

Enrolment Form 2017

Qualification								
Course Code:								
USI No:(if know	rn)							
VSN No:(if know	vn)	Course C	ommencement D	ate:				
	☐ Trainee ☐ Gen	eral (not Apprentic	ce/Trainee)	□ F	ee for ser	vice	□ SI	hort Course
		PERSO	NALDETAILS					
Surname		Middle Name			Given Name/s			
Title (Please tick) □Mr	□Mrs □Miss □ Ms	Gender □ Mal	le 🗆 Female		Date	of Birth	/	1
,		POST	ALADDRESS					
Address								
Suburb				State	VIC	Post Code	е	
Home Phone		Work		Mobile				
Postal Address (if different to home addres							
Address		,		State		Post Code	Э	
Suburb								
Email								
	L	ANGUAGE AND	CULTURAL DIV	/ERSITY	,			
Were you born in	n Australia? □ Yes □ N							
-	own / City of birth?	e (piedes speeily					_	
Do you speak a	language other than English	n at home?	lo English only	□ Yes -	Please sp	ecify		
How well do you	speak English? □ Very V	Vell □ Well	□ Not Well □	Not at All	I			
Are you of Aborig	ginal or Torres Strait Island	ler Origin? For per	rsons of both Aborig	inal and To	orres Strait	Islander origi	n, mark b	oth 'Yes'
□ No								
☐ Yes, Abori	-							
Yes, Torres Strait Islander								
DISABILITY								
Do you conside	r yourself to have a disabilit	ty, impairment or	long-term conditi	ion? □ N	o □ Yes (If Yes, then	please i	ndicate
the areas of disa	ability, impairment or long	term condition.)	You may indicate	e more th	nan one ai	rea		
☐ Acquired brain impairment ☐ Hearing/deaf ☐ Intellectual ☐ Learning ☐ Medical condition						ndition		
☐ Mental illness	□ Ph	ysical	☐ Vision		Other			
Do you require s	special assistance? No	☐ Yes (if yes pl	lease specify)					
EMERGENCY CONTACT								
Name								
Relationship	Mother □ Father □ Sibling □ Spouse/ Partner □ Guardian □ Other please specify □							
Telephone								
Home		Work		Mobile				
SCHOOLING								
What is your highest COMPLETED School level? (Tick ONE box only.)								
☐ Completed Year 12 ☐ Completed Year 10 ☐ Completed Year 8				ear 8 or	Lower			
☐ Completed Ye	ar 11	☐ Completed Ye	ear 9 or equivaler	nt		Never attend		
Name of the most recent school attended								
In which year did you complete that School level?Are you still attending secondary school? ☐ Yes ☐ No								

		PREV	/IOUS QUALIFICATION	ONS ACHIEVED			
Have	e you SUCCESS	FULLY completed any of the	e following qualification	s? \square No \square Yes (If Yes, tick ALL applicable boxes)			
	Bachelor Degree	ee or Higher Degree Certificate IV (or Advanced Certificate II					
	Advanced Diplo	oloma or Associate Degree					
	Diploma (or Asso	ociate Diploma)	Certificate III (C	☐ Certificates other than above			
			EMPLOYMEN	т			
Of th	ne following cate	gories, which BEST describ	es your employment	situation? (Tick ONE box only)			
	Employed - dispate worker in a family business						
	Casual employ	ee - not employing others		Unemployed - seeking full-time work			
	Employer	· not employing others		Unemployed - seeking part-time work			
	р.о, о.			Not employed - not seeking employment			
Date	e employment C	ommenced//_					
Of th	ne following cate	gories, which BEST descrit	es your main reason	for undertaking this course? (Tick one box only.)			
			get a better job or proi	9			
	To start my owr	n business	as a requirement of m	y job			
Othe	er, please specify						
			PERSONAL IDENTIF	ICATION			
Pei	rsonal Identifica	ation					
То	create a USI, yo	u will need to provide Apex	HR will <i>ONE</i> valid A	ustralian form of ID from the list below:			
Dri	vers Licence	State:	Licence Nu	mber:			
Med	dicare Card	Medicare Card Number:		Expiry Date:			
		Individual	010-	January.			
		Reference Number:	Card Co	olour:			
Aus	stralian	Document Number:					
Pas	sport	Document Number: Visa (with Non-Australian Passport) for international students					
		Passport Number: Country of Issue:					
		Passport Number.		Country of 133de.			
Rin	th Certificate (A	ustralian) *Please note a Birth	Cortificate extract is not su	fficient			
5	in oci imodic (7	,		moon			
		State:					
Are you a dependant of, or hold one of the following current concession cards? Attach a copy of your concession card (must include signature panel, name, CRN and current expiry date)							
	Health Care Car		sion Card □ Verte	ran Gold Card Expiry Date:			
TUITION COURSES AND FEES Please refer to the Fees and Charges Policy for current course fees on www.apexhr.com.au							
Co	urse Fee: \$	+ Resourc	es: \$	= Total Enrolment Fee: \$			
PAYMENT METHOD							
BY DIRECT CREDIT BY CHEQUE / MONEY ORDER BY CREDIT CARD							
	on fees to be paid		and money orders mad				
	account:	payable to <i>A</i> nan Resources P/L æ) å / j[• o	∖pex Human Resource: ∱åÁt Á\nex HR	Ôæ¦åÁÞÌ KÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁÁ			
	033341 Account	No:344048 PO BOX 202	2, Chadstone Centre,	Ôælå ÁKÁK QÙ OÆLÁT Ô ÁWWW OE [* } cÁE ÁB^ÁS @æl*^å KÁÅÁ ′ ′ ′ ′ ′ ′ ′			
		Chadstone V	/IC 3148	Ùat}æci/^kká//////////////////////////////////			

Enrolment Pack 2017

Version 14

Created – Jan 2017 Review – Dec 2017

Page 2 of 10

		PAYMENT SCHEDU	LE
A deposit is required prior to d	course commencement and	progress payment is due a	as indicated below.
Deposit \$	on sign up.	Instalments	Date
		\$	1 Month after commencement
		\$	3 Months after commencement
		\$	On completion
		DECLARATION	
provide in this enrolment form (which are available at http://	Information is required to www.skills.vic.gov.au/corpo	be provided in accordance rate/providers/data-collect	student and training activity data which may include information I be with the Victorian VET Student Statistical Collection Guidelines tion)
^•^#&&@\$#\$&@\$#\$#\$#########################	a) å Án, co@ ¦Ápeç ~ Á,`*][•^•Êóo Ása) å Đ, lÁp co@ ¦Áp, l* æa) ãr æasā[}•Èó ^-{¦{ ÁDB cÁC⊖∈Ô Á^` ã^•ÁDE, r	@ÁÖ^]ædd(^}dÁ(æ∂Áe∳[Áa Á ^¢Á?ÜÁ(Á&[∥^&óÁe)åÁaã&4[ā& [•^為
%¦ÁÁ (@æ ç,^Á\^æåÁse) åÁ\}å^¦∙d[å	\$a; å.48[}•^}d4[Åæ.4Å; åā;æ.8£.4Å; å.^å.4ã; Áq.4å@.4å.^•d4; 4Å.2[,	[c28x^Ása)åÁ@eq;^Ás[{] ^c^åÁ	() / k/@ /x/a&d lãne) ÁÜc å^}c/ÁÜ/*ãrc^lÈ Ánd/Á*^•cō[}•Áne) å/Án^cœō(*Án) /k/@ /án} ¦[{ ^}c/Áne) å eligibility forms. [] ^c^ÁneAr@ Ánō(^Án-Án^Án} ¦[{ ^}c/Ánō(An) * Áno-f¦ { ænō(}}Án, ¦[çãn^åÁ
" I understand the terms of th conditions of enrolment and ag located on www.apexhr.com.au (" 伯德森 Án an Án an Án	s written agreement and the ree for my employee identific u. I agree to pay all fees and Á Á Á Á Á Á Á Á Á Á Á Á Á Á Á Á Á Á Á	ed in this agreement to be a charges according to the p 编[[\È <•••Á颂梅♂:}^ó4;] (4, ^ pa	
" T^Ájæda&Ajæaáj}ÁsjÁso&Ás[+"OÁS[}-å{Áso@cóÓA@cç^Ás^^}Ásj student at OE_^¢ÆPÜÈ	-		ˈæṭær^&{`¦•^•^4,1,4& æ••^•EA ç&&^•Áq:Áa^Án;¦[çãa^åÉaba}åÁanà[ĭoÁ; ^Á.21@o•Ána)åÁ;à 21ænaã;}•Ána•ÁnaÁ
, "OÁnĕcoQ¦ãr^ÁOUţ^¢ÁrÜÁş¦ÁnōrÁnd be&[}cæ&c^åÁşñaoQhÁ^æe[}æa	a ^Ásã(^Êá(Á^^\Ása(à` æ)&^Ê	Á ^å&&æhÁ¦lÁ*¦*&&æhÁs^æ{ ^}	ÁPÜÁ;¦*æ);ã^åÁnæ&oã;ã°Éæn)åÁ;@¦^Án{^¦*^}&°Á&[}cæ&oA^¢oA;Áná;Ásæ)}[oÁ ∤oÁnæÁ;^Á&[•cÈ [}*ã;*Ás[ÁCE;^¢ÁPÜÁ@e•Án^>}Á^č¦}^åÈ
10"I understand if I do not alrea		entifier (USI) and I want Ap	pex HR to apply for a USI to the Student Identifiers Registrar on my
	est or given name(s), middle pears, if shown, in the chose		r family name as they appear in an identification document;
Country of birth;Gender; and		Á	
 Contact details. 			
Student Signature:			Date://
		Parent / Guarian (Only for students u	
Parent / Guardian Name			Contact Number :
Parent / Guardian Signat	ure:		Date:/

