

CONSTRUCTION TRADE QUALIFICATIONS

RTO# 41158
"Builders Educating Builders"

Head Office: 3/190 The Entrance Rd, Long Jetty NSW 2261

3 1300 270 539 www.ctq.edu.au

Enrolment Form				
	TRAINING PROGRAM OR TRAINEESHIP/APPRENTICESHIP DETAILS			
Qualification Code and Title				
Delivery Method	☐ Classroom ☐ Traineeship ☐ Apprenticeship ☐ Work-based (non T/ship) ☐ Blended			
How did you find out about this training?				
	CLASSROOM State Funded Program (Full Qual Entitlement) State Funded Program (Targeted Priorities) TNI – Statement of Attainment Fee For Service			
Program Type	TRAINEESHIP/			
	WORK BASED/ State Funded Program Fee For Service BLENDED			
Salutation (Miss, Mrs, Mr, etc)	DOB DD / MM / YYYY			
Student Legal Name Please ensure this is the same as what was used to create your USI & ID				
Residential Address	Building/property name Flat/unit details Street Number & Name			
Suburb	State/Terr P/Code			
Postal Address				
Telephone (Home)	Mobile			
Email Address				
Gender (Please Tick)	☐ Male ☐ Female ☐ Not Specified/Other			
	<u>USI – UNIQUE STUDENT IDENTIFIER</u>			
attainment when you complete yo submit to National Centre for Voca http://www.usi.gov.au/create-your- the USI Office for assistance	truction Trade Qualifications can be prevented from issuing you with a nationally recognised VET qualification or statement of ur course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we ational Education Research Ltd (NCVER). If you have not yet obtained a USI you can apply for it directly at -USI/ on computer or mobile device. Please note that if you would like to specify your gender as 'other' you will need to contact			
	recognised training delivered by an RTO) will need to have a USI (Unique Student #			
EMERGENCY CONTACT DETAILS				
Next of Kin				
Contact Mobile	Contact Home/Work			
Relationship				

Which best describes your main reason for doing this training? (tick one only)	☐ To develop my existing business ☐ To start my own business ☐ To get a job ☐ To try for a different career ☐ To get a better job or promotion ☐ To get skills for community/voluntary work ☐ It is a requirement of my job ☐ I wanted extra skills for my job ☐ To get into another course of study ☐ For personal interest or self-development ☐ Other Reason				
What best describes your current situation?	☐ Full time employee ☐ Part time employee ☐ Self Employed – not employing others ☐ Self Employed – employing others ☐ Employed – unpaid worker in a family business ☐ Unemployed - seeking full time employment ☐ Unemployed - seeking part time/ casual work ☐ Unemployed - not seeking employment at present ☐ Other (please state)				
De very examently live in NCV		JTH WALES STATE SPECIFIC DETAILS			
Do you currently <u>live</u> in NS\		☐ Yes ☐ No			
Are you living in NSW social housing; or are you/the household on the NSW Housing Register? (Public Housing, Community Housing, Aboriginal Housing, Crisis Accommodation/Supported Accommodation, FACS rental assistance)		☐ Yes ☐ No			
Is the student registered or intending to be registered in an Apprenticeship or Traineeship for this qualification in NSW?		Yes, I am already Registered as an Australian Apprentice/Trainee Yes, I am intending to be an Australian Apprentice/Trainee No			
Have you undertaken any o Skilled Qualifications this Ca		☐ Yes ☐ No			
Are you currently in Out of Home Care & aged 15-17 Or Have you previously been in Out of Home Care & aged between 18 – 30? Statutory Care – under a Children's Court Care Order Supported Care – FACS determine person in need of care. Children & young people in Out-of-home care usually reside with		 No I am not/have not been in Out of Home Care Yes I am in Out of Home Care & aged 15-17 Yes I have been in Out of Home Care & aged 18-30 			
Are you over 15yrs of age & experiencing or have experienced Domestic or Family Violence		 No I am not expeirencing or have experienced domestic or family voilence Yes I am over 15yrs of Age and are/have experienced Domestic or Family Violence If Yes − please provide a letter of recommendation from a Domestic & Family Violence Service, Refuge or other support Agency. 			
Are you a refugee on: Protection or Temporary Protection Visa Safe Haven Enterprise Visa Humanitarian Visa Asylum Seeker – Temporary Visa Asylum Seeker – Bridging Visa		□ No □ Yes (please state)			
Are you expecting to become unemployed? Have you been stood down, furloughed? Are you employed on the conditional undertaking training? Are you Low/Unskilled requiring training to keep a job? Working a declining Industry? Evidence for Departmental approval required		□ No □ Yes (please discuss your circumstances with our Administration team)			
Are you a Veteran - veterans are who served at least one day in the Aust	re all ex-serving personnel	Reservist Person who experienced operational deployment & peacekeeping mission Person who served in peacetime Recognised partner of the above			

BACKGROUND DETAILS							
Citizenship (Please tick) What is your residency status? Australian Citizen Australian Permanent Resident New Zealand Citizen Temporary Visa Humanitarian Visa Other/None of the above (please state)							
Country of Birth	N	lationality			Town of	f Birth	
Are you of Aboriginal or Tor origin?	res Strait Islander	☐ Ab	☐ Aboriginal ☐ Torres Strait Islander ☐ Neither				ther
What is your main spoken la			☐ English ☐ Other (please state)				
If English is your second lar speak English?	ou	☐ Not at all ☐ Not well ☐ Well ☐ Very well					
Preferred learning method?	☐ Audio (sou			ures/ima	ges) 🗌 K	inaesthetic	(practical/hands on)
		DISABIL	ITY STATUS				
Do you have a disability, impairment or long-term condition Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses Student has / I have a disability Student has / I have a disability disability support pension No disability					person in receipt of a		
Please indicate Disability As Please provide evidence of your Disa		pient of Disabil ssed by specia				student with disability	
If you indicated the presence impairment or long-term corthe area(s) from the list: See "Disability Supplement" (at the additional information to assist with	☐ Physion ☐ Learn ☐ Acquir ☐ Disab	□ Vision Impaired □ Hearing Impaired □ Physical □ Intellectual □ Learning Difficulties □ Mental Illness □ Acquired Brain Injury □ Medical Condition □ Disabled Not Defined □ Other					
Standards for Registered T training. Do you require any							
Language (English) Literacy Disability Vision Hearing Impaired Drug/ alcohol education Mental/ sexual/ dental health Resume writing & interview techniques Numeracy Transport Nutrition Nutrition Nutrition Nutrition							
If you are taking medication, will it affect your use of If yes, please list					Yes	□No	
	Will Construction Trade Qualifications require any further information from your doctor, specialist, employment consultant or your family to better assist you?						
		WELFA	RE STATUS				
Are you a Centrelink/Welfar a Dependent child or spous recipient?		Card, Hea	lth Care Card)				ssion card, Pensioner
If you answered Yes above of Welfare/Centrelink Assist of the training program?	ance etc at the start	Yes – recipie	Student is / I ar Student is / I a nt velfare recipie	m a Depe	ire recipie endent ch	nt ild or spouse	e of a welfare
If you answered yes to the a the type of Welfare	above, please specify	Farm Ho Family To	rment (Commonwealth Cusehold Allowance ax Benefit Part A – Maxi er Payment yment (single)				offairs Pensions Children Education Scheme wance

