

## **THE COMPLETE PACKAGE**

### Make Work Safe (MWS) Pty Ltd RTO 46201

| Module/s to be Enrolled in (please indicate)   |   | Course date: |           |           |            |  |
|--|---|--------------|-----------|-----------|------------|--|
| □ Enter Confined Space (MSMPER205)       □ Gas Test Atmosphere (MSMWHS217)         □ Enter & Work in Confined Spaces (RIIWHS202E)       □ Operate Breathing Apparatus (MSMWHS216)         □ Work in accordance with an issued work permit (MSMPER200)  |   |              |           |           |            |  |
| Please tick if you require a Printed copy of your certificate Please tick if you require a wallet ID Card Unique Student Identifier (USI)<br>From 1 January 2015, we MWS can be prevented from issuing you with a nationally recognised VET<br>qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI).<br>In addition, we are required to include your USI in the data we submit to NCVER.<br>If you have not yet obtained a USI you can apply for it directly at https://www.usi.gov.au/students/create-your-usi |   |              |           |           |            |  |
| USI Number:  |   |              |           |           |            |  |
| Personal Details (legal name as used to apply for your USI number)   |   |              |           |           |            |  |
| Family Name (Surname):   |   |              |           |           |            |  |
| First Name: Middle   | Middle Name:  |              | Prefe     | rred Name | ):         |  |
| Date of Birth:   | Gender:   | □ Male       | □ Female  | □ Otl     | ner        |  |
|  | Title: 🗆 M  | r 🗆 Mrs      | □ Ms      | □ Miss    | □ Other    |  |
| Permanent Residential Address:   |   |              |           |           |            |  |
| Suburb: State:   |   | Country:     |           |           | Post Code: |  |
| Postal Address (if different from above):  |   |              |           |           |            |  |
| Suburb: State:   |   | Country:     |           |           | Post Code: |  |
| Home Phone:  |   | Work Pho     | ne:       |           |            |  |
| Mobile Phone:  |   |              |           |           |            |  |
| Email:   |   |              |           |           |            |  |
| Alternate Email Address (Optional):  |   |              |           |           |            |  |
| Employer Details   |   |              |           |           |            |  |
| Employer Trading Name:   |   |              |           |           |            |  |
| Employer's Contact Name:   |   | Phone        | <b>):</b> |           |            |  |
| <b>Do you give permission to be surveyed by – NCVER?</b> (National Centre for Vocational Education Research)   |   |              |           |           |            |  |
| Excluded from survey use   | <ul> <li>Invalid address / Itinerant student (very low likelihood of response)</li> <li>Correctional facility (address or enrolment)</li> <li>Minor – under age of 15 (not to be surveyed)</li> <li>Deceased student</li> </ul> |              |           |           |            |  |



# Email: training@macnellies.com.au THE CONPLETE PACKAGE Make Work Safe (MWS) Pty Ltd RTO 46201

| Language and Cultural Diversity   |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Country of Birth:   | Town of Birth:   |  |  |  |  |  |  |
| Do you speak a language other than English at home?:  | □ No, English only □ Yes, other - please specify:                |  |  |  |  |  |  |
| Are you of Aboriginal or Torres Strait Islander origin?   | □ No □ Yes,<br>□ Torres Strait Islander □ Both, ABTSI            |  |  |  |  |  |  |
| Disability (This is required to Support your training)  |  |  |  |  |  |  |  |
| Do you have a disability, impairment or long term medical condition?  |  |  |  |  |  |  |  |
| If yes, please indicate:  Hearing/deaf  Physical Acquired brain impairment  Vision  Learning Please supply additional details, so we can support your | Medical Condition I Mental Illness Intellectual Other: training: |  |  |  |  |  |  |
| <b>Do you require language or literacy assistance?</b><br>What supports do you need?  | □ No □ Yes   |  |  |  |  |  |  |
| What is your highest COMPLETED school level? (Tick Ol   | NE box only)   |  |  |  |  |  |  |

| What is your highest COMPLETED school level? (Tick   | ONE box only)  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Year 12 or equivalent  | ☐ Year 9 or equivalent   |  |  |  |  |  |
| Year 11 or equivalent  | □ Year 8 or below  |  |  |  |  |  |
| Year 10 or equivalent  | Never attended school  |  |  |  |  |  |
| Are you still enrolled in secondary or senior secondary education?   |  |  |  |  |  |  |
| □ No   | □ Yes  |  |  |  |  |  |
| Previous qualifications SUCCESSFULLY completed?  | □ No □ Yes   |  |  |  |  |  |
| <ul> <li>Bachelor degree or higher degree</li> <li>Advanced diploma or associate degree</li> <li>Diploma (or associate diploma)</li> <li>Other education (including certificates or overseas qualifications not listed above)</li> </ul> | <ul> <li>Certificate IV (or advanced certificate/technician)</li> <li>Certificate III (or trade certificate)</li> <li>Certificate II</li> <li>Certificate I</li> </ul> |  |  |  |  |  |



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**Employment Status** Employed – unpaid worker in a family business □ Full-time Employee □ Unemployed – seeking full-time work □ Part-time Employee □ Unemployed – seeking part-time work □ Self-Employed – not employing others □ Not employed – not seeking employment □ Self-Employed – employing others Reasons for doing course □ To get a job □ It was a requirement of my job □ To develop my existing business □ I wanted extra skills for my job □ To start my own business □ To get into another course of study □ To try for a different career □ For personal interest of self-development □ To get a better job or promotion □ To get skills for community/voluntary work □ Other reason Privacy Statement & Student Declaration (Please read carefully before signing) Why we collect your personal information

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As a registered training organization (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us. Failure to supply the requested information may result in us being unable to enroll vou as a student.

#### 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, analyzing 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 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 (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, regulations, 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 details listed at the top of this page.



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DEWR is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfill specified functions and activities. For more information about how the 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>.

#### <u>Surveys</u>

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 MacNellie's Workplace Safety 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

#### **Student Declaration and Consent**

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 declare I have read the Student Handbook (located on MacNellie's Website) and understand its contents.

Student Signature [or electronic acknowledgement]: \_\_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature [or electronic acknowledgement]:\_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

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