

## Domestic Student Application Form

(This form is for domestic full fee applicants or applicants who are not on overseas student visa)

COURSE DETAILS (Tick applicable course(s))						
Course Code	Course name	Course Duration Weeks (Including holiday breaks)	Tuition Fees	Admin Fees	Material Fees	Total Course Fees
<input type="checkbox"/> BSB50820	Diploma of Project Management	78	\$4,200	\$200	\$300	\$4,700
<input type="checkbox"/> BSB60720	Advanced Diploma of Program Management*	78	\$4,200	\$200	\$300	\$4,700
<input type="checkbox"/> BSB80120	Graduate Diploma of Management (learning)	104	\$9,500	\$200	\$300	\$10,000
<input type="checkbox"/> CHC30121	Certificate III in Early Childhood Education and Care	52	\$4,500	\$200	\$500	\$5,200
<input type="checkbox"/> CHC50121	Diploma of Early Childhood Education and Care^	78	\$7,000	\$200	\$500	\$7,000
<p>*Entry to this qualification is limited to those who completed one of the following qualifications: BSB50820 Diploma of Project Management; or BSB51415 Diploma of Project Management (or a superseded equivalent version)</p> <p>^Entry to this qualification is open to individuals who: hold a CHC30121 Certificate III in Early Childhood Education and Care; or CHC30113 Certificate III in Early Childhood Education and Care</p>						
DELIVERY MODE						
<input type="checkbox"/> Online			<input type="checkbox"/> Face to Face			
INTAKE DATES (Please indicate your intake month)						
mm / 2024		mm / 2025		mm / 2026		mm / 2027
PARTICIPANT DETAILS (As shown on Identification supplied)						
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unspecified			
First Name:			Middle Name:			
Surname:			Date of birth:			
Mobile:			Email:			
City or town of birth:		Country of birth:		Nationality:		
RESIDENTIAL CONTACT DETAILS						
Building/property name:		Flat/unit number:		Street or Lot number:		
Street Name:		Suburb/town:		State/territory:		
Postcode:		Province:		Country:		
POSTAL CONTACT DETAILS (if the same, write "as above")						
Building/property name:		Flat/unit number:		Street number:		
Street Name:		Suburb:		State:		
Postcode:		Email:				
Home phone:		Work phone:		Mobile:		
EMERGENCY CONTACT						
Name:		Mobile:		Telephone:		
Address:						
Relationship:		Email:				
RESIDENCY OR VISA DETAILS						
Are you an Australian Citizen?		<input type="checkbox"/> Yes		<input type="checkbox"/> No		
Do you hold a current Australian Visa?		<input type="checkbox"/> Yes, please specify:		<input type="checkbox"/> No		

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INDIVIDUAL NEEDS			
Do you speak a language OTHER THAN English at home?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If YES, which language do you usually speak?			
How well do you speak English?	<input type="checkbox"/> Very Well	<input type="checkbox"/> Well	<input type="checkbox"/> Not Very Well
Do you require any special learning support?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If YES, please supply further information regarding the support needed.			
DISABILITY			
Do you consider yourself to have a disability, impairment or long-term health condition?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please indicate the areas of disability, impairment or long-term health conditions.			
<input type="checkbox"/> Hearing/Deaf	<input type="checkbox"/> Physical	<input type="checkbox"/> Intellectual	<input type="checkbox"/> Mental illness <input type="checkbox"/> Learning
<input type="checkbox"/> Acquired Brain Impairment	<input type="checkbox"/> Vision	<input type="checkbox"/> Medical Condition	<input type="checkbox"/> Other:
EDUCATION			
Highest completed school level:			
<input type="checkbox"/> Year 12 or equivalent	<input type="checkbox"/> Year 11 or equivalent	<input type="checkbox"/> Year 10 or equivalent	
<input type="checkbox"/> Year 9 or equivalent	<input type="checkbox"/> Year 8 or below	<input type="checkbox"/> Never attended	
Year completed school:			
PREVIOUS QUALIFICATIONS ACHIEVED			
Have you ever successfully completed any following qualifications?			
If Yes, tick ANY applicable boxes of these Prior Education Achievement Recognition Identifiers and any applicable qualification level.			
<i>Note: If you have multiple Prior Education Achievement Recognition Identifiers for any one qualification, use the following priority order to determine which identifier to use:</i>			
<i>A - Australia    E – Australian equivalent    I – International</i>			
Type	Name of Qualification	Type	Name of Qualification
<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate I		<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Diploma	
<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate II		<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Advanced diploma or associate degree	
<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate III		<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Bachelor's degree	
<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Certificate IV		<input type="checkbox"/> A <input type="checkbox"/> E <input type="checkbox"/> I Overseas qualification	
EMPLOYMENT			
Of the following categories, which BEST describes your current employment status? (Tick ONE box only)			
<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Part-time employee	<input type="checkbox"/> Self-employed – not employing others	
<input type="checkbox"/> Self-employed – employing others	<input type="checkbox"/> Unemployed–seeking part-time work	<input type="checkbox"/> Unemployed – seeking full-time work	
<input type="checkbox"/> Employed – unpaid worker in a family business		<input type="checkbox"/> Not employed – not seeking employment	
CREDIT TRANSFER / RECOGNITION OF PRIOR LEARNING			
Do you want to apply for Recognition of Prior Learning (RPL)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you want to apply for Credit Transfer (CT)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
STUDY REASONS			
Which BEST describes your main reason for undertaking this course? (Tick ONE box only.)			
<input type="checkbox"/> To get a job	<input type="checkbox"/> To develop my existing business	<input type="checkbox"/> To start my own business	
<input type="checkbox"/> To try for a different career	<input type="checkbox"/> To get a better job or a promotion	<input type="checkbox"/> It was a requirement of my job	

