



VET for School Students Application Form

Please write clearly in CAPITAL LETTERS
Tick all boxes where appropriate

Qualification Selection

Regular Commencement Term (**Tick one box only**): Term 1 (February) Term 2 (April) Term 3 (July)

Fast Track Commencement Term (**Tick one box only**): April July September/October December

CHC33015 Certificate III in Individual Support

ICT30120 Certificate III in Information Technology

General IT VETRO

BSB30120 Certificate III in Business

BSB30220 Certificate III in Entrepreneurship and New Business

BSB30120 Certificate III in Business (Medical Administration)

BSB30320 Certificate III in Legal Services

Stackable VET

Introduction to Business

Introduction to Information Technology

Introduction to IT Support

Advanced Business - Commerce

Advanced Business - Documents

Advanced Cyber Security Awareness

Advanced Technology

Advanced Website Development

BSBSS00103 New Business Ventures Skill Set

CHCSS00088 Induction (Community Services Sector)

CHCSS00114 Entry into Care Roles Skill Set

First Aid

Infection Prevention and Control in a Health and Community Services Environment



VET for School Students Application Form

Please write clearly in CAPITAL LETTERS

Tick all boxes where appropriate

A. Personal Details			
Family Name			
Given Name			
Title (tick box)	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other _____		
Gender (tick box)	M <input type="checkbox"/> F <input type="checkbox"/>		
Date of Birth (DD/MM/YYYY)			
Applicant's Home Address			
Citizenship		Postcode / ZIP	
Telephone Number		Mobile Number	
Email			
Visa Type (if applicable)			

B. Parent/Guardian Details			
Family Name		Given Name	
Parent / Guardian Address			
		State	
Country		Postcode / ZIP	
Mobile Number		Email	

C. Emergency Contact Details			
Family Name		Given Name	
Address			
State and Country		Postcode / ZIP	
Mobile Number		Email	

D. School, Case Manager or Education Agent Contact Details <i>(if an agent is assisting with enrolment)</i>			
School / Case Manager / Agency Name		Contact person	
Address			
State and Country		Postcode / ZIP	
Mobile Number		Email	



E. Financial Details	
Who will pay for your course fees?	<input type="checkbox"/> School <input type="checkbox"/> Parents <input type="checkbox"/> Other, please specify: _____

F. Disability and Medical Conditions	
Do you consider yourself to have a disability, impairment, or long-term condition?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you indicated the presence of a disability, impairment, or long-term condition, please select the area(s) in the following list: You may indicate more than one area. Please refer to the Disability Supplement at the back of this form for an explanation of the following disabilities.	
<input type="checkbox"/> Hearing/deaf <input type="checkbox"/> Physical <input type="checkbox"/> Intellectual <input type="checkbox"/> Learning <input type="checkbox"/> Mental Illness <input type="checkbox"/> Acquired brain impairment <input type="checkbox"/> Vision <input type="checkbox"/> Medical Condition <input type="checkbox"/> Other	

G. Previous qualifications achieved	
What is your highest completed school level?	<input type="checkbox"/> Year 11 <input type="checkbox"/> Year 10 <input type="checkbox"/> Year 9 or below
In which year did you complete that school level?	
What is your SACE Number (if you already have one)?	
Have you completed any VET courses before?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details of the course: _____

H. Language and cultural diversity	
In which country were you born?	
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>	

I. Credit Transfer (CT) and Recognition of Prior Learning (RPL)	
Will you apply for CT or RPL? An application can be submitted after enrolment	Yes <input type="checkbox"/> No <input type="checkbox"/>



Application Checklist

Provide a copy of the following documents with your application (you will need to bring the originals to your orientation day for verification): Please tick those that you are providing.

- Completed all sections of this application form
- Copy of current school ID or any government issued photo ID
- If applying for a USI additional copies of support documents as outlined in the USI section of the application.

PRIVACY NOTICE

Under the Data Provision Requirements 2012, **Adelaide Institute of Business and Technology** is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by **Adelaide Institute of Business and Technology** for statistical, regulatory and research purposes. **Adelaide Institute of Business and Technology** may disclose your personal information for these purposes to third parties, including:

- Commonwealth and State or Territory government departments and authorised agencies;
- NCVER;
- Organisations conducting student surveys; and
- Researchers.

Personal information may be used or disclosed for the following purposes:

- issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts;
- facilitating statistics and research relating to education, including surveys;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive student surveys from NCVER which may be administered by an NCVER employee, agent or third party contractor. You may opt out of these surveys at the time of being contacted. NCVER will collect, hold, use and disclose your personal information in accordance with the *Privacy Act 1988* (Cth), the VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au)



VET for School Students Application Form

Please write clearly in CAPITAL LETTERS

Tick all boxes where appropriate

Unique Student Identifier

AIBT can only issue you with a nationally recognised VET qualification or statement of attainment when you complete your course **if you have a Unique Student Identifier (USI)**. If you have not yet obtained a USI you can apply for it directly at <https://www.usi.gov.au/students/get-a-usi> on a computer or mobile device. Alternatively, AIBT can apply on your behalf with your permission.

**Enter your Unique Student identifier
(if you already have one)**

--	--	--	--	--	--	--	--	--	--

- I have read and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at <http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx>
- I understand I may receive one or more surveys from the National Centre for Vocational Education Research (NCVER).

Student Declaration and Consent *please tick all*

- I declare that the information I have provided is true and correct to the best of my knowledge.
- I authorise AIBT Pty Ltd to collect, store and use my personal information in accordance with the Australian Privacy Principles and the Privacy Act 1998.
- I authorise AIBT Pty Ltd to make relevant enquiries where necessary and in accordance with legislation regarding my academic qualifications and any work experience related to my application for undertaking a course of study.
- I understand that my information will only be released to third parties in accordance with legislation or where legally required.
- I understand that I may at any time revoke my authorisation for AIBT Pty Ltd to release my information to third parties by notifying AIBT Pty Ltd and that implementation cannot be retrospective.
- I have read and understand the Student Handbook.
- I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

Student Signature		Date	
Student Name			
Parent/ Guardian Signature		Date	
Parent/Guardian Name			