



AUSTRALIAN

OPERATOR TRAINING



Student Enrolment Form

Course name: _____ Date of Course: ____ / ____ / ____

Personal Information:									
Title:	First Name:				Middle Name:				
	Surname:				Preferred Name:				
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other					Date of Birth: ____ / ____ / ____				
Home Phone: (__) _____			Work Phone: (__) _____			Mobile: _____			
Unique Student Identifier:									
Email Address:									
Home Address:									
Postal Address:									



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AVETMISS Information

In which country were you born?	<input type="checkbox"/> Australia	<input type="checkbox"/> Other (Please specify): _____	
Do you speak a language other than English at home? (If more than one language is spoken at home, indicate the one that is spoken most often)	<input type="checkbox"/> No, English only	<input type="checkbox"/> Yes (please specify): _____	
How well do you speak English? (tick)	<input type="checkbox"/> Very well <input type="checkbox"/> Well <input type="checkbox"/> Not well <input type="checkbox"/> Not at all		
Do you identify yourself as Aboriginal or Torres Strait Islander origin? (tick one)	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> Yes, Both Aboriginal & Torres Strait Islander		
Do you have any of the below disabilities? (Please tick all that apply)			
<input type="checkbox"/> No <input type="checkbox"/> Yes, Hearing/Deaf <input type="checkbox"/> Yes, Intellectual <input type="checkbox"/> Yes, Vision	<input type="checkbox"/> Yes, Learning <input type="checkbox"/> Yes, Physical <input type="checkbox"/> Yes, Medical <input type="checkbox"/> Other	Please specify: _____	
What is your highest COMPLETED school level? (Tick ONE box only.)			
<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 school	Are you still attending secondary school? <input type="checkbox"/> Yes <input type="checkbox"/> No	In which YEAR did you complete school? _____



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ABN: 88 164 301 786
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RTO: 41351

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AVETMISS Information

Have you successfully completed any of the following qualifications?

- | | |
|--|---|
| <input type="checkbox"/> No previous qualifications | <input type="checkbox"/> Yes - Certificate III (or Trade Certificate) |
| <input type="checkbox"/> Yes - Bachelor Degree or Higher Degree | <input type="checkbox"/> Yes - Certificate II |
| <input type="checkbox"/> Yes - Advanced Diploma or Associate Degree | <input type="checkbox"/> Yes - Certificate I |
| <input type="checkbox"/> Yes - Diploma (or Associate Diploma) | <input type="checkbox"/> Yes - Certificates other than the above |
| <input type="checkbox"/> Yes - Certificate IV (or Advanced Certificate/Technician) | |

Of the following categories, which best describes your current employment status?

- | | |
|---|--|
| <input type="checkbox"/> Full-time employee | <input type="checkbox"/> Employed - unpaid worker in a family business |
| <input type="checkbox"/> Part-time employee | <input type="checkbox"/> Unemployed - seeking full-time work |
| <input type="checkbox"/> Self-employed - not employing others | <input type="checkbox"/> Unemployed - seeking part-time work |
| <input type="checkbox"/> Employer | <input type="checkbox"/> Not employed - not seeking employment |

Of the following categories, which best describes your main reason for undertaking this course / traineeship / apprenticeship? (Tick ONE box only.)

- | | |
|---|--|
| <input type="checkbox"/> To get a job | <input type="checkbox"/> It was a requirement of my job |
| <input type="checkbox"/> To develop my existing business | <input type="checkbox"/> I wanted extra skills for my job |
| <input type="checkbox"/> To start my own business | <input type="checkbox"/> To get into another course of study |
| <input type="checkbox"/> To try for a different career | <input type="checkbox"/> For personal interest or self-development |
| <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> Other reasons |



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Your Personal Statement

Why are you choosing this course?	
Do you have a specific career aim or job in mind for the future?	
Do you have a specific career aim or job in mind for the future?	
Do you consider that you have adequate literacy and numeracy skills to undertake the course: (please ask if unsure)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
Are you seeking credit for previous training or recognition of prior learning:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
Are there any individual needs you have that we should be aware of so we take these into account when planning your training:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
If yes, please provide us a little more information:	

Employer Details

Business Name:	Contact Name: _____ Contact Phone: _____
Workplace Address:	
Business Phone Number:	
Business Email Address:	



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Student Declaration

I understand that:

- ☐ The Data Provision Requirements 2012 requires Australian Operator Training to provide the national regulator ASQA, with student and training activity data and quality indicator data which may include information I provide in this enrolment form.
- ☐ Information is required to be provided in accordance with the Australian Vocational Education and Training Management Information Statistical Standard (AVETMISS) guidelines.
- ☐ I can access details of AVETMISS from www.ncver.edu.au.
- ☐ The Federal Government may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, and reporting and/or research activities.

I give permission for Australian Operator Training to:

- ☐ Create a Unique student identifier (USI) on my behalf and/or check the details of my USI
- ☐ Access my personal USI information (do not tick if you do not want the Australian Operator Training to access your personal USI information)
- ☐ I agree and will abide with all the terms and conditions specified in Australian Operator Training's Student Handbook.

I have been advised by Australian Operator Training that:

- ☐ My personal information provided on this enrolment form will be kept private, confidential and secure by all Australian Operator Training staff.
- ☐ I may be contacted and requested to participate in a National Centre of Vocational Education Research survey or audit or internal review.
- ☐ I understand that Australian Operator Training will not issue a certificate and/or statement of attainment until all the appropriate documentation has been completed, signed, and all fees have been paid.
- ☐ By signing this form, I certify that the information provided is true and correct

Full name: _____ Signature: _____ Date: ____ / ____ / ____



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100 Points of Identification

Australian Operator Training requires that you provide us 100 points proof of identification. Please detail the proof of identification you can provide and attach a copy to this enrolment application form. Please refer to the below form for guidelines for providing 100 points of identification.

You must provide a total of 100 points of Australian or state-issued documents to prove your identity online.

Different types of identity documents are worth different points. You can use different combinations of documents to make up your 100 points, but you must include at least 1 primary document as part of your 100 points.

Primary documents

	Points
Australian visa	40
Birth certificate	50
Certificate of Australian citizenship	50
Driver licence	60
Passport	50

Secondary documents

	Points
Change of name certificate	40
Marriage certificate	40
Medicare card	40



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