Version 14

VICTORIAN TRAINING GUARANTEE 2017 EVIDENCE OF STUDENT ELIGIBILITY AND STUDENT DECLARATION

Section A - To be completed by an authorised delegate of the RTO

Evidence of citizenship/residency and age				
I confirm that in relation to(Student's full name)				
I have sighted one of the following:				
an Australian Birth Certificate (not Birth Extract)				
a current New Zealand Passport a naturalisation certificate				
a signed declaration by a relevant referee a current <i>green</i> Medicare Card				
☐ formal documentation issued by the Australian Department of Immigration and Citizenship confirming permanent residence and if the student's age is relevant to their eligibility and the document produced from the list above does not include a date of birth: ☐ a current drivers licence, or ☐ a current learner permit, or ☐ a Proof of Age card, or ☐ a 'Keypass' card				
Section B - To be completed by the student				
Education history				
Q1. The highest qualification I have completed is:				
(Include full title of qualification, eg. Certificate III in Aged Care)				
Q2. Not including the course/s you are seeking to enrol in now, how many other government subsidised courses have you enrolled to undertake this year? Include training you have enrolled in to undertake at this and other training providers but not yet started.				
0 1 2 3 4+ (circle number)				
Q3. Not including the course/s you are seeking to enrol in now, how many other government subsidised courses are you undertaking training in at the moment?				
0 1 2 3 4+ (circle number)				
Q4. In your lifetime, how many government subsidised courses have you started (commenced) that are at the same level as the one you are applying for now? Don't answer this question if you are seeking to enrol in a course on the Foundation Skills List.				
0 1 2 3 4+ (circle number)				
Student declaration				
I, in seeking to enrol in (Student's full name)				
(Include full title of qualification/s in which you are seeking to enrol)				
declare the following to be true and accurate statements:				
a. I AM / AM NOT enrolled in a school, including government, non-government, independent, Catholic or home school. (circle appropriate response)				
b. I AM / AM NOT enrolled in the Commonwealth Government's Skills for Education and Employment program.(circle appropriate response):				
c. I understand that my enrolment in the above qualification/s may be subsidised by the Victorian and Commonwealth Governments under the Victorian Training Guarantee. I understand that enrolling in the above qualification/s may affect my future training options and eligibility for further government subsidised training under the Victorian Training Guarantee.				
Signed: Date:				

