



Student Application Form

Read your Student Handbook BEFORE submitting this form. This confidential Enrolment Form asks for personal information about you. The main purpose for collecting this information is for administrative, regulatory and/or research purposes and to ensure our course is suitable for your needs. All staff at Signet Institute of Australia are required by law to protect the information provided on this Enrolment Form. More information about privacy is included in the notice at the end of this form.

PART A - YOUR PERSONAL DETAILS

T'.1	
Title:	
First Name:	
Middle Name:	
Last Name:	
Date of Birth:	
Gender:	
Telephone:	
Mobile:	
Email:	
Alternative Email:	
Identification Verified:	Type of ID: National ID No.
identification verified.	ID Number:
	Building Name:
	Unit Name:
	Street:
Address:	Suburb/Town:
	State:
	Postcode:
	Country:

Identification Details

ID Type / Name	ID Number	Expiry Date	
ID Type / Name	ID Number	Expiry Date	
ID Type / Name	ID Number	Expiry Date	

Passport Details (if applicable)





Passpo	rt Number:					
Expiry [Date:					
Passpo	rt Country					
-	onsider yourself to ha	ve a disability, impairment, or long-term condition?				
-	-	of a disability, impairment or long-term condition, please select the area(s) in the more than one area):				
□ 1 1	L Hearing/deaf					
□ 12	2 Physical					
	Intellectual					
□ 13	3					
□ 14	Learning					
□ 15	Mental illness					
	Acquired brain imp	pairment				
□ 17	7 Vision					
□ 18	Medical condition					
	Other					
In which Do you s (If more		•				
How wel	ll do you speak English	2				
	ery well 1	•				
	□ Well 2					
	□ Not well 3					
□N	ot at all 4					
(For pers		l and Torres Strait Islander origin, mark both 'Yes' boxes)				





How	did yo	u hear about us? □ Website □] Agents	☐ Advertise	ments	☐ Friends	□ Other
If Age	ent, ple	ease specify name:					
PAR	T B -	EDUCATION HISTORY					
Wha	t is you	r highest COMPLETED school level? (T	ick ONE box o	only)			
	12	Year 12 or equivalent					
	11	Year 11 or equivalent					
	10	Year 10 or equivalent					
	09	Year 9 or equivalent					
	08	Year 8 or below					
	02	Never attended school					
Are y Have	ou stil	AR did you complete that school level attending secondary school? I attending secondary school? I attending secondary school? I attending secondary school? I attending secondary school?		□ Yes	□ No		
	800	Bachelor's degree or higher degree	1				
	410	Advanced diploma or associate deg	ree				
	420	Diploma (or associate diploma)					
	511	Certificate IV (or advanced certificate	te/technician)			
	514	Certificate III (or trade certificate)					
	521	Certificate II					
	524	Certificate I					
	990	Certificates other than the above					
.						1.0.	

Please provide details and documentation of your past education including the highest qualification completed (attach with the form).

Year Completed	Name of Institution	State / Country	Name of Qualification	Course Duration





PART C - COURSES

Please tick the course/s you are applying for, to study at Signet Institute of Australia.

Courses	Duration (Weeks)	Cost (USD)
CHC33021 Certificate III in Individual Support (Ageing and Disability) + CHC43015 Certificate IV in Ageing Support	52	4500
CHC52021 Diploma of Community Services	52	4500
CHC53315 Diploma of Mental Health	52	4500
HLT55118 Diploma of Dental Technology	52	5000
MEM31922 Certificate III in Engineering - Fabrication Trade	52	4500
AUR30620 Certificate III in Light Vehicle Mechanical Technology	52	4500
AUR40216 Certificate IV in Automotive Mechanical Diagnosis	52	4500
AUR31520 Certificate III in Automotive Diesel Engine Technology	52	4500
CPC33020 Certificate III in Bricklaying and Bricklaying	52	4500
CPC31320 Certificate III in Wall and Floor Tiling	52	4500
CPC50220 Diploma of Building and Construction (Building)	52	4500
RII60520 Advanced Diploma of Civil Construction Design	52	4500





Pleas	e tick th	ne intake date below:	☐ January	□ April	□ July	□ Oct		
Othe	r(Speci ^í	fy):						
		to apply for Credit Trans						
with t Form.	this forn	ed copies of transcripts from a long with a Credit Transcripts from a credit Transcripts from a course (ansfer Applicat	-	nust be provi	ded □ Yes	□ No	
	To ge	t a job						
		velop my existing busine	ess					
	To sta	art my own business						
		for a different career	-					
	To ge	t a better job or promot	ion	-				
	It was	s a requirement of my jo	b					
	I wan	ted extra skills for my jo	b					
	To ge	t into another course of						
	For p	ersonal interest or self-c	development					
Plea Spe	ase	r reasons 						
		rolled with Signet Institu		before?		□ YES	5 □ NO	
Empl	oyment	t						
	e follow ONE bo	ving categories, which BE x only)	:ST describes y	our current e	employment s	tatus?		
	01	Full-time employee						
	02	Part-time employee						
	03	Self-employed – not e	mploying other	rs				
	04	Employer						
	05	Employed – unpaid wo	rker in a family	/ business				
	06	Unemployed – seeking	full-time worl	k				
	07	Unemployed – seeking	g part-time wo	rk				
	08	Not employed – not se	eking employr	ment				





EMPLOYMENT HISTORY

Please provide details of your past employment.

