





STUDENT INFORMATION COLLECTION FORM

STUDENT DETAILS				
First Name		Middle Name		
Last Name		Student ID		
Date of Birth		Passport Number		
Visa Type		Contact Number		
Intake Date		USI Number		
Course Enrolled				
Email				
Address				
IN CASE OF EME	RGENCY CONTACT DETAILS			
Person(s) Name				
Relationship to student				
Contact Number				
Email				
Address				
Collins Institute of Australia collects, stores and uses personal information only for the purposes of administering student and prospective student admissions, enrolment and education. The information collected is confidential and will not be disclosed to third parties without your consent, except to meet government, legal or other regulatory authority requirements.				
For further information contact the institute at info@collins.edu.au or telephone (02) 8024 8999				
DECLARATION				
I certify that information on this form is true, correct, and complete. I understand that any misrepresentation may be cause for refusing or revoking administration. (If you change your detail please inform the staff at the office reception)				
Student's Signature				
		Date:		







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PRIVACY STATEMENT & STUDENT DECLARATION

I declare that the information I have provided to the best of my knowledge is true and correct.

I understand that my RTO [insert RTO name] is required to submit data sourced from this enrolment form to the national VET administrative collection as a regulatory reporting requirement. The information contained on my enrolment form may be used by my RTO or the following third parties for administrative, regulatory and/or research purpose:

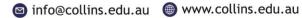
- School if I am a secondary student undertaking VET, including a school based apprenticeship or traineeship.
- Employer if I am enrolled in training paid by my employer.
- Government departments and authorised agencies.
- Researchers.

I understand that I may receive a National Centre for Vocational Education Research (NCVER) student

Student's Signature	Date:

Note: parental consent required if student is under the age of 18







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ER	SONAL DETAILS					
1.	Enter your full name*					
	Family name (surname)					
	Given names					
						Name for encryption
	ease write the name that you	-		•	, ,	• •
-	ou do not yet have a USI and			-	-	
	ldle names, exactly as writte I of this form for a detailed e	-	document you cr	100se to use for	this purpose. So	ee section on the USI at the
Circ	or time form for a detailed t	жрининон.				
2.	Enter your birth date			3. Sex (Tick	ONE box only)	
	Date/Month/Year			Male		
		Date	e of birth	Fema	le 🗌	
				Other	. 🔲	
4.	Enter your contact details					Sex
	Home phone			Mobile		
	Work phone			Email Address		
						Telephone number – home
						Telephone number – work Telephone number – mobile
5.	What is the address of you	ır usual residence	a?			Email address
					\ 1	
	ase provide the physical add nporary address at which yo					
-	ou are from a rural area use		n your state or to	erritory's 'rural p	roperty address	ing' or 'numbering' system
as	your residential street addre	ess.				
	Building/property name					
	Flat/unit details					
	Street or lot number (e.g. 2	205 or Lot 118)				
	Street name					
	Suburb, locality or town					
	State/territory			Postcode		
				_		
	Address building/property name Address street number	е				Address flat/unit details Address street name
-	Address location – suburb, loca	ality or town				State identifier Postcode
		Collins Institute of	Australia Dtv I td	T/A Collins Institut	to of Australia	Postcode

ABN: 59 615 295 988 | CRICOS: 03603D | RTO: 45161 | Level 6, 127 Liverpool Street, Sydney NSW 2000, Australia







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5. What is your postal address (if different from above)				
Building/property name				
Flat/unit details				
Street or lot number (e.g. 2	205 or Lot 118)			
Street name				
Suburb, locality or town				
State/territory		Postcode		
Address building/property name Address street number Address location – suburb, local		A	Address flat/unit details Address street name State identifier Postcode	
LANGUAGE AND CULTURA	AL DIVERSITY			
7. In which country were you	born?	9. How well do you speak English	?	
Australia		Very well		
Other – please specify		Well		
	Country identifier	Not well		
8. Do you speak a language of	other than English at home	Not at all		
(If more than one language, incomest often)	dicate the one that is spoken	Proficiency in	spoken English identifier	
most often,		10. Are you of Aboriginal or Torres	Strait Islander origin?	
No, English only English only – Go to q	guestion 10	(For persons of both Aboriginal and origin, market both 'Yes' boxes)	l Torres Strait Islander	
Yes, other – please sp	pecify			
		No		
	Language identifier	Yes, Aboriginal		
		Yes, Torres Strait Islander		
		inc	digenous status identifier	
DISABILITY				
11. Do you consider yourself to	have a disability, impairment of	or long-term condition?		
Yes				
No	No-Go to question 13			
_			Disability identifier	
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12. If you indicated the presence of a disabil area(s) in the following list:	ity, impairmer	nt or long-term condition, please select the	
(You may indicate more than one ar	·ea)		
Hearing / deaf	<u> </u>		
Physical	<u> </u>		
Intellectual	<u> </u>		
Learning	<u> </u>		
Mental illness	<u> </u>		
Acquired brain impairment	<u> </u>		
Vision	<u> </u>		
Medical condition	<u> </u>		
Other	<u> </u>		
		Disability	type identifier
CHOOLING			
13. What is your highest COMPLETED school level? (Tick ONE box only)		15. Are you still attending secondary school?	?
Year 12 or equivalent		Yes	
Year 11 or equivalent		No	
Year 10 or equivalent			At school flag
Year 9 or equivalent			
Year 8 or below			
Never attended school			
Never attended school – go to question 16 Highest school level completed ider	ntifier		
,			
14. In which YEAR did you complete that school	ol level?		
Year highest school level comp	leted		



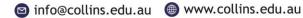




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PREVIOUS QUALIFICATIONS ACHIEVED		
HEVISOS GOVERNOVAS VOLIZAED		
16. Have you SUCCESSFULLY completed any of the	17. If YES, then tick ANY applicable boxes.	
following qualifications?	Bachelor degree or higher degree	008
Yes	Advanced diploma or associate degree	<u> </u>
No — No – go to question 18	Diploma (or associate diploma)	
Prior educational achievement flag		
	Certificate IV (or advanced certificate/technic	
	Certificate III (or trade certificate)	514
	Certificate II	521
	Certificate I	524
	Certificates other than the above	990
	Prior educational achievem	ent identifier
EMPLOYMENT		
18. Of the following categories, which BEST describes your c	urrent employment status? (Tiek ONE hav only)	
16. Of the following categories, which best describes your c	unent employment status: (Tick ONL box only)	
Full-time employee	□ 01	
Part-time employee	□ 02	
Self employed – not employing others	03	
Employer	<u> </u>	
Employed – unpaid worker in a family busi	ness 05	
Unemployed — seeking full-time work	<u> </u>	
Unemployed – seeking part-time work	07	
Not employed – not seeking employment	08	
	Labour force status	aldentifier







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STUDY REASON	
19. Of the following categories, which BEST describes your main re course/traineeship/apprenticeship? (tick ONE box only)	ason for undertaking this
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 Other reasons	□ 01 □ 02 □ 03 □ 04 □ 05 □ 06 □ 07 □ 08 □ 12 □ 11
	Study reason identifier
UNIQUE STUDENT IDENTIFIER	
From 1 January 2015, we [insert RTO name] can be prevented from or statement of attainment when you complete your course if you not yet obtained a USI you can apply for it directly at http://www.usi.gov.au/create-your-USI/ on your computer or mole	do not have a Unique Student Identifier (USI). If you have
20. Enter your Unique Student Identifier (if you already have one)	
Unique Student Identifier	Unique Student identifier