VICTORIAN TRAINING GUARANTEE 2017 EVIDENCE OF STUDENT ELIGIBILITY AND STUDENT DECLARATION

Section C - To be completed by an authorised delegate of the RTO

Number of courses stude	ent is currently eligible for: 1 2				
RTO declaration	<u> </u>				
the student in Section B or	Based on discussion with the student, the above evidence I have sighted in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the following qualification/s:				
	(Include full title of qualification/s in which the student is seeking to enrol)				
Authorised RTO delegate:					
Name:					
Position:					
Signed:	Date:				
	o record additional, relevant eligibility information, including information used by the RTO to verify the s not captured in Sections A, B or C.				

Version 14

My Learning Action Plan			
Participant Name:	Date:		
Apex HR Rep Name:			
This Action plan is to be completed by	by you and your <i>i</i>	Apex HR representative prior to enrolling in a cour	·se.
It helps us to help you through your leac capabilities.	irning journey by a	llowing us to understand your individual learning	
This Action Plan helps you to focus on to achieve what you want relating to edu		n for the future. It helps you to work out how you are	going
This Learning Action Plan lets you wor preferred career option.	k out your educati	on and career capabilities and how they relate to yo	ur
General Questions			
My personal career goals are:			
Short Term:			
Long Term:			
My Skills and Attributes			
Tick the top 3 that best describes you	r skills	Tick the top 3 attributes that best describes you	
Team work		Loyalty	
Communication		Commitment	
Problem-solving		Honesty and integrity	
Initiation and enterprise		Enthusiasm	
Planning and organising		Reliability	
Self-management		Personal presentation	
Learning		Commonsense	
Technology		Positive self-esteem	
Technical Abilities		Sense of humor	
Creativity		Balanced attitude to work and home life	
Leadership		Ability to deal with pressure	
Listening		Motivation	
Investigating / Analysing		Adaptability	

My Learning Action Plan

My Learning Style

What is a learning style?

Learning styles are simply different approaches or ways of learning

What are the types of learning styles?

Visual Learners:

Learn through seeing...

These learners need to see the teacher's body language and facial expression to fully understand the content of a lesson. They tend to prefer sitting at the front of the classroom to avoid visual obstructions (e.g. people's heads). They may think in pictures and learn best from visual displays including: diagrams, illustrated text books, overhead transparencies, videos, flipcharts and hand-outs. During a lecture or classroom discussion, visual learners of prefer to take detailed notes to absorb the information.

Auditory Learners:

Learn through listening...

They learn best through verbal lectures, discussions, talking things through and listening to what others have to say. Auditory learners interpret the underlying meanings of speech through listening to tone of voice, pitch, speed and other nuances. Written information may have little meaning until it is heard. These learners often benefit from reading text aloud and using a tape recorder.

Tactile/ Kinaesthetic Learners:

Learn through moving, doing and touching...

Tactile/ Kinaesthetic learners learn best through a hands-on approach, actively exploring the physical world around

exploration.
The style that best suits my learning style is:
My Style, My Journey
Based on my preferred learning style, I can help myself to successfully complete training by:
Based on my preferred learning style, you can help me complete my training by:
The Good, the bad and the ugly of my past learning experiences
In my past learning, the really good things were:

Based on your past experience, how can we help you to successfully reach your learning goals:

In my past learning, the things I didn't like were:

My Learning Action Plan

nal and professional benefits for me after completing this course
now, my learning journey might be impacted by the following things in my personal life e.g.
commitments, family, sporting commitments, etc
commitments, family, sporting commitments, etc ional comments/considerations
ional comments/considerations d on the information provided to me in the Program Overview, I agree that (please tick):
d on the information provided to me in the Program Overview, I agree that (please tick): ourse delivery mode is suitable for me
ional comments/considerations d on the information provided to me in the Program Overview, I agree that (please tick):
d on the information provided to me in the Program Overview, I agree that (please tick): ourse delivery mode is suitable for me
d on the information provided to me in the Program Overview, I agree that (please tick): ourse delivery mode is suitable for me pe able to attend for the full duration of the course
d on the information provided to me in the Program Overview, I agree that (please tick): ourse delivery mode is suitable for me be able to attend for the full duration of the course commit to the extra study hours suggested
d on the information provided to me in the Program Overview, I agree that (please tick): ourse delivery mode is suitable for me pe able to attend for the full duration of the course commit to the extra study hours suggested who to contact if I am struggling with any aspect of the course concerned about the following things that might prevent me from progressing through this
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d on the information provided to me in the Program Overview, I agree that (please tick): ourse delivery mode is suitable for me pe able to attend for the full duration of the course commit to the extra study hours suggested who to contact if I am struggling with any aspect of the course concerned about the following things that might prevent me from progressing through this

