

# **Enrolment Application Form**

## **About this form**

Thank you for your interest in seeking enrolment into Kentford Institute. If you require any assistance in completing this form, please contact us by phone or email.

You can send this form to us by post or email. Please provide 100 points of identification and all other supporting documents as specified in the course entry requirements and course brochure

Student Details								
Titlle: □ Mr. □ Ms. □ Mrs. □ Other								
First Name			Last Name					
Date of Birth			Gender		Female □ Other			
Nationality			Coui	Country of Birth				
Are you a citizen or permanent resident?			□ Yes □ No					
Do you speak a language other than English at home?			□ No □ Yes, specify					
Are you of Aboriginal or Torres Strait Islander origin?			□ No □ Yes, □ Yes, Torres Strait Aboriginal Islander					
Contact Details								
Residential Address								
	Suburb		State Pos		Post co	de		
Mobile Number	lobile Number		Home Phone					
Email address								
How would you like Kentford Institute to contact you?				☐ Phone	☐ Email		□Р	ost
Emergency contact Details								
Full Name			Re	Relationships				
Phone Number		Email						
Address								



Note: Please tick the course you are intending to enrol at kentford Institute. Once you select the course and return this enrolment application form, kentford Institute's admissions team will assess your application against the course entry requirement and also invite you to participate in the course entry interview to assess whether the course you have chosen is right for you.

Please Tick	Course Code	Course Title				
	CHC33021	Certificate III in Individual Support				
	CHC43015	Certificate IV in Ageing Support				
	CHC43121	Certificate IV in Disability Support				
	HLTWHS005	Conduct Manual Tasks				
	HLTAID011	Provide First Aid				
	HLTAHPS006	Assist Client with N	Medication			
	CHCSS00067	Administer and mo	nitor Medi	lication Skill Set		
	CHCSS000670	Assist Client with Medication		Skill Set		
	CHCSS00123	Disability Work – Behav		Support		
	CHCSS00128	High Support and (	Complex C	Care – Disabilit	y Support	
	CHCSS00129	Individual Support - Ageing				
	CHCSS00130	Individual Support - Disability				
Preferred Start Date:						
Schooling						
What is your highest completed school level ?						
☐ Year 12 or equivalent		□ Year equival		□ Year 10 o	r equivalent	
☐ Year 9 or equivalent		□ Year below	8 or	☐ Never atte	ended school	
Are you still enro	olled in secondary or senior	secondary education?		□ Yes	□ No	
Previous Qualification						
Have you successfully completed any of the qualification listed below ? ☐ Yes ☐ No						
If yes, tick any applicable boxes and submitted the verified copy of previously achieved qualification with this application form)						



☐ Bachelor degree or higher de	egree	☐ Certificate III (or trade certificate)			
☐ Advanced diploma or associa	ate degree	□ Certificate II			
☐ Diploma (or associate diplom	aa)	□ Certificate I			
☐ Certificate IV (or advanced certificate/technician)		☐ Other education (including certificates or overseas qualifications not listed here)			
Employment					
Which of the following categories	s best describe your C	urrent employment	status? (Tick one box only)		
☐ Full-time employee		☐ Part-time employee	☐ Self-employed – not employing others		
☐ Self-employed – employing others		☐ Employed – unpaid worker in a family business	☐ Unemployed – seeking full-time work		
☐ Unemployed – seeking part-ti	ime work	☐ Not employed – not seeking employment			
Study Reason					
Which of the following categories	s best describe the ma	in reason you are u	ndertaking this course?		
☐ To get a job		☐ To develop my existing business	☐ To start my own business		
☐ To try for a different career		☐ To get a better job or promotion	$\square$ It was a requirement of my job		
☐ I wanted extra skills for my joi	b	☐ To get into another course of study	☐ For personal interest or self- development		
☐ To get skills for community/vo	oluntary work		☐ Other reasons :		
Disability					
Do you consider yourself to have	e a disability?		□ Yes □ No		
If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list. Please refer to the disability supplement provided at the end of this form to help you select the right area(s).					
☐ Hearing/deaf	☐ Physical	☐ Intellectual	☐ Learning ☐ Mental illness		
☐ Acquired brain impairment	☐ Vision	☐ Medical condition	☐ Other		



