

Please complete in English using BLOCK letters.

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Thank you for your interest in seeking enrolment into an Australian Federation College (AFC) course. This application for enrolment form must be completed in English. If you require any assistance in completing this form, please contact us by phone or email. You can send this form back to us by post or email along with required documents as per the checklist at the end of this document.				
Cou	Course Details			
Select	the course you wish to enrol with Australian Federation College (AFC).			
Laui	nceston Campus			
	BSB80120 Graduate Diploma of Management (Learning)		SIT60322 Advanced Diploma of Hospitality Management	
	BSB60420 Advanced Diploma of Leadership and Management		SIT50422 Diploma of Hospitality Management	
	BSB50420 Diploma of Leadership and Management		SIT40521 Certificate IV in Kitchen Management	
	CHC62015 Advanced Diploma of Community Sector Management		ICT60220 Advanced Diploma of Information Technology (Telecommunications Network Engineering Specialisation)	
	CHC52021 Diploma of Community Services		ICT50220 Diploma of Information Technology	
AHC51422 Diploma of Agribusiness Management				
Commencement Date:				
Melbourne Campus				
	BSB80120 Graduate Diploma of Management (Learning)		SIT60322 Advanced Diploma of Hospitality Management	
	BSB60420 Advanced Diploma of Leadership and Management		SIT50422 Diploma of Hospitality Management	
	BSB50420 Diploma of Leadership and Management		SIT40521 Certificate IV in Kitchen Management	
	CHC62015 Advanced Diploma of Community Sector Management		ICT60220 Advanced Diploma of Information Technology (Telecommunications Network Engineering Specialisation)	
	CHC52021 Diploma of Community Services		ICT50220 Diploma of Information Technology	
	AHC51422 Diploma of Agribusiness Management		RII60520 Advanced Diploma of Civil Construction Design	
	General English - ELICOS Number of Weeks			
	Commencement Date:			



Personal Details			
Preferred Title: Mr Miss Ms	Mrs Others		
Given Name/s:	Sur	name:	
Preferred Name, If any:	Date of	Birth (dd/mm/yyyy):	
Country of Birth:	Nationality:	Gender:	Male Female
Phone Number/s:	Ema	il Address:	
Residential Address : Please provide the physica rather than any temporary addre		-not post-office box). Current address must b ork or other purposes before returning to you	
Overseas Address:			Postcode:
Street Address:		Suburb:	
Country:	Is thi	s your mailing address: Yes	No
Current Australian Address (if applicable):			Postcode:
Street Address:		Suburb:	
State:	ls th	is your mailing address:	No
Mailing Address (if different from the above, o	therwise write, 'AS ABOVE'):		Postcode:
Street Address::		Suburb:	
Country:			



Passport Details	
Passport Number:	Passport Expiry Date:
Country of Passport:	
Australian Visa Details	
Do you hold an Australian visa? Yes	No
If yes, type of visa and expiry date? Visa Typ	e: Expiry Date:
Which visa office will you apply for your visa?	
OSHC Details	
	s Student Health Cover (OSHC) that covers the entire duration of your student visa. is on your own or through Australian Federation College (AFC).
Do you already have OSHC?	No Expiry Date:
If yes, provide current OSHC details. OSHC Prov	ider:
If no, do you like AFC to organise OSHC for you:	S No - I will organise it myself



Language and Cultural Diversity			
Do you speak a language other than English at home? If more	No, English only		
than one language, indicate the one that is spoken most often.	Yes, other, please specify:		
How well do you speak English?	Very well Well Not Well Not at all		
Are you of Aboriginal or Torres Strait Islander origin? For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes	No Yes, Yes, Torres Prefer not Strait Islander to say		
English Proficiency			
Have you completed a test of English Language Proficiency?	Yes No		
	If yes, provide details of your English test:		
	Test Date:		
	Test Type: IELTS TOFEL PTE Other:		
	Test Score: Writing Reading Listening Speaking Overall Score:		
Have you completed at least a Certificate IV level qualification in an Australian RTO within the last 2 years?	Yes No		
Have you studied at least 5 years in an English anadism accustus	if yes, provide details under "Previous Qualifications Studied" section.		
Have you studied at least 5 years in an English-speaking country (including Australia) where medium of instructions were English?	Yes No if yes, provide details under "Previous Qualifications Studied" section.		
Disability			
Do you consider yourself to have a disability?	Yes No – go to the question Prefer not to say – go to the about Schooling question about Schooling		
If you indicated the presence of a disability, impairment or			
long term condition, please select the area(s) in the following list. Review the disability supplement to help you	Hearing/deaf (11) Learning (14) Vision (17		
select the right area(s).	Physical (12) Mental illness (15) Medical condition (1		
	Intellectual (13) Acquired brain Other (19		



Schooling					
What is your highest C level? (Tick ONE box o		Year 11 Year 10 Year 9	or equivalent or equivalent or equivalent or equivalent or equivalent	Never attended school Write the year you have completed school level:	
Are you still enrolled in	Are you still enrolled in secondary or senior secondary education? Yes No				
Previous Qual	ifications Studied				
Have you successfull qualifications listed b	elow? If Yes,	tick ANY applicable boods Bachelor degree or high Advanced diploma or a Diploma (or associate descrificate IV (or advance) Certificate III (or trade of the certificate II Certificate II Certificate II Certificate II Certificate II	kes below: ner degree ssociate degree iploma) ced certificate/technici ertificate)	ian) rseas qualifications not listed here)	
	Prev	vious Qualifications D	etails		
Qualification Name: Institution Name:			vinto.		
Year Completed: Qualification Name: Institution Name:		Cc	ountry:		
Year Completed:		Co	ountry:		



Previous Qualifications Details				
Qualification Name:				
Institution Name:				
Year Completed:		Country:		
Qualification Name:				
Institution Name:				
Year Completed		Country:		
Employment				
For casual, seasonal, cor employed (less than 35 h	tract and shift work, use the current numb ours per week).	ur current employment status? (Tick ONE box only) per of hours worked per week to determine whether full time (35		
Full-time emplo	yee Part-time employee	Self-employed - not employing others	Self-employed - employing others	
Employed - unp worker in a fam business		Unemployed - seeking part-time work	Not employed - not seeking employment	
Study Reason				
Of the following ca	agaries, coloct the one which PES	ST describes the main reason you are undertaking th	his course? (Tick ONE boy only)	
To get a job	To develop my existing business	To start my own To try for a different career	To get a better job or promotion	
It was a requiren of my job	l wanted extra skills for my job	To get into another For personal interest of scurse of study self-development	r To get skills for community/voluntary work	
Other reasons				



Course Credit		
Do you like to apply for Recognition of Prior Learning (RPL) or Credit Tr	ansfer?	
Please note, applying for this may impact your course duration. If this is outlined on the course brochure. Depending on the length that your course	• • • • • •	
Yes No		
If you have selected "Yes" then our admission team will send you a Credit Transfer and RPL Application www.afcollege.edu.au	n Form. Alternatively, you can downlo	oad a copy of this form from our website at
Unique Student Identifier (USI)		
Do you have your USI number available now? Australian Federation College can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we submit to NCVER. Yes No If you have selected "Yes" then write in the following boxes:		
you have selected "No" then you can apply for it directly at: <u>https://www.usi.gov.au/your-usi/create-usi</u> o	n computer or mobile device and write	e in boxes above.
Emergency Contact Details		
Contact Name:	Relationship :	
Phone Number:	Email :	
Paying Additional Course Fees Prior Commence	ement	
Do you want to pay more than 50% of the course fees before comme Its is not a requirement to pay additional course fees before commencement of you	~ *	— · · · · · ·
Yes - I confirm that I want to pay more than 50% of the course fees	before commencing my stu	dies at Australian Federation College.
No - I would like to pay fees payable to secure the offer specified in	my Offer Letter and Studen	t Agreement.
Agent Details (if applicable)		
Agent/ Counsellor Name:		Agency Stamp:
Position:		
Contact Number:		



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.

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 NCVER and other bodies handle your personal information

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

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.

NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how 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 your RTO 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.

<u>Surveys</u>

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 Australian Federation College at info@afcollege.edu.au 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



Declaration	
	erstood AFC fees and refunds, course progress and attendance monitoring, complaints and appeals policy and procedures andbook, AFC website at www.afcollege.edu.au and/or Course Brochure.
	nust participate in scheduled classes in accordance with course timetables to make satisfactory course progress, and failing ory course progress will result in breach of a condition of my visa.
I hereby declare that	t the information provided is complete, true and correct.
I declare that I am a	genuine temporary entrant and genuine student and that I have read and understood requirements relating to these at airs.gov.au/.
I agree to the collect	ion, use and disclosure of my personal information as per the Privacy Notice.
I declare that my sig	nature is true and correct and matches the signature in my passport
- · · · · · ·	
Student Name:	
Student Signature:	
Date(dd/mm/yyyy):	



Application Checklist			
Plea	Please check that you have:		
	Attached copy of certified passport biodata pages		
	Attached certified evidence of English (IELTS/ PTE/ TOEFL/ Other)		
	Attached certified academic Transcripts		
	Attached certified academic Certificate		
	Attached statement of purpose		
	Attached completed GTE Assessment Form		
	Attached evidence of Visa, if applicable		
	Attached current COE, if applicable		



Disability Supplement

The purpose of the Disability supplement is to provide additional information to assist with answering the disability question. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.

'11 — Hearing/deaf'

Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates or ally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

'12 — Physical'

A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

'13 — Intellectual

In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

'14 — Learning'

A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

'15 - Mental illness'

Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.

'16 — Acquired brain impairment'

Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

"17 — Vision"

This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

'18 — Medical condition'

Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable, yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic fibrosis, asthma or diabetes.

'19 — Other'

A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.