



Personal details

1. Family Name

Given Names

Title

 Mr Mrs Miss Ms

2. Date of Birth

3. Gender

 Male Female

4. Home Phone

Mobile

Work Phone

Email

Unique Student Identifier-USI

5. Address of your usual residence:

Building name

Flat/Unit number

Street/lot number

Street Name

Suburb/Town

State

Postcode

6. Postal Address - if different from question 5.

Building name

Flat/Unit number

Street/lot number

PO Box/Street Name

Suburb/Town

State

Postcode

Enrolment details:

Course Code:		Method of study: <input type="checkbox"/> Full Time <input type="checkbox"/> Part-time	
Course Name:			
Unit Code	Unit Name		

STUDENT SIGNATURE _____ DATE _____

Office use only:

Approved: Yes No Trainer _____ Date _____

Course Payment details: Receipt/reference number _____ Exemption

USI verified: Yes Data entry Initial: _____ IAD Student ID: _____



**INSTITUTE FOR ABORIGINAL DEVELOPMENT
(ABORIGINAL CORPORATION)**

Language and cultural diversity

7) In which country were you born?

Australia	<input type="checkbox"/>	1101
<hr/>		
Other - please specify	<hr/>	

8) Do you speak a language other than English at home?
(If more than one language, indicate the one that is spoken most often)

No, English only	<input type="checkbox"/>	1201
<hr/>		
Yes, other - please specify	<hr/>	

9) Are you of Aboriginal or Torres Strait Islander origin?
(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)

No	<input type="checkbox"/>
Yes, Aboriginal	<input type="checkbox"/>
Yes, Torres Strait Islander	<input type="checkbox"/>

Disability

10) Do you consider yourself to have a disability, impairment or long-term condition?

Yes	<input type="checkbox"/>	Y
No	<input type="checkbox"/>	N
<hr/>		
No - Go to Question 12		

11) 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)

Hearing/deaf	<input type="checkbox"/>	11
Physical	<input type="checkbox"/>	12
Intellectual	<input type="checkbox"/>	13
Learning	<input type="checkbox"/>	14
Mental illness	<input type="checkbox"/>	15
Acquired brain impairment	<input type="checkbox"/>	16
Vision	<input type="checkbox"/>	17
Medical condition	<input type="checkbox"/>	18
Other	<input type="checkbox"/>	19



Schooling

12) What is your highest COMPLETED school level? (Tick ONE box only)

Year 12 or equivalent	<input type="checkbox"/>	12	
Year 11 or equivalent	<input type="checkbox"/>	11	
Year 10 or equivalent	<input type="checkbox"/>	10	
Year 9 or equivalent	<input type="checkbox"/>	09	
Year 8 or below	<input type="checkbox"/>	08	
Never attended school	<input type="checkbox"/>	02	Never completed any primary or secondary level education - go to question 14

13) Are you still enrolled in secondary or senior secondary education?

Yes	<input type="checkbox"/>	Y
No	<input type="checkbox"/>	N

Previous qualifications achieved

14) Have you SUCCESSFULLY completed any of the following qualifications listed in question 15?

Yes	<input type="checkbox"/>	Y	
No	<input type="checkbox"/>	N	No - go to question 16

15) If YES, then tick ANY applicable boxes.

Bachelor degree or higher degree	<input type="checkbox"/>	008
Advanced diploma or associate degree	<input type="checkbox"/>	410
Diploma (or associate diploma)	<input type="checkbox"/>	420
Certificate IV (or advanced certificate/technician)	<input type="checkbox"/>	511
Certificate III (or trade certificate)	<input type="checkbox"/>	514
Certificate II	<input type="checkbox"/>	521
Certificate I	<input type="checkbox"/>	524
Other education (including certificates or overseas qualifications not listed above)	<input type="checkbox"/>	990

Employment

16) Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

Full-time employee (35 hours or more per week)	<input type="checkbox"/>	01
Part-time employee (less than 35 hours per week)	<input type="checkbox"/>	02
Self employed - not employing others	<input type="checkbox"/>	03
Self employed - employing others	<input type="checkbox"/>	04
Employed - unpaid worker in a family business	<input type="checkbox"/>	05
Unemployed - seeking full-time work	<input type="checkbox"/>	06
Unemployed - seeking part-time work	<input type="checkbox"/>	07
Not employed - not seeking employment	<input type="checkbox"/>	08



Study Reason

17) Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship? (Tick ONE box only)

To get a job	<input type="checkbox"/> 01
To develop my existing business	<input type="checkbox"/> 02
To start my own business	<input type="checkbox"/> 03
To try for a different career	<input type="checkbox"/> 04
To get a better job or promotion	<input type="checkbox"/> 05
It was a requirement of my job	<input type="checkbox"/> 06
I wanted extra skills for my job	<input type="checkbox"/> 07
To get into another course of study	<input type="checkbox"/> 08
For personal interest or self-development	<input type="checkbox"/> 12
Other reasons	<input type="checkbox"/> 11

Your right and responsibilities as a student at Institute for Aboriginal Development:

- I have been informed about my class dates and times.
- I authorise IAD staff to get medical assistance for me if I need it.
- If I do not attend class continuously for 5 days IAD Student Services can withdraw me.
- I consent to IAD searching on my behalf to locate my USI on the USI portal system.
- I have been provided with the IAD Student Handbook 2018 and I will approach IAD staff if I have any questions.

