



## Student Registration Form 2020 - Sydney Campus

Student No. \_\_\_\_\_ Unique Student Identifier (USI) \_\_\_\_\_

### 1. Personal Details (PLEASE USE BLOCK LETTERS)

Family Name \_\_\_\_\_ Given Name/s \_\_\_\_\_

Gender Male Female Date of Birth \_\_\_\_\_

Country of Birth \_\_\_\_\_ Town/City of Birth \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ Country of Passport \_\_\_\_\_

Passport No. \_\_\_\_\_ Passport Expiry Date \_\_\_\_\_

Visa Type \_\_\_\_\_ Visa Expiry Date \_\_\_\_\_

Course Name \_\_\_\_\_ Duration \_\_\_\_\_

Course Start Date \_\_\_\_\_ Finish Date \_\_\_\_\_

### 2. Contact Details

Address in Home Country \_\_\_\_\_

Phone/Mobile \_\_\_\_\_

Address in Australia \_\_\_\_\_ Postcode \_\_\_\_\_

Phone/Mobile \_\_\_\_\_

Email Address \_\_\_\_\_

I consent to the College communicating with me relating to my study via my email address provided above.

Emergency Contact Person \_\_\_\_\_

Relationship to you \_\_\_\_\_

Residential Address \_\_\_\_\_

Phone/Mobile \_\_\_\_\_

Email Address \_\_\_\_\_

### 3. Class Timetable

#### Business Course

C3B-A Mon&Sun(9am-5pm)

DLM-A Mon&Tue(9am-5pm)

ADLM-A Mon&Tue(9am-5pm)

#### Accounting Course

C3A-A Wed&Thu (9am-5pm)

#### English Course

GE-Morning

#### Translating Course

Sat, Sun (9am-5pm)

C4B-A

DLM-B Wed&Thu(9am-5pm)

ADLM-B Wed&Thu(9am-5pm)

C4A-A Thu&Sat (9am-5pm)

GE-Evening

#### Interpreting Course

Mon&Tue&Sun(1pm-6pm)

DLM-C Wed&Thu(9am-5pm)

ADLM-C Sat&Sun(9am-5pm)

DA-A Wed&Thu(9am-5pm)

GE-Weekend

Sat, Sun (9am-5pm)

DLM-D Sat&Sun(9am-5pm)

ADA-A Wed&Thu(9am-5pm)

EAP

### 4. Declaration

I declare that all information given in this form is true and correct. I have read and understood all the pages in AIC Student Handbook which is made available to me through the AIC website. I will notify the College of my own, and my emergency contact details (residential address, phone/mobile number and email) within 7 days of change.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

#### Office Use Only:

Received by \_\_\_\_\_ Date \_\_\_\_\_

Data input by \_\_\_\_\_ Date \_\_\_\_\_

Commencement Confirmed on PRISMS by \_\_\_\_\_ Date \_\_\_\_\_



## Privacy Notice

Under the *Data Provision Requirements 2012*, Australian Ideal college (AIC) is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this registration form and your training activity data) may be used or disclosed by AIC for statistical, regulatory and research purposes. AIC may disclose your personal information for these purposes to third parties, including:

- School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Employer – if you are enrolled in training paid by your employer;
- Commonwealth and State or Territory government departments and authorised agencies;
- NCVER;
- Organisations conducting student surveys; and
- Researchers.

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts;
- facilitating statistics and research relating to education, including surveys;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. You may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the *Privacy Act 1988 (Cth)*, the VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at [www.ncver.edu.au](http://www.ncver.edu.au)).

## 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.

STUDENT SIGNATURE ..... DATE .....

PARENT/GUARDIAN SIGNATURE\* ..... DATE .....

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