

## APPLICATION FOR ENROLMENT FORM

### About this form

Thank you for your interest in seeking enrolment into Australian Pacific International College. This application for enrolment form must be completed in English. If you require any assistance in completing this form, please contact us by phone or email.

You can send this form to us by post or email. Please provide a copy of your passport, your visa (if relevant), your High School Certificate, proof of English language proficiency as specified in the entry requirements and any other requested documents referred to in the course brochure.

**Tick the correct option:**

**Overseas student (Offshore)**

**Overseas student in Australia (Onshore)**

**Resident student (Domestic)**

### AGENT DETAILS (if applicable)

<b>Organisation Name:</b>			
<b>Representative Person:</b>			
<b>Tel/Mobile No:</b>		<b>Email:</b>	

### COURSE YOU WISH TO ENROL IN

<input type="checkbox"/>	SIT40521 Certificate IV in Kitchen Management <small>(CRICOS Course Code: 109615H)</small>	<input type="checkbox"/>	SIT50422 Diploma of Hospitality Management <small>(CRICOS Course Code: 111008B)</small>
<input type="checkbox"/>	SIT60322 Advanced Diploma of Hospitality Management <small>(CRICOS Course Code: 115497C)</small>		
<input type="checkbox"/>	BSB40520 Certificate IV in Leadership and Management <small>(CRICOS Course Code: 113730D)</small>	<input type="checkbox"/>	BSB50420 Diploma of Leadership and Management <small>(CRICOS Course Code: 108375E)</small>
<input type="checkbox"/>	BSB60420 Advanced Diploma of Leadership and Management <small>(CRICOS Course Code: 108376D)</small>		
<input type="checkbox"/>	ICT50220 Diploma of Information Technology <small>(CRICOS Course Code: 113732B)</small>	<input type="checkbox"/>	ICT60220 Advanced Diploma of Information Technology <small>(CRICOS Course Code: 113733A)</small>
<input type="checkbox"/>	BSB50820 Diploma of Project Management <small>(CRICOS Course Code: 113731C)</small>		
<input type="checkbox"/>	BSB80120 Graduate Diploma of Management (Learning) <small>(CRICOS Course Code: 113734M)</small>		
<input type="checkbox"/>	CPC30220 Certificate III in Carpentry <small>(CRICOS Course Code: 119395K)</small>	<input type="checkbox"/>	CPC30620 Certificate III in Painting and Decorating <small>(CRICOS Course Code: 119394M)</small>
<b>Requested Start Date:</b>	<b>Date:</b>	<b>Month:</b>	<b>Year:</b>

### STUDENT DETAILS

<b>Given name/s.</b> (incl. Middle name if any)			
<b>Surname:</b>			
<b>Preferred Name:</b>			
<b>Date of Birth:</b>		<b>Gender:</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other

“Your College. Your Future.”

<b>Place of Birth:</b>		<b>Country of Birth:</b>	
<b>Current residential address:</b>			
<i>Please provide the physical address (street number and name –not post-office box) where you usually reside rather than any temporary address at which you reside for training, work, or other purposes before returning to your home. If you are from a rural area, use the address from your state's or territory's 'rural property addressing' or 'numbering' system as your residential street address. Building/property name is the official place name or common usage name for an address site, including the name of a building, Aboriginal community, homestead, building complex, agricultural property, park or unbounded address site.</i>			
<b>Phone Number/s:</b>		<b>Email Address:</b>	
<b>Nationality:</b>		<b>Passport Number:</b>	
<b>Your Overseas Address:</b>			
<b>Your Australian Address</b> (if applicable):			

### EMERGENCY CONTACT DETAILS

<b>Name:</b>		<b>Relationship:</b>	
<b>Address:</b>			
<b>Tel/Mobile No:</b>		<b>Email:</b>	