IAD may use my photograph for public relations and marketing. YES NO

Unique Student Identifier

From 1 January 2015, we the Institute for Aboriginal Development (Aboriginal Corporation) 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). If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-USI/> on computer or mobile device.



Privacy Statement & Student Declaration

I declare that the information I have provided to the best of my knowledge is true and correct.

I understand that my RTO the Institute for Aboriginal Development (Aboriginal Corporation) is required to submit data sourced from this enrolment form to the National Centre for Vocational Education Research LTd (NCVER) as a regulatory reporting requirement. The information contained on my enrolment form may be used by my RTO or the following third parties for administrative, regulatory and/or research purposes:

- School - if I am a secondary school student undertaking VET, including a school based apprenticeship or traineeship.
- Employer - if I am enrolled in training paid by my employer.
- Government departments and authorised agencies.
- NCVER.
- Organisations conducting student surveys.
- Researchers.

You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. Please note you may opt out of the survey of the time of being contacted.

See addition information provided on page 6.

STUDENT SIGNATURE: DATE:

PARENT/GUARDIAN SIGNATURE: DATE:

Note: parental/guardian consent is required if student is under the age of 18.

NCVER will use, secure, disclose, and retain your data in accordance with the VET Data Protocol and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

IAD staff must check the student name is exactly as written in the identity document :

A form of ID sighted by IAD Staff: _____ Date: _____

- birth certificate
- medicare card
- driver's licence
- other: _____



Privacy Notice (current as at 10.11.2017)

Consent for collection, use or disclosure of personal information

The following is provided to you on behalf of the Student Identifiers Registrar (Registrar).

You are advised and agree that you understand and consent that the personal information you provide in connection with your application for a Unique Student Identifier (USI):

- is collected by the Registrar as authorised by the *Student Identifiers Act 2014*.
- 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 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;
 - 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.

The consequences for not providing the Registrar with some or all of your personal information are that the Registrar will not be able to issue you with a USI.

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 usi@education.gov.au or telephone 1300 857 536, international enquiries +61 2 6240 8740. 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 1988*, including in relation to the misuse or interference of or unauthorised collection, use, access, modification or disclosure of USIs.



INSTITUTE FOR ABORIGINAL DEVELOPMENT
(ABORIGINAL CORPORATION)

Additional Information for USI Application through IAD– only required if you do not already have a USI

Application for Unique Student Identifier

If you would like the Institute for Aboriginal Development (Aboriginal Corporation) to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf> . You must also provide some additional information as noted at the end of this form so that we can apply for a USI on your behalf.

Iauthorise the Institute for Aboriginal Development (Aboriginal Corporation) to apply pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf .

I have read and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>, and NCVET policies, procedures and protocols published on NCVET’s website at www.ncvet.edu.au .

STUDENT SIGNATURE _____ DATE _____

Town/City of Birth

(please write the name of the Australian or overseas town or city where you were born)

We will also need to verify your identity to create your USI. Please provide details for one of the forms of identity below. Please ensure that the name written in ‘Personal Details’ section is exactly the same as written in the document you provide below.

Australian Driver’s Licence

State:

Licence Number:

Australian Passport

Passport number



INSTITUTE FOR ABORIGINAL DEVELOPMENT (ABORIGINAL CORPORATION)

Medicare Card

Medicare card number:

Individual reference number (next to your name on Medicare card):

Card colour: (select which applies)

Green

Expiry date

(format MM/YYYY)

(month/year)

Yellow

Blue

Expiry date ____/____/____

(format DD/MM/YYYY)

(day/month/year)

Name on card:

Australian Birth Certificate

State/Territory

Details vary according to State/Territory

Registration number (all states/territory)

Date printed (NT,SA,ACT)

Certificate number (NT, SA, ACT)

Registration date (QLD, TAS)

Registration year (VIC, NSW, WA, TAS)

In accordance with section 11 of the *Student Identifiers Act 2014*, IAD will securely destroy personal information which we collect from individuals solely for the purpose of applying for a USI on their behalf as soon as practicable after we have made the application or the information is no longer needed for that purpose.

IAD STAFF USE ONLY:

Ensure that all the information completed on this form is exactly the same as written in the identity document provided:

A form of ID sighted by IAD Staff: _____ Date: _____