

Sandybeach Centre Enrolment Form



Where did you hear about Sandybeach Centre?

- Course and Event Guide
 Bayside Leader
 Promotional Flyer
 Facebook
 Word of Mouth
 Website
 Other (Specify)

COURSE NAME	STUDY REASON *(SEE BELOW KEY)	COURSE NAME	STUDY REASON *(SEE BELOW KEY)

***STUDY REASON KEY:**

Of the following categories, which BEST describes your main reason for undertaking your chosen course(s):

- | | | |
|---|--|------------------------------------|
| 01. To Get a Job | 02. To Develop My Existing Business | 03. To Start My Own Business |
| 04. To Try for a Different Career | 05. To Get a Better Job or Promotion | 06. It was a Requirement of My Job |
| 07. I Wanted Extra Skills for My Job | 08. To Get Into Another Course of Study | 11. Other Reasons |
| 12. For Personal Interest or Self Development | 13. To Get Skills for Community/Voluntary Work | |

PERSONAL DETAILS
Title Surname (<i>Legal family name</i>) Given Names (<i>Legal given name</i>) Address: Building/Property Name.....Flat/Unit Number..... Street Number Street name..... Suburb..... State.....Postcode..... Date of Birth / / Phone (Home) Mobile Email Gender: Female <input type="checkbox"/> Male <input type="checkbox"/> (Indeterminate/Intersex/Unspecified) <input type="checkbox"/> POSTAL ADDRESS (IF DIFFERENT FROM ABOVE) Building/Property Name.....Flat/Unit Number..... Street Number Street Name..... PO Box or Roadside Delivery Box Suburb.....State.....Postcode
EMERGENCY CONTACT (<i>Required information</i>)
Name Phone/s Relationship

Do you have a medical condition that may impact on your ability to join this program? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please complete our Medical Condition Form, obtained from Reception.
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If you do not wish to receive any marketing communications from us, please tick here:



Sandybeach Centre
Award winning adult education, community services, wellbeing and the arts

2 Sims Street Sandringham VIC 3191
 ABN: 398 538 675 16 TOID: 4069
 9598 2155 admin@sandybeach.org.au www.sandybeach.org.au



OTHER INFORMATION

The Victorian Government, through the Department of Education and Training (the Department), develops, monitors and funds vocational education and training (VET) in Victoria. The Victorian Government is committed to ensuring that Victorians have access to appropriate and relevant VET services. Sandybeach is required to provide the Department with student and training activity data.

In which country were you born? Australia Other (please specify).....

Are you of Aboriginal or Torres Strait Islander origin? No Yes – Aboriginal Yes - Torres Strait Islander

For persons of both Aboriginal and Torres Strait Islander origin, please tick BOTH boxes.

Do you speak a language other than English at home? No, English only Yes, other - please specify

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

What is your highest COMPLETED school level?

Year 12 Year 11 Year 10 Year 9 or equivalent Year 8 or lower Never attended school

In which year did you complete that school level? Year..... Where

Are you still attending secondary school? Yes No

Have you SUCCESSFULLY COMPLETED any of the following qualifications?

NOTE: Please choose your highest qualification below

Bachelor or Higher Degree Advanced Diploma/Associate Degree Diploma or Associate Diploma Certificate I

Certificate II Certificate III (or Trade Certificate) Certificate IV (or Advanced Certificate/Technician) Other

A E I Please tick A for an Australian qualification, E for an Equivalent to an Australian qualification or I for an International qualification

Of the following categories, which BEST describes your current employment status?

Employed – unpaid worker in a family business

Full time employee Self employed - employing others Self employed - not employing others

Part time employee Unemployed - seeking full time work Unemployed - seeking part time work

Not employed - not seeking employment

If you are employed, what is your occupation?

Manager Professional Technician and trade worker Community and personal service worker

Clerical and admin worker Sales worker Machinery operator/driver Labourer Other

Industry of Employment

Which of the following classification BEST describes the industry of your current or previous employer? (Tick one box only)

Agriculture, Forestry & Fishing

Mining

Manufacturing

Electricity, Gas, Water & Waste Service

Construction

Wholesale Trade

Retail Trade

Accommodation & Food Service

Transport, Postal & Warehouse

Information Media & Telecommunications

Financial & Insurance Services

Rental, Hiring & Real Estate Services

Professional, Scientific & Technical Services

Administrative & Support Services

Public Administration & Safety

Education & Training

Health Care & Social Assistance

Arts & Recreation Services

Other Services

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

If yes, please indicate the nature of your disability, impairment or long-term condition

