MONTFORD
INTERNATIONAL COLLEGE
RTO 46346 | CRICOS 04334A

Building AB Ground Floor, 61 Riggall Street, Broadmeadows VIC 3047
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Enrolment Form

Please use BLOCK LETTERS when filling out this form and ensure that all sections are completed and appropriate tick boxes marked as applicable. Information collected on this enrolment form is confidential and will not affect you as an individual in your studies.

Personal Details (including full legal name)

Do you have a single name only? (If yes, write your single name in the Family Name field)	☐ Yes ☐ No
Title (Mr, Miss, Ms, Mrs, Other):	
Gender (Tick ONE box only)	☐ Female ☐ Male ☐ Other
Family Name (Surname):	
First Given Name:	
Middle Name(S):	
Preferred Name(Optional):	
Date of birth (DD/MM/YYYY):	

Your Contact Details

Home Phone:	
Mobile Phone:	
Work Phone:	
Email Address:	
Alternative email address (optional)	
Preferred Contact Method(please tick one)	☐ via Mobile Phone ☐ via Email ☐ via Post

Your Emergency Contact

Name:		**Phone**	

Relationship:		Email address	

What is the address of your usual residence?

- 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 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.

Building/property name	
Flat/unit details	
Street or lot number (e.g. 205 or Lot 118)	
Street name	
Suburb, locality or town	
State/territory	
Postcode	

What is your postal address (if different from above)?

Building/property name	
Flat/unit details	
Street or lot number (e.g. 205 or Lot 118)	
Street name	
Postal delivery information (e.g. PO Box 254) -	
Suburb, locality or town	
State/territory	
Postcode	

Language and Cultural Diversity

Are you of Aboriginal/Torres Strait Islander origin?	**☐ No** **☐ Yes, Torres Strait Islander**	**☐ Yes, Aboriginal** **☐ Yes, Aboriginal and Torres Strait Islander**
In which country were you born?	☐ Australia	☐ Other (please specify below)
Do you speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)	☐ No (English only)	☐ Yes (please specify below)

Schooling Details

Are you still enrolled in secondary or senior secondary education?	**☐ Yes**	**☐ No**
What is your highest COMPLETED school level? (Not inclusive of higher education) Tick one box only	☐ Completed Year 12 or equivalent ☐ Completed Year 11 or equivalent ☐ Completed Year 10 or equivalent	☐ Completed Year 09 or equivalent ☐ Completed Year 08 or below ☐ Never attended school

Previous Qualifications/Education

Have you successfully COMPLETED any of the following qualifications?	**☐ Yes**	**☐ No**
If YES, tick ANY applicable boxes.	☐ Bachelor Degree or Higher Degree ☐ Advanced Diploma or Associate Degree ☐ Diploma or Associate Diploma ☐ Certificate IV (or advanced certificate/technician)	☐ Certificate III (or trade certificate) ☐ Certificate II ☐ Certificate I ☐ Other education (including certificates or overseas qualifications not listed above)

Employment Status

Which of the following categories BEST describes your current employment status? **Tick one box only**	☐ Full time employee ☐ Part time employee ☐ Employer ☐ Employed – unpaid worker in a family business ☐ Self-employed – not employing others ☐ Not employed – not seeking employment ☐ Unemployed – seeking full time work ☐ Unemployed – seeking part time work

Disability

Do you consider yourself to have a disability, impairment or long term condition? ☐ YES ☐ NO		
If yes, please indicate the areas of disability, impairment or long term condition. You may indicate more than one.	☐ Hearing/deaf ☐ Intellectual ☐ Mental illness ☐ Vision ☐ Other (Please specify):.....	☐ Physical ☐ Acquired brain impairment ☐ Learning ☐ Medical condition

USI application through Montford International College (if you do not already have one)

Application for Unique Student Identifier (USI)

If you would like us [Montford International 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 provide some additional information as noted at the end of this form so that we can apply for a USI on your behalf.

I, (print your full name) .....authorise Montford International 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>.

Town/City of Birth _____

(please write the name of the Australian or overseas town or city where you were born)

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.

Australian Driver's Licence **State: _____** **Licence Number: _____**	**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 ___/_____/____ (format DD/MM/YYYY)
Immicard **Immicard Number** _____	

Certificate of Registration by Descent **Acquisition date _____** **(day/month/year)**	
Australian Birth Certificate **State/Territory_____** **Details vary according to State/Territory (see note above)**	**☐ Non-Australian Passport (with Australian Visa)** Passport number _____ Country of issue_____
Australian Passport **Passport number_____**	**Citizenship Certificate** Stock number_____ Acquisition date ___/_____/_____ (day/month/year)

In accordance with section 11 of the Student Identifiers Act 2014, Montford International 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.

Residency Status

☐ Australian Citizen ☐ New Zealand Citizen ☐ Permanent Resident ☐ Other (please provide details)

Study Reason

Which of the following reasons, which BEST describes your main reason for undertaking this course / traineeship / apprenticeship? **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 ☐ For personal interest or self-development ☐ To get skills for community/voluntary work ☐ Other Reason

How did you hear about this course?

Tick one box only	☐ Job Services ☐ Staff Member ☐ Current/Past Student

	☐ Flyer ☐ Website ☐ Radio advertising

Tick one box only	☐ Word of mouth ☐ Social Media (e.g. Facebook) ☐ Apprentice Centre ☐ Newspapers ☐ Workplace ☐ Other (Please Specify)

Student Handbook

I declare that I have read and understood the Montford International College Student Handbook and its policies and procedures.

Signature: _____ Date: _____

The Student Handbook can be found on Montford International College website.

