

Complete all relevant sections in this form and provide all requested information in each section. Type your responses or use clear, legible handwriting on a printed version. Incomplete or unclear enrolment details may delay the issue of certification.

Complete, sign and date the form and return to [training@enertrain.com.au](mailto:training@enertrain.com.au) for processing.

## SECTION 1. PERSONAL DETAILS

Have you previously completed a nationally accredited program with EnerTrain?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT SURE
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If YES, provide your Name and Date of Birth in this section and any details that have changed since your last enrolment.

### 1. Full name used for your Unique Student Identifier (USI) including any middle names.

If you do not have a USI and want EnerTrain to apply for a USI on your behalf, you must write your name, including any middle names, exactly as they appear in the identity document in Section 7.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Dr <input type="checkbox"/> Other (specify):		
Given names (first name)			
Family name (last name/surname)			
Middle names (if applicable)		Preferred name (if different to above)	

### 2. Date of birth

day/month/year as DD / MM / YYYY	/	/
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### 3. Gender (Tick ONE only)

<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other
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### 4. Contact details

Work mobile		Personal mobile	
Work phone	( )	Home phone	( )
Work email		Personal email	

### 5. Address of your usual residence

Street number and name			
Suburb, locality or town			
State/Territory		Postcode	

### 6. Postal address (ONLY if different from above)

PO Box and Suburb			
State/Territory		Postcode	

### NEXT OF KIN / EMERGENCY CONTACT

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other (specify):	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Full name		Relationship to you	
Home address			

# Student Accredited Program Enrolment Form



Home phone	(    )	Mobile	
Email			

## SECTION 2. UNIQUE STUDENT IDENTIFIER (USI)

### 7. Enter your USI - please write clearly

If you don't have a USI and would like EnerTrain to create one for you, make sure you complete Section 7.

EnerTrain can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your program if you do not have a USI. If you do not yet have a USI you can apply for it at <http://www.usi.gov.au/create-your-USI/>. Note that if you specify your gender as 'other' you will need to contact the USI Office for assistance.

## SECTION 3. EMPLOYMENT / INDUSTRY

If you are a previous student, provide your employer's name and only any details that have changed since your last enrolment.

Your employer			
Employer address			
Your work title			
Supervisor name		Supervisor work title	
Supervisor email		Supervisor mobile	
Gas network(s) you will be working on	<input type="checkbox"/> APA <input type="checkbox"/> ATCO Gas <input type="checkbox"/> AusNet <input type="checkbox"/> Jemena <input type="checkbox"/> Multinet <input type="checkbox"/> Tas Gas <input type="checkbox"/> Other:		
Construction Induction Card Number		Issue Date	
Gas Passport Number		<input type="checkbox"/> NSW <input type="checkbox"/> VIC	

You may be required to present your Construction Induction Card and Passport as part of your enrolment.

## SECTION 4. YOUR PROGRAM

All students must complete this section.

Qualification (select ONE)	<input type="checkbox"/> UEG20114 Certificate II in Gas Supply Industry Operations <input type="checkbox"/> UEG30114 Certificate III in Gas Supply Industry Operations <input type="checkbox"/> UEG40114 Certificate IV in Gas Supply Industry Operations <input type="checkbox"/> BSB41415 Certificate IV in Work Health and Safety		
Program type (select ONE)	<input type="checkbox"/> Full Qualification <input type="checkbox"/> Partial Qualification (i.e. Units of Competency resulting in a Statement of Attainment)	Completion pathways (select as many as applicable)	<input type="checkbox"/> Training <input type="checkbox"/> Assessment <input type="checkbox"/> RPL <input type="checkbox"/> Credit Transfer
Program start date			
Program location	<input type="checkbox"/> EnerTrain Training Centre - NSW (Jemena Learning Centre - Pemulwuy NSW) <input type="checkbox"/> EnerTrain Training Centre - VIC <input type="checkbox"/> Other EnerTrain training venue (specify): <input type="checkbox"/> Employer workplace (specify address):		

List the codes for all program units you will achieve via **CREDIT TRANSFER**. These are units you already hold that were issued by EnerTrain or another training provider. Ensure you have confirmed these units with EnerTrain prior to enrolment and are able to provide verifiable certificates or cards after enrolment as requested. EnerTrain will not be delivering these units in this program so they are not included in the agreed program price.

1.	2.	3.	4.
5.	6.	7.	8.
9.	10.	11.	12.
13.	14.	15.	16.
17.	18.	19.	20.
21.	22.	23.	24.
25.	26.	27.	28.
29.	30.	31.	32.