Next Steps

- Please keep a copy of this action plan in a safe place so that you can refer to it throughout your learning journey.
- Your Facilitator will work with you to build the most suitable training plan utilising the information in your Learning Action Plan and Pre-training review.

LANGUAGE, LITERACY AND NUMERACY CERTIFICATE I TO II ONLY

GRAMMAR					
Finish these sentences by ticking the box next to the correct word.					
There isn't food left in t	the refrigerator.		any		some
Sam bought a lot of	for his new apartment.		new furniture		new furnitures
Jill gave Jack advic	e about climbing hills.		many		some
How money do you			many		
			•		
Rick speaks English very			good		
Only one of the below senten	ces is correctly worded.	Tick t	he box next to the o	correct	sentence.
\square 50,000 people have particip	pated in the fun run held	l in Me	elbourne last month	١.	
☐ 50,000 people were particip	pated in the fun run held	in Me	elbourne last month		
☐ 50,000 people was particip	ated in the fun run held	in Mel	bourne last month.		
CALCULATIONS					
Calculate the following:					
26 + 34 = \$7.70 + \$2	2.75 = \$ 30 -	19 =_	<u> </u>	13.75	= \$ 12 x 3=
John is paid \$21.50 per hour,	this week he worked 4	nours.			
How much will he get paid? T	ick the box next to the c	orrect	answer below.		
□ \$55.00 □ \$86.00	□ \$82.50 □ \$	70.00			
Tina has 19 class mates in he bus and the rest drive their ov		o get	to class, eight class	s mate	s catch the train, five class mates catch a
How many of Tina's class mates drive their own car?					
Most airlines calculate the size of bags by using this formula: size = (length + depth + height)					
If the size limit for each bag is 110 cm, which passenger from the list below will be over?					
Circle your answer/s					
Passenger	Length (cm)		Depth	(cm)	Height (cm)
Mr Thompson	30		4	0	40
Mrs McFadden	40		2	0	60
Miss Stewart	50		2	0	30
Mr Smith 60 10 45				45	
SPELLING					
Please tick the box with the correct spelling of the word for each line.					
☐ ingredint	. □ ingred				ingrediant
□ roster	□ rosta				rostar
□ producshen	□ produ	cton			production

reciete

reciept

receipt

PART 2

LANGUAGE, LITERACY AND NUMERACY CERTIFICATE IV AND DIPLOMA (MUST COMPLETE PART 1 AND 2)

SURVEY		
Briefly explain wha	t you enjoy about your job or study.	
		. faller vin a denice
	write at least two brief paragraphs on one of the	
	rson in your life who has mentored, trained or c	
b) Where do you se	ee your career going in the next 3 years, and wil	Il this qualification help you?
DECLARATION		
This review was co	nducted prior to training commencing and outco	mes were discussed between the trainer and student.
Signed by student		Date/
		
Signed by trainer		/ Date//
TRAINER USE ONL	Y	
	LLN Assess	ement
Assessment Area	Assessment Outcome	Assessor / Recommendations
	☐ Suitable level for this program	
Language	☐ May require support☐ Unsuitable for program	
	☐ Suitable level for this program	
Literacy	☐ May require support	
Numeracy	☐ Suitable level for this program☐ May require support	
,	☐ Unsuitable for program	
	ired to be delivery and / or assessment strate elete detail in Assessor / Recommendations.	gy for this student? Yes No
f Yes, have these a	Iterations been communicated to the student	and / or workplace supervisor (if Applicable)? □ Yes □ No