EMPLOYMENT SERVICE PROVIDER					
Are you registered with an Employment Service Provider? Job Active/Disability Employment Service/Disability Management Service Miles in Employment Service Provider Service Pro	☐ Yes ☐ No				
Who is your Employment Service Provider?					
Consultant name & contact details	Name Phone				
	Email				
What is your Jobseeker ID or CRN?					
Did your Employment Service Provider refer you to your Job/Training? If yes what is the referral ID for this Job/Training?	Yes				
What are your assessed work capacity hours/benchmark hours per week?					
Are you long term unemployed? (proof of LTU must be provided to show that you have been unemployed for 52 consecutive weeks or more.)	☐ Yes ☐ No				
	HOOLING AND EDUCATION				
Are you still enrolled in secondary or senior secondary education?	Yes No				
High School Level Completed?	 ☐ Year 12 or equivalent ☐ Year 11 or equivalent ☐ Year 10 or equivalent ☐ Year 9 or equivalent ☐ Year 8 or below ☐ Never attended school 				
High School attended	Tear of below Never attended serious				
In what year did you Complete School eg: 2010?					
Were you Home Schooled?	☐ Yes ☐ No				
Have you SUCCESSFULLY completed any other qualifications at School or since leaving school/turning 17 years of age?	☐ Yes ☐ No				
Qualification Title & Levels Tick level completed	Title of Qualification				
Foundation Certificate I Certificate II Certificate III Certificate IV Certificate IV Diploma Advanced or A Bachelor Degr	r above with Acquired Disabilityssociate Diplomaee or Higher Degree				
Other education (including certificates or overseas qualifications not listed above)					
RECO	OGNITION OF PRIOR LEARNING				
Are you applying for Recognition of Prior Learning OR Credit Transfer?	Yes No				
What experience or qualifications do you have to support your application?					

EMPLOYMENT DETAILS - IF APPLICABLE					
Business Name					
ABN					
Business /Head 0	Office Address				
Workplace/Site A	ddress				
Host Employer Do		If applicable			
Contact Person	uicoo,	парупсавіс			
Contact Email					
Telephone (Bus)			Mobile		
Industry/ Main Ac	tivity				
	F	EES AND CHARGES			
 Prescribed Administration/Student fees may apply to State Funded training programs Concessions/exemptions may apply 		☐ Course Cost/Fee for or ☐ Student /Administrati	-		
Who is responsible for paying the associated Cost/Fee?		☐ Employer ☐ Myself ☐ Job Active Provider ☐ DES Provider ☐ Not applicable			
Payment method	Please check one box below: 1. Credit / Debit Card (See below) 2. Cash - (Direct deposit into banking details below using your full name as a reference) 3. Cheque – (Payable to Construction Trade Qualifications Pty Ltd) 4. Efpos 5. Electronic Funds Transfer (EFT) Institution: Commonwealth Bank Account Name: Construction Trade Qualifications PTY LTD BSB: 062 606 Account Number: 1033 7656				
Credit Card Authority to charge	Please charge the Credit card Par Credit/Debit Card: Authorized amount to ded Amount: Card Type (circle): Credit Card Number: CCV Expiry (Month / Year): Card Holder Name: Card Holders Signature:	Note of the payment amount of the payment am	– Credit card transac		

NSW STUDENT DECLARATION

	RE OF PERSONEL INFORMATION TO THE DEPAR' UNITIES AND OTHER GOVERNMENT AGENCIES	TMENT OF I	EDUCATION &
(First, middle and last Name)			
Of			
Student Identifier, date of birth, contact details, train	formation or an opinion about me), collected from me, my parent or ing outcomes and performance, or sensitive personal information (ted by Construction Trade Qualifications) may be disclosed to the I	including my et	hnicity or health
The Department may disclose my Personal Informa South Wales.	tion to other Australian Government agencies, including those loca	ted in States &	Territories outside New
limited to the evaluation and assessment of my train Concessions. My Personal Information may also be	onal Information for any purpose relating to the exercise of their Goning, the determination of my eligibility to receive subsidised training disclosed to other third parties if required by law. Personal Information in the manner outlined above.	vernment funct g or for any Fee	ion, including but not Exemptions or
I also acknowledge and agree that the Department Construction Trade Qualifications for the purposes Student Legal Name	may contact me by telephone, email or post during or after I have of evaluating and assessing my subsidised training.	eased subsidis	ed training with
Signature of Student		Date:	
	consent, then the consent of their guardian is required	Date.	
Name of guardian	g		
Signature of parent / guardian: (If under 18 years)		Date:	
	PRIVACY INFORMATION		
Privacy Principles set out in the Privacy Amendmen	of participants very seriously and complies with all legislative requint (Enhancing Privacy Protection) Act 2012 and relate to the Privacy pv.au or please consult our Privacy Policy on our website, your par	/ Act 1988.	
Identification If you chose not to provide identification evidence C qualifications.	construction Trade Qualifications may not be able to provide you wi	th training servi	ces or issue appropriate
	nsent to collection, use and disclose of your USI and associated mation will not be shared or disclosed other than as described, waldocuments/privacy-policy		
COMMUNICATION NO	DMINEE – CONSENT TO COMMUNICATE WITH A 1	THIRD PART	ГҮ
I hereby give consent to Construction Trade Qualific	cations the authority to contact my Communication Nominee in the	event of:	
training or	arding a notification or information from my Provider, School or and email, SMS or written correspondence after 3 attempts by CTQ, w		
	☐ Yes ☐ No		
Communication Nominee Name	Contact Phone		
Student Legal Name			

FEES AND REFUNDS POLICY

Date:

All States - Fee for Service Program Delivery, the following will apply:

Signature of Student

- Learners who give notice to cancel their enrolment more than 10 days prior to the commencement of a program will be entitled to a full refund of fees
- Learners who give notice to cancel their enrolment less than 10 days prior to the commencement of a program will be entitled to a 75% refund of fees paid. The amount retained (25%) by CTQ is required to cover the costs of staff and resources which will have already been committed based on the student's initial intention to undertake the training.
- Learners who cancel their enrolment after a training program has commenced will not be entitled to a refund of fees.

NSW Smart & Skilled the following will apply:

When a Student withdraws from a Training/Course after Enrolment the following will apply:

Withdrawal without penalty

Students who withdraw from the Smart and Skilled training program prior to Induction & Commencement of Training will not be invoiced a student fee. The Induction date will be known as the "Withdrawal with no penalty Cut-off Date"

Withdrawn after the cut-off date

A student who withdraws post Induction and Commencement of Training not be Eligible for a Refund of Fees payable, please see Deferring Student Section of the Policy

The student or employer will be provided with a Statement of Fees paid and any refund if applicable.

Deferring Students

A Student may defer their training/course for up to 12 months from your initial enrolment. If a student returns to training within that 12month period a new Smart and Skilled Fee will not be charged.

If you do not return to your training/course within that 12 month period, you will be reassessed via NSW Smart and Skilled to determine the appropriate fee at the time of your new enrolment.

Discontinuing Students - students who have withdrawn, cancelled or been ceased traineeship/apprenticeship employment.

Where a student is unable complete their Training/Course due to Provider closure or where the provider is unable to continue to deliver Smart and Skilled a refund based on % of qualification yet to be completed, will refunded.

NOTE – Withdrawal from a course/training program or Traineeship/Apprenticeship must be made in writing to Construction Trade Qualifications - admin@ctq.edu.au

ALL STUDENTS – PRIVACY STATEMENT AND STUDENT DECLARATION

Why we collect your personal information

As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us. Should you not provide personal information you will not be able to enrol as a student.

How we use your personal information

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

How we disclose your personal information

We are required by law (under the *National Vocational Education and Training Regulator Act 2011* (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

How the NCVER and other bodies handle your personal information

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the *Privacy Act* 1988 (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market. The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (DESE), Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation
- · facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at www.ncver.edu.au/privacy. If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below. DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how the DESE will handle your personal information, please refer to the DESE VET Privacy Notice at

https://www.dese.gov.au/national-vet-data/vet-privacy-notice.

Surveys

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

Contact information

At any time, you may contact Construction Trade Qualifications to:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

Student Declaration and Consent

- I declare that the information I have provided to the best of my knowledge is true and correct.
- I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above
- I hereby release my Unique Student Identifier (USI) Number to Construction Trade Qualifications for the purpose of reporting to the Student Identifiers Registrar

I declare that I have received information about the qualification, training course or program and wish to enrol in this training.

Student Legal Name

Signature of Student

Date:

Signature of parent / guardian (If under 18 years)

Date:

EMPLOYER DECLARATION – IF APPLICABLE

- I understand that Construction Trade Qualifications will provide training to my employee and seek my input and contribution throughout the
 duration.
- I understand and acknowledge that Construction Trade Qualifications will not issue any qualification or Statement of Attainment until associated fees have been paid and I confirm that all information supplied by me is true and correct.

rees have been paid and i commin that all information supplied by the is true and correct.				
Company Name:		Company Contact:		
Signature:		Date:		