Date Employed	Name of Employer	State/Country	Position	Duties
DARTE FNC	LISH LANGUAGE PROFIC	IFNOV		
	ch of the following applies to yo		nt evidence / documentation to	support your
_	my first language npleted a recognised English lar	nguage test.		
Test taken				
□IELTS□	PTE 🗆 TOEFL	☐ Other (Please	Specify)	
Score (Overall):				
If you have not tal for the application	ken any of the above, please sp :	pecify how you w	ould satisfy the English proficier	ncy requirements
	complete an ELICOS course.			
	you refer to the specific entry r	-		oplying for. These

requirements are detailed in the student prospectus.

PART F - NEXT OF KIN/EMERGENCY CONTACT

Next of kin are people that Signet Institute of Australia may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Signet Institute of Australia.





Name:			Relationsh	nip to you:	
	Building	Name:			
	Unit Nar	ne:			
	Street:				
Address:	Suburb/	Town:			
	State:				
	Postcod	e:			
	Country	:			
Email:			Phone:		
interviews/to creations ma Australia in p displays, jou	estimonials of s y be used in a wrint, digital or l rnals, profession	students at campu classroom or on-tl proadcast media s onal development	ia staff may request to tak is or at places where the some- ine-job work activities or co uch as documents, studen materials for trainers and If the students' own creation	tudent is involve ould be published It magazine, web marketing collat	ed in an activity. These d by Signet Institute of osite, TV, newsletters, eral. Staff may also at times
_	ve consent to S ed above.	ignet Institute of A	ustralia using any of the al	bove materials in	avolving me for the purpose
	ot give consent ses outlined ab	_	e of Australia using any of t	the above mater	ials involving me for the
Student Na	ıme				

PART H – DECLARATION OF RECEIPT OF STUDENT INFORMATION

This is to certify that I have received and read the Signet Institute of Australia Student Handbook outlining the policies, practices, and regulations which I agree to observe and follow during my period of study with Signet Institute of Australia:

Student Declaration

Student Signature

- I understand that it is my responsibility to be familiar with the contents of the Signet Institute of Australia Student Handbook, and to ask questions on any matters I do not understand.
- I understand that this declaration will be recorded in my student file.
- I confirm that I have read and understood Signet Institute of Australia's current Student Prospectus or information provided on Signet Institute of Australia website (www.signet.edu.au) which details information about the ESOS Act 2000, course entry requirements, English entry requirements, LLN requirements. I also understand fees payments and refund policy, including an explanation of what occurs, if for some unforeseen reason, the course is not delivered.
- I confirm that I am fully aware of the fees and refund policy, conditions of enrolment and privacy statement as set out in Privacy Act 1988, which I agree to abide by as a student at Signet Institute of Australia.

Date:





- I declare that all information provided in this application form is complete and correct. I understand that
 failure to provide correct information or documentation in relation to this application form may result in
 cancellation of my enrolment.
- I confirm that the following has been discussed with me during my enrolment process:

	My enrolment	and the Qualific	cation details					
	My training pla	an (If applicable))					
	My assessmen	nt process						
	Evidence requ	irements						
	Who to contac	t for support an	id advice					
	Resources req	uired for my en	rolment					
	Any special needs I have which need to be taken into consideration							
	Signet appeals	s and complaints	s procedure					
	Fees, charges,	and method of	payment availal	ole				
	Confidentiality	of records and	access to my red	cords				
	Information contained in the Student Handbook							
	Signet Institut materials of Sig	•	n to use of my im	age and or testim	onial in the	Marketingan	d Advertisin	g
Student S	Signature				Date:			

PART I – PRIVACY NOTICE

Signet Institute follows the Privacy Act 1988 that guides the collection, storage, use and disclosure of information. This confidential Enrolment Form asks for personal information about you. The main purpose for collecting this information is for administrative, regulatory and/or research purposes and to allocate appropriate resources for your learning and assessment needs. All staff at Signet Institute are required by law to protect the information provided on this Enrolment Form.

Emergency Contacts

These are people that Signet Institute may need to contact in an emergency during your participation in training. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Signet Institute.

Personal Information

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

Collection Of Your Data

Signet Institute is required to provide the Department with student and training activity data. This includes personal information collected in the Signet Institute enrolment form.





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.

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).

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by Signet Institute of Australia for statistical, regulatory and research purposes. Signet Institute of Australia 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 disclosed to NCVER may be used or disclosed for the following purposes:
- Issuing statements of attainment or 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 programme administration, regulation, monitoring and evaluation.

You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third-party contractor. You may opt out of the survey 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).

Legal And Regulatory

The Department's collection and handling of enrolment data is authorised under the Education and Training Reform Act 2006 (Vic).

Survey Participation

You may be contacted to participate in a survey conducted by NCVER, Signet Institute of Australia's registering body, Australian Skills Quality Authority (ASQA) or a department-endorsed project, audit or review relating to your training. If you participate you may choose to keep your responses confidential. This provides valuable feedback on the delivery of VET programs in SA.

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 qualification in Signet Institute of Australia.

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.

Updating Your Records

Please let us know if any of your details change by providing updated information to our office. This is particularly important if your phone number, residential, postal or email address change during your enrolment with Signet Institute of Australia.

OFFICE USE ONLY (FOR STAFF ONLY)

Application Assessed by:		
Date:		
Admissions Officer Name:		
Admissions Officer Signature:	Date:	