Training product to be enrolled in.

Course code and title: _____

Pre-Training Checklist (Please tick the correct boxes)

☐ Pre-training form completed	☐ Entry Requirements discussed
☐ Language, Literacy, Numeracy and digital literacy (LLND) assessment completed by student and attached	☐ Credit Transfer discussed
☐ Delivery Mode discussed	☐ Location of the course discussed
☐ Recognition of prior learning(RPL) discussed	☐ Tuition fees, Concession and Exemption discussed
☐ Refund policy discussed	☐ Student question answered
☐ I have read and understand the student handbook	Please indicate any special needs, assistance you may require during the course (e.g Writing assistance) .....

Privacy Statement & Student Declaration

Privacy Notice

Why We Collect Your Personal Information

As a Registered Training Organisation (RTO), Montford International College collects your personal information to process and manage your enrolment in a vocational education and training (VET) course.

If you do not provide this information, we may not be able to enrol you or deliver VET training and services as required.

How We Use Your Personal Information

We use your personal information to:

Deliver training and assessment services;

Manage course administration;

Comply with our legal and regulatory obligations as an RTO.

How We Disclose Your Personal Information

Under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act), Montford International College is required to disclose your personal information to:

The National Centre for Vocational Education Research Ltd (NCVER) for inclusion in the National VET Data Collection;

Relevant State or Territory Training Authorities.

This data is used to inform VET research, policy, funding and reporting.

We do not disclose your personal information to overseas recipients.

Your personal information may also be disclosed to a licensed debt collection agency, but only to the extent necessary to recover unpaid fees after MIC's late payment process (including your appeal rights) has been completed.

How NCVER and Other Bodies Handle Your Information

NCVER will collect, hold, use, and disclose your personal information in accordance with:

The Privacy Act 1988 (Cth),

The NVETR Act, and

Its privacy policies.

Your information may be used for:

Creating authenticated VET transcripts;

Administering VET;

Statistical research and data linkage;

Policy and workforce planning;

Supporting consumer information.

NCVER may disclose your information to:

The Department of Employment and Workplace Relations (DEWR);

State and Territory authorities;

VET regulators; and

Researchers acting on NCVER's behalf.

More info: www.ncver.edu.au/privacy

DEWR's privacy notice: https://www.dewr.gov.au/national-vet-data/vet-privacy-notice

Surveys: You may be invited to participate in student surveys by Montford International College, NCVER, government departments, or authorised researchers. You may opt out at the time of contact.

Access and Complaints: You may contact Montford International College at any time to:

Request access to or correct your personal information;

Make a complaint about how your information has been handled;

Ask questions about this notice.

Contact details: Montford International College

Address: Building AB, Ground Floor, 61 Riggall Street, Broadmeadows VIC 3047

Phone: +61 3 7048 4870

Email: info@montford.edu.au

Refer to the Montford International College Policy Manual for further information on Privacy Policy

Consent for Use of Photographs and Student Work

Montford International College may take photographs, video recordings, or collect written or recorded student testimonials during training, assessment activities, events, or campus activities for educational and promotional purposes. These materials may be used on the college website, social media platforms, publications, marketing materials, or other promotional channels.

Personal names or identifying details will not be published without prior consent.

Staff will inform students before capturing photographs, videos, or recording testimonials.

Participation in photographs, videos, or testimonials is voluntary.

If you do not consent, please inform the staff member at the time so that you can be excluded.

Students may withdraw consent at any time by submitting a written request to the college. Upon receiving the request, Montford International College will make reasonable efforts to remove the image, video, or testimonial from future use within 24 hours where practicable.

Do you consent to the use of your photo as described above?

Please tick one: ☐ Yes ☐ No

Consent to Release Information and Access Evidence

Please be assured that any discussions held with Montford International College representatives will be solely for the purpose of your assessment and skills development.

During the course of training, we do not plan to discuss your evidence, work practices, or progress with other students or trainees, unless we have received your written permission to do so.

You are required to provide written consent for any such discussions.

As part of your enrolment, you will be required to participate in the National Student Outcomes Survey conducted by NCVER. This may occur during or following the completion of your training. Participation is voluntary, and you may opt out when contacted.

Declaration of Information Accuracy: In signing or emailing this form I acknowledge and declare that;

I have read and understood and consent to the privacy notice and have completed all questions and details on the enrolment forms.

Arrangements have been made to pay all fees and charges applicable to this enrolment.

I have read and understand Montford International College Student Handbook

I agree to be bound by Montford International College's Student Code of Conduct, regulations, policies and disciplinary procedures whilst I remain an enrolled student.

I am 18 years of age or older

My participation in this course is subject to the right of Montford International College to cancel or amalgamate courses or classes. I agree to abide by all rules and regulations of Montford International College

I understand and have been provided with information by Montford International College in relation to Credit Transfer and Recognition of Prior Learning (RPL).

I confirm that I have been informed about the training, assessment and support services to be provided, and about my rights and obligations as a student at Montford International College

I have also visited Montford International College website to review Training and Assessment options available to me including but not limited to duration, location, mode of delivery, fees, refunds, complaints and withdrawals.

I authorise Montford International College or its agent, in the event of illness or accident during any Montford International College organised activity, and where emergency contact next of kin cannot be contacted within reasonable time, to seek ambulance, medical or surgical treatment at my cost.

My academic results will be withheld until my debt is fully paid and any property belonging to Montford International College has been returned.

I acknowledge that from time to time Montford International College may send me information regarding course opportunities and other promotional offers and that I have the ability to opt out.

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.

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.