List the codes for all program units you will complete via **training, assessment and/or RPL delivered by EnerTrain**. Ensure you have confirmed these units with EnerTrain prior to enrolment. As these units will be delivered by EnerTrain they are included in the agreed program price.

1.	2.	3.	4.
5.	6.	7.	8.
9.	10.	11.	12.
13.	14.	15.	16.
17.	18.	19.	20.
21.	22.	23.	24.
25.	26.	27.	28.
29.	30.	31.	32.

I am aware of, and will be able to meet all program pre-requisites  Yes  No  N/A

What outcomes would you like to achieve from this program?

Who will pay the program fees?  Student  Student's Employer

Person invoice to be sent to (if employer is paying)

Email invoice to be sent to (if employer is paying)

## RPL programs only

I had an interview with an EnerTrain assessor to establish my eligibility for RPL.  Yes  No  N/A

Name of EnerTrain assessor

Interview date

I am providing completed 'RPL Evidence Matrix' with this enrolment form. (if applicable - see RPL Kit at <https://www.enertrain.com.au/RPL>)

Yes  No  N/A

## SECTION 5. PRIVACY STATEMENT & DECLARATION

All students must complete this section.

### PRIVACY NOTICE

Under the *Data Provision Requirements 2012*, EnerTrain is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER). Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by EnerTrain for statistical, regulatory and research purposes. EnerTrain may disclose your personal information for these purposes to third parties, including:

- School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Employer – if you are enrolled in training paid by your employer;
- 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 qualifications, 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](http://www.ncver.edu.au)).

### DECLARATION AND CONSENT

I declare that the information I have provided in this enrolment form, 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.

<b>Student signature</b>		<b>Date</b>	
<b>Parent/Guardian signature*</b>		<b>Date</b>	

\*Parental/guardian consent is required for students under the age of 18.

I have discussed my learning needs with EnerTrain.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Organised by my employer
Name of the person I consulted with:	
I have been provided with sufficient and adequate information about this program, access to the <a href="#">Student Handbook</a> and assessment instructions, and my rights and responsibilities as a student, to make an informed choice about my learning.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I agree to the EnerTrain <a href="#">Terms and Conditions</a> for accredited programs.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I agree to pay all program fees including any applicable enrolment deposit and non-refundable administration fee, according to the relevant payment schedule.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Paid by my employer
I give EnerTrain permission to provide my employer with an electronic copy of any AQF certificates I achieve from this program, at the time of issue.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
I give permission for EnerTrain to provide my email to the National VET Regulator to complete an online survey about my study experience with EnerTrain. (see FactSheet at <a href="https://www.asqa.gov.au/news-publications/publications/fact-sheets/student-surveys">https://www.asqa.gov.au/news-publications/publications/fact-sheets/student-surveys</a> )	<input type="checkbox"/> Yes <input type="checkbox"/> No
I give permission to be contacted about further study opportunities with EnerTrain.	<input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION 6. AVETMISS

The following section collects statistical data for mandatory Government reporting about Vocational Education and Training. Your details are anonymous when this data is submitted.

If you are a new student, please complete all questions. If you are a previous student, only provide AVETMISS details that have changed since your last enrolment.

### 8. In which country were you born?

- Australia  Other – specify \_\_\_\_\_

### 9. Do you speak a language other than English at home?

If you speak more than one other language, indicate the one that is spoken most often.

- No, English only  Yes, other – specify \_\_\_\_\_

### 10. Are you of Aboriginal or Torres Strait Islander origin?

For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes.

- No  Yes, Aboriginal  Yes, Torres Strait Islander

### 11. Do you consider yourself to have a disability, impairment or long-term condition?

- Yes  No - Go to question 13

### 12. If you indicated the presence of a disability, impairment or long-term condition in Question 11, select the areas in the following list. (Select as many as apply)

- |                                       |  |  |
|---------------------------------------|--|--|
| <input type="checkbox"/> Hearing/deaf | <input type="checkbox"/> Mental illness            | <input type="checkbox"/> Learning          |
| <input type="checkbox"/> Physical     | <input type="checkbox"/> Acquired brain impairment | <input type="checkbox"/> Medical condition |
| <input type="checkbox"/> Intellectual | <input type="checkbox"/> Vision                    | <input type="checkbox"/> Other             |

### 13. What is your highest COMPLETED school level? (Select ONE only)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Year 12 or equivalent | <input type="checkbox"/> Year 10 or equivalent | <input type="checkbox"/> Year 8 or below                           |
| <input type="checkbox"/> Year 11 or equivalent | <input type="checkbox"/> Year 9 or equivalent  | <input type="checkbox"/> Never attended school - Go to question 15 |

### 14. Are you still enrolled in secondary or senior secondary education?

- Yes  No

### 15. Have you successfully COMPLETED any of the qualifications listed in question 16?

- Yes  No - Go to question 17

### 16. If YES, tick ANY applicable.

- |  |   |
|--|---|
| <input type="checkbox"/> Bachelor degree or higher degree                    | <input type="checkbox"/> Certificate III (or trade certificate)                 |
| <input type="checkbox"/> Advanced diploma or associate degree                | <input type="checkbox"/> Certificate II   |
| <input type="checkbox"/> Diploma (or associate diploma)                      | <input type="checkbox"/> Certificate I  |
| <input type="checkbox"/> Certificate IV (or advanced certificate/technician) | <input type="checkbox"/> Other education (including or overseas qualifications) |

### 17. Which category BEST describes your current employment status? (Select ONE only)

- |   |  |
|---|--|
| <input type="checkbox"/> Full-time employee                   | <input type="checkbox"/> Employed – unpaid worker in a family business |
| <input type="checkbox"/> Part-time employee                   | <input type="checkbox"/> Unemployed – seeking full-time work           |
| <input type="checkbox"/> Self employed – not employing others | <input type="checkbox"/> Unemployed – seeking part-time work           |
| <input type="checkbox"/> Self employed – employing others     | <input type="checkbox"/> Not employed – not seeking employment         |

### 18. Which category BEST describes the main reason you are undertaking this program? (Select ONE only)

- |   |  |
|---|--|
| <input type="checkbox"/> To get a job                     | <input type="checkbox"/> It was a requirement of my job            |
| <input type="checkbox"/> To develop my existing business  | <input type="checkbox"/> I wanted extra skills for my job          |
| <input type="checkbox"/> To start my own business         | <input type="checkbox"/> To get into another course of study       |
| <input type="checkbox"/> To try for a different career    | <input type="checkbox"/> For personal interest or self-development |
| <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> Other reasons                             |

## SECTION 7. USI Creation by EnerTrain ONLY

ONLY complete this section if you do not have a USI and would like EnerTrain to create one for you.

If you would like EnerTrain to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>.

I [INSERT STUDENT NAME] ..... authorise ENERTRAIN to apply, pursuant to sub-section 9(2) of the <i>Student Identifiers Act 2014</i> , for a USI, on my behalf.  <input checked="" type="checkbox"/> I have read and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed at <a href="https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf">https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf</a> .	
Town/City of Birth	

Provide details for ONLY ONE (1) form of identity document below. Ensure your name in Section 1 of this form is exactly the same as in the identify document below.

In accordance with section 11 of the *Student Identifiers Act 2014*, EnerTrain will securely destroy personal information we collect from individuals solely for the purpose of applying for a USI on their behalf as soon as practicable after we have made the application or the information is no longer needed for that purpose.

### 1. Australian Driver's Licence

State	Licence number
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### 2. Medicare Card

Medicare card number	Individual reference number (next to your name on your Medicare card)															
Card colour (select which applies)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px;"><input type="checkbox"/> Green</td> <td style="width: 30%; padding: 5px;">Expiry date (month/year as MM / YYYY)</td> <td style="width: 10%; padding: 5px;"></td> <td style="width: 10%; padding: 5px;">/</td> <td style="width: 30%; padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Yellow</td> <td style="padding: 5px;">Expiry date (month/year as MM / YYYY)</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">/</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Blue</td> <td style="padding: 5px;">Expiry date (month/year as MM / YYYY)</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">/</td> <td style="padding: 5px;"></td> </tr> </table>	<input type="checkbox"/> Green	Expiry date (month/year as MM / YYYY)		/		<input type="checkbox"/> Yellow	Expiry date (month/year as MM / YYYY)		/		<input type="checkbox"/> Blue	Expiry date (month/year as MM / YYYY)		/	
<input type="checkbox"/> Green	Expiry date (month/year as MM / YYYY)		/													
<input type="checkbox"/> Yellow	Expiry date (month/year as MM / YYYY)		/													
<input type="checkbox"/> Blue	Expiry date (month/year as MM / YYYY)		/													

### 3. Australian Birth Certificate

Details for birth certificates vary according to the State/Territory. Visit <https://www.usi.gov.au/about/forms-id/birth-certificate-australian> before completing the information below.

State/Territory (where birth was registered)					
Certificate No.		Registration No.			
Registration date		Registration year		Date printed	

### 4. Australian Passport

Passport number			
Passport number		Country of issue	
Immicard number			

### 5. Non-Australian Passport (with Australian Visa)

### 6. Immicard

### 7. Citizenship Certificate

Stock number	Acquisition date	/	/	
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### 8. Certificate of Registration by Descent

Acquisition date	/	/	
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