### ENGLISH LANGUAGE PROFICIENCY

Have you completed an acceptable English language test in the last 2 years?	<input type="checkbox"/> IELTS	<b>Score in each component:</b>	L:
	<input type="checkbox"/> PTE		R:
	<input type="checkbox"/> TOEFL-ibt		S:
	<input type="checkbox"/> CAE		W:
	<input type="checkbox"/> OET	<b>Overall Score:</b>	
OR			
Have you completed at least five years' study in one or more of the following countries: Australia, UK, USA, Canada, New Zealand, South Africa, or the Republic of Ireland?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
OR			
Are you a citizen and hold a passport from UK, USA, Canada, NZ, or Republic of Ireland?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
OR			
In the last two years, have you completed, in Australia an English language course, either in the Senior Secondary Certificate of Education or a substantial component of a course leading to a qualification from the Australian Qualifications Framework at Certificate IV or higher level, while you held a student visa?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

### VISA AND OSHC INFORMATION

<b>Do you hold a current Australian visa?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Type of visa</b>		<b>Visa Expiry date</b>
<b>Which Visa office will you apply to for your Visa?</b>		
<b>Do you have Overseas Student Health Cover?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Provider Name (if yes)	OSHC Number:
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### LANGUAGE AND CULTURAL DIVERSITY

In which country were you born?	<input type="checkbox"/> Australia [1101] <input type="checkbox"/> other. Please specify:
Do you speak a language other than English at home? <i>If more than one language, indicate the one that is spoken most often.</i>	<input type="checkbox"/> No, English only [1201] <input type="checkbox"/> Yes, other. Please specify:
Are you of Aboriginal or Torres Strait Islander origin? <i>For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes.</i>	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander

### DISABILITY

Do you consider yourself to have a disability	<input type="checkbox"/> Yes <input type="checkbox"/> No, go to question about "schooling"
If you indicated the presence of a disability, Impairment, or long-term condition, please select the area(s) in the following list.  <i>Review the disability supplement to help you Select the right area(s).</i>	<input type="checkbox"/> Hearing/deaf 11 <input type="checkbox"/> Physical 12 <input type="checkbox"/> Intellectual 13 <input type="checkbox"/> Learning 14 <input type="checkbox"/> Mental illness 15 <input type="checkbox"/> Acquired brain impairment 16 <input type="checkbox"/> Vision 17 <input type="checkbox"/> Medical condition 18 <input type="checkbox"/> Other 19

**Support required:**  
*To enable successful participation and completion of the course you are eligible to undertake, APIC will endeavour to provide you with support where possible. In the event APIC does not have the capacity to cater for your needs APIC will recommend you to either an external support service, or another provider. You will be responsible for the costs associated with the third party.*

**Please indicate the support services you may require:**

### SCHOOLING

What is your highest COMPLETED school level? Tick ONE box only	<input type="checkbox"/> Year 12 or equivalent 12
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	<input type="checkbox"/> Year 11 or equivalent	11
	<input type="checkbox"/> Year 10 or equivalent	10
	<input type="checkbox"/> Year 9 or equivalent	09
	<input type="checkbox"/> Year 8 or below	08
	<input type="checkbox"/> Never attended school	02
Are you still enrolled in secondary or senior secondary education?		<input type="checkbox"/> Yes <input type="checkbox"/> No

### PREVIOUS QUALIFICATIONS STUDIED

Have you successfully completed any of the qualifications listed below?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If YES, tick ANY applicable boxes.	<input type="checkbox"/> Bachelor's degree or higher degree		008
	<input type="checkbox"/> Advanced diploma or associate degree		410
	<input type="checkbox"/> Diploma (or associate diploma)		420
	<input type="checkbox"/> Certificate IV (or advanced certificate/technician)		511
	<input type="checkbox"/> Certificate III (or trade certificate)		514
	<input type="checkbox"/> Certificate II		521
	<input type="checkbox"/> Certificate I		524
	<input type="checkbox"/> Other education		990
(including certificates or overseas qualifications not listed here)			

### EMPLOYMENT

Of the following categories, which BEST describes your current employment status? (Tick ONE box only)	<input type="checkbox"/> Full-time employee	01
	<input type="checkbox"/> Part-time employee	02
	<input type="checkbox"/> Self-employed – not employing others	03
	<input type="checkbox"/> Self-employed – employing others	04
	<input type="checkbox"/> Employed – unpaid worker in a family business	05
	<input type="checkbox"/> Unemployed – seeking full-time work	06
	<input type="checkbox"/> Unemployed – seeking part-time work	07
	<input type="checkbox"/> Not employed – not seeking employment	08
<i>For casual, seasonal, contract and shift work, use the current number of hours worked per week to determine whether full time (35 hours or more per week) or part-time employed (less than 35 hours per week).</i>		