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<input type="checkbox"/> I wanted extra skills for my job	<input type="checkbox"/> To get into another course of study	<input type="checkbox"/> Other reasons
<input type="checkbox"/> For personal interest or self-development		<input type="checkbox"/> To get skills for community/voluntary work
<b>UNIQUE STUDENT IDENTIFIER (USI)</b>		
From 1 January 2015, Australian Institute of Professional Technique is 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 do not have a USI, please visit <a href="http://www.usi.gov.au">www.usi.gov.au</a> and create your USI.		
Do you want AIPT apply for a USI on your behalf?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have a USI & give permission for the RTO to search this number on my behalf.	USI number:	
<b>AGENT DETAILS</b>		
Agent name:	Agent business name:	
Phone number:	Mobile number:	E-mail:
<b>PRIVACY NOTICE</b>		
<p><b><u>Why we collect your personal information</u></b></p> <p>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.</p> <p><b><u>How we use your personal information</u></b></p> <p>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.</p> <p><b><u>How we disclose your personal information</u></b></p> <p>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.</p> <p>We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.</p> <p><b><u>How NCVER and other bodies handle your personal information</u></b></p> <p>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.</p> <p>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:</p> <ul style="list-style-type: none"> <li>• administration of VET, including program administration, regulation, monitoring and evaluation</li> <li>• facilitation of statistics and research relating to education, including surveys and data linkage</li> <li>• understanding how the VET market operates, for policy, workforce planning and consumer information.</li> </ul> <p>NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.</p> <p>NCVER does not intend to disclose your personal information to any overseas recipients.</p> <p>For more information about how NCVER will handle your personal information please refer to the NCVER's Privacy Policy at <a href="http://www.ncver.edu.au/privacy">www.ncver.edu.au/privacy</a>.</p> <p>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.</p> <p>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 <a href="https://www.dewr.gov.au/national-vet-data/vet-privacy-notice">https://www.dewr.gov.au/national-vet-data/vet-privacy-notice</a>.</p> <p><b><u>Surveys</u></b></p> <p>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.</p>		

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### Contact information

At any time, you may contact AIPT 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

I give permission for AIPT to record evidence of my participation and assessment in written, verbal, photographic (including video) formats. I also give permission to AIPT to use any recorded evidence for future promotional, commercial, and educational purposes. I agree that AIPT may use the email address supplied by the student as a point of contact for any information it deems necessary. I understand AIPT is prevented from issuing a nationally recognised VET qualification or statement of attainment upon successful completion if I have not provided a valid Unique Student Identifier (USI).

### STUDENT DECLARATION AND CONSENT

I \_\_\_\_\_ agree to undertake training with AIPT. During this program, I understand and acknowledge that:

- My rights and obligations, as defined in the Student Handbook.
- I will adhere to AIPT code of conduct as outlined in the Student Handbook.
- My obligation at all times to conduct myself safely and in adherence to all relevant legislation.
- I will actively attempt all training and assessment tasks with serious effort.
- I will comply with all safe and lawful requests; I will arrive on time and will return on time from all breaks.
- I will not bully, abuse, vilify or fail to treat all people participating, associated with, or in the vicinity of training venues with the utmost respect and courtesy.

AIPT rights and obligations include:

- Provision of quality assessment services in a competent manner through the provision of quality resources and staff.
- Assessment be performed by qualified assessors with the required knowledge and currency in the needs of the industry.
- Guaranteeing to provide assessment services to customers who have met their obligations about completion of enrolment details, and financial payments.
- Guaranteeing that if AIPT cannot deliver a course, a full refund of all monies paid to AIPT will be refunded to the purchaser.
- Committing that training will not be offered to participants who fail to wear PPE or fail to pay for the course.
- Choosing to terminate a customer's training if they fail to uphold these standards.

I acknowledge that I have read the above and declare that the information I have provided to the best of my knowledge is true and correct and that I have read and accepted the terms and conditions of the fees and refund policy as described in the Student Handbook.

I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above and authorise AIPT to share information about my training progress and completion with my employer or service provider.

Student name:	Student signature:	Date:
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### FOR OFFICE USE

The student has submitted the appropriate evidence/documentation in support of the application	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The student satisfies the entry requirements	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Place Offered	<input type="checkbox"/> Application declined	<input type="checkbox"/> Further information requested
Reason for decline or further information requested:		
The student has been notified of the outcome of the application	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Staff name:	Staff signature:	Date: