Vision Mental Illness		Bachelor Degree or higher	
Medical Condition Acquired Brain Injury Other (please specify below)		Advanced Diploma or Associate Degree	
		Diploma level Certificate IV Certificate II Certificate I Certificate I	
What describes your reason for undertaking train	ing? (please tick ONLY one)	Have you previously completed any accredited training?	
What describes your reason for undertaking training? (please tick ONLY one) To get a job To start my own business		No	
To get a better job / different job / promotion		Yes (please provide course details below)	
	nterest or self development	. ,	
	another course of study		
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As an ASQA requirement, applications for enrolment must include a completed Language, Literacy and Numeracy task (LLN) and Declaration to ensure that the student is able to meet the demands of the course they are enrolling into. Submission of an Application for enrolment and LLN accompanied by payment does not necessarily guarantee your enrolment will be finalised. It will be subject to VET Manager and Student Support Officer approval. If required, the Student Support Officer will be in contact for further assistance.

I have completed the LLN

The Student Handbook, available at www.wrcc.nsw.edu.au, contains everything you need to know about learning at the college, including your rights and obligations.

Refund Policy: If WRCC cancels a course, fees will be fully refunded within fourteen (14) days of course cancellation. Course fees will be refunded if advice of withdrawal is received within seven (7) days before commencement of course. A \$25.00 registration charge will apply. WRCC cannot accept responsibility for changes in participant's personal circumstances. There will be no refund for withdrawal less than seven (7) days before commencement of course, as funds are committed. WRCC is not responsible for any outlays made by participants for books or materials for courses.

Student privacy: Information concerning students, including information submitted on this enrolment form will be used by WRCC or other authorised organisations for the purposes of general student administration and commitment with state and national reporting, monitoring and evaluation. The information may be disclosed to the National Centre for Vocational Education & Research (NCVER) and/or an agency authorised to undertake surveys. The provision of this information is necessary for both enrolment and re-enrolment. Information provided by you will be held and disposed of securely when no longer needed in line with the Privacy Act 1988. You may have access to your personal information by contacting WRCC.

(Please tick below)	
I have read and understand refund policy, enrolment process and the student privacy statement.	
The information provided by me in the Application for Enrolment is true and correct.	
I give permission for my employer/job agency to be emailed a copy of my certificate or evidence of my	course completion on my behalf.
Exclude me from marketing / newsletter emails.	
Student Signature	Date
If Under 18:	
Name of Parent/Guardian	
Signature	Date
Office Use	
Details entered into Axcelerate	
Enrolled	
☐ Invoiced or ☐ Funded	
Visa checked – Green Medicare for PR – Visa for all others	
LLN completed	
LLN emailed	
USI Verified	

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