

DOMESTIC STUDENT

ENROLMENT APPLICATION FORM

PERSONAL DETAILS					
Title □ Mr □ Mrs □ Ms □ Other					
Family Name:			Given Name:		
Middle Name: Single Name Only (Tick this box if you have only one name that cannot be written in the following format. Write your name in the "Family Name section").					
Gender (Tick one box only): Male Female Other Date of Birth://				/	
If you are not an Australian citizen, pleas	e answer the fo	llowing:			
Do you hold a Permanent Residency? ☐ Yes ☐ No	If yes, please provide a copy along with the following details Visa Type Visa expiry date Visa grant number		ollowing details Visa grant number		
CONTACT DETAILS					
Current Address (in Australia)					
Flat/unit details:		Street or lot no.:			
Street name:		Suburb:			
State/territory:		Postcode:			
Postal Address (If different from above):					
Home phone:	Mobile:			Work Phone:	
Email Address:	Alternati		ive Email Address:		
EMERGENCY CONTACT DETAILS					
Name:		Relationship:			
Address:					
Telephone/Mobile:	elephone/Mobile:		Email:		
LANGUAGE AND CULTURAL DI	IVERSITY				
Country of Birth:	Town/City of Birth:			Citize	enship:
Is English your first language? □ Yes □ No, if not, what is your first language,					
Are you of Aboriginal or Torres Strait Islander origin?		□ No □ Yes, Aboriginal			
□ Yes, Torres Strait Islander					



☐ Newspaper ☐ Internet ☐ Friend	Relative Exhibition Oth	ner:	
DISABILITY			
Do you consider yourself to have a disability, impairment, or long-term condition? ☐ Yes ☐ No if not, go to the next section. If Yes, please select the area(s) in the following list: (You may indicate more than one area) Please refer to the Disability supplement on the last page for an explanation of the following disabilities. ☐ Hearing/deaf ☐ Physical ☐ Intellectual ☐ Learning ☐ Vision ☐ Mental illness ☐ Medical condition ☐ Acquired brain impairment ☐ Other			
SCHOOLING			
What is your highest completed school leve	el (Tick one box only)?		
Level	Year of completion	Name of Institution	
☐ Year 12 or equivalent			
☐ Year 11 or equivalent			
☐ Year 10 or equivalent			
☐ Never attended school			
Never completed any primary or secondary	level education – go to next section.	1	
Are you still enrolled in secondary or senior	r secondary education? ☐ Yes ☐ No	if not, go to next section.	
PREVIOUS QUALIFICATION ACH	IEVED		
Have you successfully completed any of the qualifications listed below? ☐ Yes, If yes, tick any applicable boxes below. ☐ No, If not, go to the next section. ☐ Bachelor or higher degree ☐ Advanced diploma ☐ Diploma ☐ Certificate IV ☐ Certificate III ☐ Certificate II ☐ Certificate I ☐ Other Education (including certificates or overseas qualifications not listed above).			
UNIQUE STUDENT IDENTIFIER			
Do you have USI? Yes, Unique Student Identifier (USI) No, If no, please complete the next section			
If No, please complete the below section for further process. From 1 January 2015, we Brighton College can be prevented from issuing you with a nationally recognised 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 NCVER. 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. Please note that if you would like to specify your gender as 'other' you will need to contact the USI Office for assistance. It is important that you try to find out whether you already have a USI before attempting to create new one. You should not have more than one USI. To check if you already have a USI, use the "Forgotten USI" Link on the USI Website at https://www.usi.gov.au/faqs/i-have-forgotten-my-usi/ . If you would like Brighton College 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 . You must also			

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provide some additional information as noted at the end of this form so that we can apply for a USI on your behalf.



I [NAME]authorise Brighton College to apply pursuant to sub-section 9(2) of the
Student Identifiers Act 2014, for a USI on my behalf.
☐ 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 https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-
behalf.
We will also need to verify your identity to create your USI.
Please provide details for one of the forms of identity below (numbered 1 to 8).
Please ensure that the name written in 'Personal Details' section is exactly the same as written in the document you provide below.
1. Australian Driver's Licence
State: Licence Number:
2. Medicare Card
Medicare card number
Individual reference number (next to your name on Medicare card):
Card colour: (select which applies) ☐ Green ☐ Yellow ☐ Blue
Expiry date/ (MM/YYYY) 3. Australian Birth Certificate
State/Territory Details vary according to State/Territory (see note above)
4. Australian Passport
Passport number
5. Non-Australian Passport (with Australian Visa)
Passport number
6. Citizenship Certificate
Stock numberAcquisition date/
7. Certificate of Registration by Descent
Acquisition date/(day/month/year)
In accordance with section 11 of the Student Identifiers Act 2014, Brighton College will securely destroy personal information
which 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.
COURSE SELECTION
Campus □ Brisbane □ Melbourne □ Tasmania
Course Code Course Name
REASON FOR STUDIES
Of the following categories, select the one which BEST describes the main reason you are undertaking this course.
(Tick ONE box only).
☐ To get a job ☐ To develop my existing business ☐ To start my own business.
☐ To try for a different career ☐ To get a better job or promotion
☐ It was a requirement of my job ☐ I wanted extra skills for my job



☐ To get into another course of study	\square For personal interest or self-development			
$\hfill\Box$ To get skills for community/voluntary work	☐ Other reasons			
EMPLOYMENT				
Of the following categories, which BEST describes your current employment status? (Tick ONE box only)				
☐ Full-time employee	☐ Part-time employee			
☐ Self-employed—employing others	☐ Self-employed–not employing others			
☐ Unemployed – seeking full-time work	☐ Employed-Unpaid worker in a family business			
☐ Unemployed–Seeking part-time work	□ Not employed–not seeking employment			
FEES				
Do you wish to pay more than 50% of the course/s tuition fee?		☐ Yes	□ No	
CREDIT TRANSFER/RPL				
Do you wish to apply for credit transfer or Recognition of Prior Learning?		□ Yes	□ No	
If you indicate Yes, Credit/RPL application fee applies, you will be contacted to discuss this further.				

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.

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 Brighton College 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

IMPORTANT – APPLICATION CHECKLIST	
Please check that you have:	
\square Completed Application Form \square Academic certificates \square Medicare card \square Copy of Passport	☐ Other
STUDENT DECLARATION	

- I have read, understood and agree to be bound by the Terms and Conditions as outlined by Brighton College.
- I understand that giving false or incomplete information may lead to the refusal of my application or cancellation of enrolment.
- 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 understand that any vocational placement undertaken as a part of any of the courses offered at Brighton College will be unpaid.
- I confirm I have been informed about the training and assessment and support services to be provided and about my rights and obligations as a student in Brighton College.
- I understand that I must attend orientation, since it is a legal requirement and falls within my study plan. Rescheduling fee shall apply if the students are unable to attend the orientation on the scheduled date. (Your Orientation date and time will be emailed to you prior to the orientation and course commencement)

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☐ Tick here to confirm you have declared and consented to the above mentioned.				
Signature of applicant:	Date:	//		
Note: Brighton College do not enrol any students under the age of 18.				

SUBMITTING AN APPLICATION

Brisbane Campus (Head Office)

Level 23 & 24, Albert Street, Brisbane 4000

Phone: +61 (07) 3123 4911

Email: enrolment@brighton.edu.au



Disability supplement

Introduction

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

If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

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 adaptive 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.