Hearing/deaf

Physical

Intellectual

Learning

Mental illness

Acquired brain impairment

Vision

Medical Condition

Other

Do you require any support adjustments to be made to ensure the best outcome from your learning and participation? Yes No

CANCELLATION POLICY

OCCASIONALLY SANDYBEACH CENTRE HAS NO OPTION OTHER THAN TO CANCEL A COURSE, IN WHICH CASE A **FULL REFUND** APPLIES. FOR **GOVERNMENT SUBSIDISED PLACES**, CONDITIONS AND REGULATIONS APPLY. FOR ALL OTHER COURSES, SANDYBEACH CENTRE POLICY APPLIES. SEE OUR **INFORMATION FOR PARTICIPANTS BROCHURE**, AVAILABLE FROM RECEPTION, OR SANDYBEACH WEBSITE ([WWW.SANDYBEACH.ORG.AU](http://www.sandybeach.org.au)) FOR MORE INFORMATION.

DECLARATION

I DECLARE THAT THE INFORMATION PROVIDED BY ME ON THIS FORM DETAILING MY IDENTITY, RESIDENCY STATUS, EDUCATIONAL AND VOCATIONAL ATTAINMENT IS TRUE AND CORRECT. I UNDERSTAND THAT SANDYBEACH CENTRE REQUIRES ME TO PRODUCE EVIDENCE TO SUBSTANTIATE MY CLAIM FOR A **GOVERNMENT SUBSIDISED PLACE**, AND FAILURE TO DO SO WILL RESULT IN MY INELIGIBILITY FOR **GOVERNMENT ASSISTANCE** AND A LIABILITY FOR FULL FEES FOR ANY TRAINING UNDERTAKEN. I UNDERSTAND THAT ANY FALSE INFORMATION RENDERING ME INELIGIBLE FOR A **GOVERNMENT SUBSIDISED PLACE** IN THE COURSE IN WHICH I HAVE ENROLLED, WILL RESULT IN ME BEING LIABLE FOR FULL PAYMENT OF SANDYBEACH CENTRE'S FEES.

VICTORIAN GOVERNMENT VET STUDENT ENROLMENT PRIVACY NOTICE

THE VICTORIAN GOVERNMENT, THROUGH THE DEPARTMENT OF EDUCATION AND TRAINING (THE DEPARTMENT), DEVELOPS, MONITORS AND FUNDS VOCATIONAL EDUCATION AND TRAINING (VET) IN VICTORIA. THE VICTORIAN GOVERNMENT IS COMMITTED TO ENSURING THAT VICTORIANS HAVE ACCESS TO APPROPRIATE AND RELEVANT VET SERVICES. ANY PERSONAL INFORMATION COLLECTED BY THE DEPARTMENT FOR VET PURPOSES IS PROTECTED IN ACCORDANCE WITH THE **PRIVACY AND DATA PROTECTION ACT 2014 (VIC)** AND THE **HEALTH RECORDS ACT 2001 (VIC)**.

COLLECTION OF YOUR DATA. SANDYBEACH CENTRE IS REQUIRED TO PROVIDE THE DEPARTMENT WITH STUDENT AND TRAINING ACTIVITY DATA. THIS INCLUDES PERSONAL INFORMATION COLLECTED IN THE SANDYBEACH CENTRE ENROLMENT FORM AND UNIQUE IDENTIFIERS SUCH AS THE VICTORIAN STUDENT NUMBER (VSN) AND THE COMMONWEALTH'S UNIQUE STUDENT IDENTIFIER (USI). SANDYBEACH CENTRE PROVIDES DATA TO THE DEPARTMENT IN ACCORDANCE WITH THE VICTORIAN VET STUDENT STATISTICAL COLLECTION GUIDELINES, AVAILABLE AT: [HTTP://WWW.EDUCATION.VIC.GOV.AU/TRAINING/PROVIDERS/RTO/PAGES/DATACOLLECTION.ASPX](http://www.education.vic.gov.au/training/providers/rto/pages/datacollection.aspx)
USE OF YOUR DATA. THE DEPARTMENT USES STUDENT AND TRAINING DATA, INCLUDING PERSONAL INFORMATION, FOR A RANGE OF VET PURPOSES INCLUDING ADMINISTRATION, MONITORING AND PLANNING. A STUDENT'S USI MAY BE USED FOR SPECIFIC VET PURPOSES INCLUDING THE VERIFICATION OF STUDENT DATA PROVIDED BY SANDYBEACH CENTRE; THE ADMINISTRATION AND AUDIT OF VET PROVIDERS AND PROGRAMS; EDUCATION-RELATED POLICY AND RESEARCH PURPOSES; AND TO ASSIST IN DETERMINING ELIGIBILITY FOR TRAINING SUBSIDIES.

DISCLOSURE OF YOUR DATA. AS NECESSARY AND WHERE LAWFUL, THE DEPARTMENT MAY DISCLOSE VET DATA, INCLUDING PERSONAL INFORMATION, TO ITS CONTRACTORS, OTHER GOVERNMENT AGENCIES, PROFESSIONAL BODIES AND/OR OTHER ORGANISATIONS FOR VET-RELATED PURPOSES. IN PARTICULAR, THIS INCLUDES DISCLOSURE OF VET STUDENT AND TRAINING DATA TO THE COMMONWEALTH AND THE NATIONAL CENTRE FOR VOCATIONAL EDUCATION RESEARCH (NCVER).
LEGAL AND REGULATORY. THE DEPARTMENT'S COLLECTION AND HANDLING OF ENROLMENT DATA AND VSNs IS AUTHORISED UNDER THE EDUCATION AND TRAINING REFORM ACT 2006 (VIC). THE DEPARTMENT IS ALSO AUTHORISED TO COLLECT AND HANDLE USIs IN ACCORDANCE WITH THE STUDENT IDENTIFIERS ACT 2014 (CTH) AND THE STUDENT IDENTIFIERS REGULATION 2014 (CTH).

SURVEY PARTICIPATION. YOU MAY BE CONTACTED TO PARTICIPATE IN A SURVEY CONDUCTED BY NCVER OR A DEPARTMENT-ENDORSED PROJECT, AUDIT OR REVIEW RELATING TO YOUR TRAINING. THIS PROVIDES VALUABLE FEEDBACK ON THE DELIVERY OF VET PROGRAMS IN VICTORIA. PLEASE NOTE YOU MAY OPT OUT OF THE NCVER SURVEY AT THE TIME OF BEING CONTACTED.

CONSEQUENCES OF NOT PROVIDING YOUR INFORMATION. FAILURE TO PROVIDE YOUR PERSONAL INFORMATION MAY MEAN THAT IT IS NOT POSSIBLE FOR YOU TO ENROL IN VET AND/OR TO OBTAIN A VICTORIAN GOVERNMENT VET SUBSIDY.

ACCESS, CORRECTION AND COMPLAINTS. YOU HAVE THE RIGHT TO SEEK ACCESS TO OR CORRECTION OF YOUR OWN PERSONAL INFORMATION. YOU MAY ALSO COMPLAIN IF YOU BELIEVE YOUR PRIVACY HAS BEEN BREACHED.

FURTHER INFORMATION

FOR MORE INFORMATION IN RELATION TO HOW YOUR INFORMATION MAY BE USED OR DISCLOSED, PLEASE REFER TO THE SANDYBEACH CENTRE PRIVACY NOTICE IN THE INFORMATION FOR PARTICIPANTS BOOKLET, OR CONTACT SANDYBEACH CENTRE'S PRIVACY OFFICER BY PHONE ON 9598 2155 OR EMAIL ADMIN@SANDYBEACH.ORG.AU.

FOR FURTHER INFORMATION ABOUT THE WAY THE DEPARTMENT COLLECTS AND HANDLES PERSONAL INFORMATION, INCLUDING ACCESS, CORRECTION AND COMPLAINTS, GO TO: [HTTP://WWW.EDUCATION.VIC.GOV.AU/PAGES/PRIVACYPOLICY.ASPX](http://www.education.vic.gov.au/pages/privacypolicy.aspx)

FOR FURTHER INFORMATION ABOUT UNIQUE STUDENT IDENTIFIERS, INCLUDING ACCESS, CORRECTION AND COMPLAINTS, GO TO: [HTTP://WWW.USI.GOV.AU/STUDENTS/PAGES/STUDENT-PRIVACY.ASPX](http://www.usi.gov.au/students/pages/student-privacy.aspx)

OFFICE USE ONLY – DATA ENTERED INTO VETTRAK

Name:	Signed:	Date:	Study reason entered on VT <input type="checkbox"/>
...../...../.....	