### STUDY REASON

Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/ apprenticeship (Tick ONE box only)	<input type="checkbox"/> To get a job	01
	<input type="checkbox"/> To develop my existing business	02
	<input type="checkbox"/> To start my own business	03
	<input type="checkbox"/> To try for a different career	04
	<input type="checkbox"/> To get a better job or promotion	05
	<input type="checkbox"/> It was a requirement of my job	06

<input type="checkbox"/>	I wanted extra skills for my job	07
<input type="checkbox"/>	To get into another course of study	08
<input type="checkbox"/>	For personal interest or self-development	12
<input type="checkbox"/>	To get skills for community/voluntary work	13
<input type="checkbox"/>	Other reasons	11

## RPL AND CREDIT TRANSFER APPLICATION

Please complete this section if you believe you are eligible to apply for Recognition of Prior (RPL) or for credit transfer.

*Please note, applying for this will impact your course duration so bear in mind that if this is approved then your course duration will be less than the time outlined on the course brochure. Depending on the amount that your course is reduced your fees may also be reduced.*

<p><b>I want to apply for a credit transfer for the following unit/s:</b></p> <p><i>If applying for a credit transfer, please attach a certified copy of the statement of Attainment or Record of Results and Qualification for each unit.</i></p>	
<p><b>I want to apply for RPL for the following unit/s:</b></p>	

## UNIQUE STUDENT IDENTIFIER (USI)

Australian Pacific International College can be prevented from issuing you with a nationally recognized VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we submit to NCVET.

If you have not yet obtained a USI, you can apply for it directly at <https://www.usi.gov.au/students/create-your-usi/> on computer or mobile device.

If you are exempt from having a Unique Student Identifier (USI), please email your USI exemption letter to us, along with your application for enrolment. Further details about USI exemptions can be found here: <https://www.usi.gov.au/exemptions>

<b>Enter your Unique Student Identifier (USI) here:</b>											
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## PRIVACY NOTICE

### 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. If you do not provide this information, we will be unable to process your enrolment.

### 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 Employment and Workplace Relations (DEWR), 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](http://www.ncver.edu.au/privacy)

If you would like to seek access to or correct your information, in the first instance, please contact us using the contact details listed below.

DEWR 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 DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at <https://www.dewr.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 APIC 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

You may also request our privacy policy if you wish.

Our contact details are

Address: Level 1, 616-620 Harris Street, Ultimo, NSW 2007 Australia.

E: [admissions@apic.edu.au](mailto:admissions@apic.edu.au) | P: +61 2 91362 446 | [www.apic.edu.au](http://www.apic.edu.au)

You may also request our privacy policy if you wish. Relevant Policies and Procedures are also available on our website.

## STUDENT SELF-ASSESSMENT

This Student Self-Assessment is designed to help Australian Pacific International College (APIC) understand whether the course you wish to enrol in is suitable for you. The information you provide will be used to assess your educational background, existing skills and experience, career goals, and learning needs. This process also helps APIC identify any support services you may require during your studies. Please note that this is a preliminary assessment only. As part of the enrolment process, you will also be required to complete Language, Literacy and Numeracy (LLN) and Digital Skills assessments to confirm your suitability for the course.

### How did you learn about APIC?

Education Agent

Internet

Word of Mouth

Family/Friend

Press / Media

Other

### Academic Suitability:

All prospective students must meet APIC course entry requirements to establish their suitability into the course. Tick the options that best applies to you and attach evidence of meeting the course entry requirements.