Recognition of Prior learning (RPL) and Credit Transfer					
Please complete this section if you believe you are eligible to apply for Recognition of Prior (RPL) or for credit transfer.	I want to apply for a credit transfer for the following unit/s:				
Please note, applying for this will impact your course duration so bear in mind that if this is approved then your course duration will be less than the time outlined on the course brochure. Depending on the amount that your course is reduced your fees may also be reduced					
If applying for a credit transfer, please attach a certified copy of the Statement of Attainment or Record of Results and Qualification for each unit.	I want to apply for RPL for the following unit/s:				
Unique Student Identifier (USI)					
Kentford Institute 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. If you have not yet obtained a USI you can apply for it directly at <a href="https://www.usi.gov.au/students/create-your-usi/">https://www.usi.gov.au/students/create-your-usi/</a> on Enter your Unique Student Identifier (USI) here:					
USI No					
If you are exempt from having a Unique Student Identi with your application for enrolment. Further details abo	ifier (USI), please email your USI exemption letter to us, along out USI exemptions can be found here:				
https://www.usi.gov.au/exemptions					
Application Checklist					
☐ Completed Application Form					
☐ 100 points Identification (Please refer to the below link for the 100 Points Identification Guidelines https://www.police.sa.gov.au/services-and-events/100-point-identification					
☐ Certified copy of previous academic Qualifications					
□ Visa Copy (If you are not permanent resident and or Citizen)					
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. If you do not provide this information, we will be unable to process your enrolment.					
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 the NCVER and other bodies handle your personal information

The 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.

The 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.

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

The NCVER does not intend to disclose your personal information to any overseas recipients. For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at <a href="https://www.ncver.edu.au/privacy">www.ncver.edu.au/privacy</a>

If you would like to seek access to or correct your information, in the first instance, please contact us using the contact details listed below.

DEWR 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 DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at <a href="https://www.dewr.gov.au/national-vet-data/vet-privacy-notice">https://www.dewr.gov.au/national-vet-data/vet-privacy-notice</a>.

## Surveys

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**

You may contact Kentford Institute at any time to discuss your enrolment application, request or correct your personal information, make a complaint regarding the handling of your personal data, or ask any questions related to this Privacy Notice.

Our contact details are:

Address: Level 3, 76 Waymouth Street, Adelaide, SA 5000



Email: enrolment@kentfordinstitute.edu.au | info@kentfordinstitute.edu.au

Phone: 08 70820821

## **Student Declaration**

- 1. 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 following the Privacy Notice. I
  understand that giving false or incomplete information may lead to the refusal of my application or cancellation of
  enrolment
- 3. I permit the Kentford Institute to contact and obtain official records from an educational institution that I have attended.
- 4. I understand that Kentford Institute collects, stores and uses personal information only to administer prospective, current and graduate student admissions, enrolment and education and that the information collected is confidential and will not be disclosed to third parties without my consent, except to meet government, legal or other regulatory authority requirements.
- 5. I understand that any vocational placement undertaken as a part of any of the courses offered at the Kentford Institute will be unpaid.
- 6. I have read, understood, and agree to abide by the Institute Refund Policy found in the Student Handbook on the website of the Institute; <a href="https://www.kentfordinstitute.edu.au">www.kentfordinstitute.edu.au</a>
- 7. I understand that Kentford Institute may use my name/photograph/image/audio recording/video recording and likeness in all forms and manner ("My Image") for the purposes of advertising, media, social media publicity, publication, general display or for any other institute purposes in whole or in part, including but not limited to publication on internet web sites, broadcasts and any other publications as released to or by Kentford Institute ("Publication"). I waive any interest that I may have in the copyright to My Image now or at any future time and acknowledge that I am not entitled, nor shall in the future be entitled, to receive any payment or consideration in respect of it and agree to make no claim against Kentford Institute for any payments for the Publication of My Image.
- 8. I have read, understood and agree to abide by the Student Code of Conduct as found in the Student Academic and General Code of Conduct Policy and Procedure provided in the Student Handbook on the website of the Institute; www.kentfordinstitute.edu.au
- 9. I understand that by signing this application form, I will be sent a letter(s) of an offer for the Kentford Institute if all admission requirements are met.
- 10. I agree that on acceptance of enrolment by the Kentford Institute, I must sign and return an Acceptance to my Letter of Offer which will be the contract of Enrolment.

Name of Applicant	
Signature	
Date	



## **Disability Supplement**

The purpose of the Disability supplement is to provide additional information to assist you with answering the disability question.

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 orally 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.