Application for Enrolment – Smart and Skilled

Personal Details

- **Male**
- **Female**

Given Name/s: ____________________________ Date of Birth (dd/mm/yy): ____________________

Address: _____________________________________________________________

Home Phone: ____________________________ Mobile Phone: __________________________

Email Address: ___________________________________________________________

Name of secondary institution (school): ____________________________

**Secondary Education** - Please Tick Appropriate Box Below

- Did not go to school
- Completed Year 8
- Completed Year 9
- Completed Year 10
- Completed Year 11
- Completed Year 12

Please attach a copy of your final year school results.

**Prior Education** - Please Tick Appropriate Box Below

- Miscellaneous
- Foundation
- Certificate I
- Certificate II
- Certificate III
- Certificate IV
- Certificate IV and above
- Certificate IV and above with acquired disability

Have you undertaken any other Smart and Skilled qualifications this calendar year?  
- No
- Yes

Do you wish to apply for credit for previous studies (see back of this form)?  
- Yes

How did you hear about the course?  
- Work
- Friend
- Family

**Early Childhood Education Courses** - Please Select Course Below

- Diploma of Early Childhood Education and Care - CHC50113  
- Certificate III in Early Childhood Education and Care - CHC30113

**Payment Options**

- VET FEE-HELP

I confirm that I am an Australian Citizen or holder of a Permanent Humanitarian Visa.

The VET FEE-HELP Application Form will be mailed to you with the confirmation of enrolment letter.

Or I am paying my fees by:  
- Cheque
- Cash
- Direct Debit
- Credit Card

My fees will be paid by:  
- Myself
- Another person (if fees are to be paid by another person/company or if the applicant is under the age of 18 years please complete details on reverse side of form)

**Workplace Details**

- Company Name: ____________________________
- Supervisor’s Name: ____________________________
- Address: _____________________________________________________________
- Suburb: ____________________________ Postcode: ____________________________
- Work Phone: ____________________________
- Email: _____________________________________________________________

**Emergency Contact**

- Name: ____________________________ Relationship to student: ____________________________
- Home Phone: ____________________________ Work Phone: ____________________________
- Mobile Phone: ____________________________

Please complete the details on the reverse side of this form.
Questionnaire (Mandatory information for AVETMISS & NOVER reporting)

1. In which country were you born?
   ☐ Australia
   ☐ Other ________________________

   What year did you arrive in Australia? ______________________

2. What Residency status do you hold?
   ☐ Australian Citizen
   ☐ Permanent Australian Resident
   ☐ New Zealand Citizen
   ☐ Humanitarian Visa Holder
   ☐ None of the above

3. Do you speak a language other than English at home?
   ☐ No, English only
   ☐ Yes, I speak ______________________

4. How well do you speak English?
   ☐ Very Well
   ☐ Well
   ☐ Not Well
   ☐ Not at all

5. Are you of Aboriginal or Torres Strait Islander origin?
   ☐ No
   ☐ Yes, Aboriginal
   ☐ Yes, Torres Strait Islander
   ☐ Yes, both to above

6. Are you living in NSW Social Housing or is your household on the NSW Housing Register?
   ☐ No
   ☐ Yes

7. What is your current employment status?
   ☐ Full-Time Employee
   ☐ Part-Time Employee
   ☐ Self Employed
   ☐ Employer
   ☐ Employed (unpaid)
   ☐ Unemployed seeking full time
   ☐ Not Employed
   ☐ Unemployed seeking part time

8. Are you an Employment Service Provider Client?
   ☐ No
   ☐ Yes

9. Which best describes your main reason for study?
   ☐ To get a job
   ☐ To start my own business
   ☐ Requirement of my job
   ☐ I want extra skills for my job
   ☐ To get into another course or study

10. Please indicate your welfare status?
    ☐ Not a welfare recipient
    ☐ Student is a welfare recipient
    ☐ Dependent child or spouse is a welfare recipient
    ☐ Other (explain below) ______________________

11. Do you consider yourself to have a disability, impairment or long term condition?
    ☐ No
    ☐ Yes

   If yes, please indicate the area's below, please also submit any documentation that may be required.
   ☐ Hearing
   ☐ Physical
   ☐ Intellectual
   ☐ Learning
   ☐ Mental Illness
   ☐ Vision
   ☐ Mobility
   ☐ Medical Condition
   ☐ Other (explain below) ______________________

Terms and Conditions of Enrolment – Australian Student

ENROLMENT AND ACCEPTANCE
All applications will be assessed by the Registrar of the College. In consideration of the acceptance of my enrolment as a student, I agree not to hold Bedford College and/or its employees liable for and will not make claim against them for any loss, damage, death or injury which I may suffer or cause as a result of or in connection with any attendance at the College campuses.

ADDITIONAL FEES
Textbooks (including e-texts) and consumables are additional to the course cost. Please see Additional Fees Information on the College website at www.bedford.edu.au

CONTACT DETAILS
While enrolled in a course at Bedford. Students are provided with a college email address on course commencement and all regular communications between the College and the student will be sent via this email address.

COMPLAINTS AND APPEALS
The College has a Complaints and Appeals Policy in place to which all students have access via the College website. Nothing contained in this policy precludes students from taking action under Australia’s Consumer Protection Laws.

PRIVACY STATEMENT
Bedford College collects personal information in order to assist in the provision of its services. This information is used in order to provide a service, to communicate with students, staff and nominated student contact(s) in the event of an accident or emergency. The College may be required to provide personal information to external organisations in order to provide a service as required by law. The College may also disclose information if it is reasonably believed to be necessary to prevent or lessen a serious threat to life or health of any person. A full copy of the Bedford College Privacy Policy is available on the College website.

COURSE WITHDRAWAL, DEFERRAL OR AMENDMENT
All deferrals and cancellations MUST BE MADE IN WRITING and will be acknowledged in writing. Please refer to the Course Withdrawal, Deferral, and Amendment Policy and the Fees & Refunds Policy on the College website www.bedford.edu.au

LITERACY AND NUMERACY
To successfully complete your training you must be able to check and competently record, read, interpret, estimate, measure and calculate. If required Bedford College may refer you to literacy and numeracy training in areas identified as necessary to ensure you meet the requirements of your training.

VET FEE-HELP
For information on VET FEE-HELP loan scheme please refer to Study Assist.

FEES
Fee paying students should be aware that fees are due and payable on receipt of an invoice which will be issued each term (this does not apply to VET FEE-HELP loan). Students are required to submit all tasks on or before the prescribed due dates. Students who are continually falling behind in the submission of tasks will be required to meet with the head teacher. Any resubmitted tasks sent to the College after the contracted end date will not be marked and a Statement of Attainment will be issued for completed units only.

RECOGNITION OF PRIOR LEARNING
RPL is available to students on provision of verification at the beginning of a course. Students may apply for RPL if they believe they already have the skills and knowledge that will be taught and assessed in a subject. Please refer to the College RPL Policy on the College website for more details.

SUBMISSION OF ASSESSMENT
Students are required to submit all tasks on or before the prescribed due dates. Students who are continually falling behind in the submission of tasks will be required to meet with the head teacher. Any resubmitted tasks sent to the College after the contracted end date will not be marked and a Statement of Attainment will be issued for completed units only.
In signing this Application for Enrolment, you agree that you have read and understood the following:

- The Terms and Conditions of Enrolment and the course details and accept and agree to be bound by them;
- I declare that I have the financial capacity to meet tuition fees (full-fee paying students only), textbooks and consumable fees and agree to pay fees as they become due; and understand that my qualification will be withheld until my account is finalised;
- I declare that I will abide by the Rules and Regulations of the College;
- I declare that I will notify the College by email of any change of your contact details;
- I understand that I am required to have a Unique Student Identifier (USI) which I can obtain from http://usi.gov.au
- In the event that I do not get my own USI, I give permission for the College to obtain my USI and I am required to activate this through the USI portal http://usi.gov.au
- The information provided in the Application for Enrolment and any accompanying documents is my own, true and correct details;
- The College has permission to use any photographic and/or video image on which you may appear on marketing and advertising materials;
- I understand that information in this form and the outcomes of this training program may be collected and shared with other state and federal government agencies;
- This information may be used for monitoring, programme planning and statistical purposes;
- I understand that tasks need to be regularly submitted to ensure successful progression through the course;
- I understand that in the event that my enrolment is terminated any further submissions of tasks will not be marked and a Statement of Attainment will be issued for only completed units;

I HAVE ATTACHED THE FOLLOWING COPIES:

- Current Drivers Licence or Proof of Age Card or Birth Certificate
- Final School Results (last year attended)
- Health Care Card/Pension Card (if applicable)

Signature of Student: ___________________________ Date: ___________________________

If fees are to be paid by another personcompany or if the student is under the age of 18 years – please complete the details below:

I, (print name) ___________________________ Relationship to student: ___________________________

Signature: ___________________________ Date: ___________________________