- I have successfully completed Australian Year 12 qualification or its overseas equivalent
- I have successfully completed Certificate IV or higher-level qualification in Australia (taught in English)
- I have minimum IELTS score of 6.0 or equivalent
- I have English proficiency of upper intermediate or above from an Australian Registered ELICOS Provider.
- I will complete English Placement Test and/or Language Literacy and Numeracy (LLN) test as required by APIC

### Questionnaire:

Answer all the questions provided below:

1. How do you think this course will assist you to achieve your career goals?

2. Have you ever worked or volunteered in an area relevant to the course you wish to enrol? (existing skills)

3. Do you hold any formal qualifications relevant to the course you wish to enrol? (knowledge)

4. What do you hope to achieve from undertaking this course/pathway?

5. Do you have any special needs that may make it difficult for you to successfully complete this course?

6. How do you learn best? (you can select more than one option)

- Attending face-to-face classes and interacting with the trainer and other students
- Researching, reading and discussing
- Completing self-paced learning activities in my own time

7. Are there any aspects of a learning environment that makes you uncomfortable?

**Computer Skills Capability:**

All courses at APIC require students to work on computers to research, prepare documents and present information.  
Tick [X] appropriate option

Skills	Competent	Need Support	No Experience
Computer operation (switch on/off, using USB disks, file and folders management, saving documents etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using programs such as Word, Excel, Power Point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using internet to search and access information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Download and save/ print materials from the internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Upload documents onto a website on the internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using emails for correspondence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach files to emails, open attachments store/print attachments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## IMPORTANT- APPLICATION CHECKLIST

Please check that you have:

- Read and understood the student Handbook, Course Brochure including the Fee Refund Policy
- Attached a valid copy of your certified Passport
- Attached valid copy of your visa (Onshore students)
- Attached relevant certified copies of your academic qualifications and work experience (if applicable)
- Attached evidence of English Proficiency
- Attached Genuine Student Requirement Statement
- Attached a completed Financial Declaration
- Attached copy of Overseas Student Health Cover (if applicable)
- You have read and understood the privacy notice on page 6 of this document
- You have read, understood, and signed the student declaration page (page 10 of this document).

## STUDENT DECLARATION

I agree and declare that:

- the information provided is true and correct.
- I have been provided with appropriate and sufficient information via student handbook and course pre-enrolment information available on APIC website to make an informed decision about my enrolment.
- I have been provided with detailed information about the fees and charges associated with my course enrolment including information on tuition fees, enrolment fees, materials fees, payment terms and the applicable refund policy.
- I will provide APIC with up-to-date and accurate contacts details and notify them if anything changes.
- I will be bound by APIC’s Student Code of Conduct, and other student policies and procedures as well as National and State legislation and regulations including any variations that are made from time to time.
- I will follow the instructions of my Trainers and Assessors as well as other staff and contractors engaged by APIC.
- I will release and hold harmless to APIC, its directors, staff and agents in respect of any property loss or personal injury that I may sustain whilst participating in my course.
- APIC is required to submit data sourced from this enrolment form to the National Centre for Vocational Education Research Ltd (NCVER) as a regulatory reporting requirement. The information contained in my enrolment form may be used by APIC or the third parties such as employers (if training paid by an employer), Government departments and authorised agencies, NCVER, organisations conducting student surveys and/or researchers.
- I may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. (I understand that I may opt out of the survey at the time of being contacted)
- NCVER will use, disclose, and retain my data in accordance with the VET Data Protocol and all NCVER policies and protocols (including those published on NCVER’s website at [www.ncver.edu.au](http://www.ncver.edu.au))
- the collection, use and disclosure of my personal information as per the Privacy Notice.

<b>Student Name:</b>	
<b>Student Signature:</b>	
<b>Date:</b>	

## DISABILITY SUPPLEMENT

The purpose of the Disability supplement is to provide additional information to assist you with answering the disability question.

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.

### **‘11 — Hearing/deaf’**

Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

### **‘12 — Physical’**

A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

### **‘13 — Intellectual’**

In general, the term ‘intellectual disability’ is used to refer to low general intellectual functioning and difficulties in a daptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

### **‘14 — Learning’**

A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

### **‘15 — Mental illness’**

Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person’s usual pattern and level of functioning.

### **‘16 — Acquired brain impairment’**

Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

### **‘17 — Vision’**

This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

### **‘18 — Medical condition’**

Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable, yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn’s disease, cystic fibrosis, asthma or diabetes.

### **‘19 — Other’**

A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.