

GENERAL ENROLMENT FORM

PERSONAL DETAILS		Student Number	
		<small>Office use only</small>	
Surname:		Given Name/s:	
Date of Birth: / /	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	USI number	
Phone No: Mobile:	Home:	Work:	
E-mail Address:			
Name of Emergency Contact Person:			
Emergency Contact Number		Relationship to you:	
Residential Address:			
Suburb:		State:	Postcode:
Postal Address: if different to above			
Have you applied for a course at training with MPA Skills in the last 12 months		Yes <input type="checkbox"/>	No <input type="checkbox"/>

LANGUAGE AND CULTURAL DIVERSITY			
Are you of Aboriginal or Torres Strait Islander origin?			
No <input type="checkbox"/>	Yes, Aboriginal <input type="checkbox"/>	Yes Torres Strait Islander <input type="checkbox"/>	Both Aboriginal & Torres Strait Islander <input type="checkbox"/>
In which country were you born		Australia <input type="checkbox"/>	Other please specify
Are you a permanent resident?		Yes <input type="checkbox"/>	No <input type="checkbox"/> If no: Visa number:
Language Spoken at home:			
How well do you speak English at home?			
Very well <input type="checkbox"/>	Well <input type="checkbox"/>	Not very well <input type="checkbox"/>	Not at all <input type="checkbox"/>

SCHOOLING			
Are You Still At School		Yes <input type="checkbox"/>	No <input type="checkbox"/>
What is your highest COMPLETED school level? <input checked="" type="checkbox"/> (Tick ONE box only)			
Year 12 or equivalent <input type="checkbox"/>	Year 10 or equivalent <input type="checkbox"/>	Year 8 or below <input type="checkbox"/>	
Year 11 or equivalent <input type="checkbox"/>	Year 9 or equivalent <input type="checkbox"/>	Never attended school <input type="checkbox"/>	
Year Completed School	What school do/did you attend		

EMPLOYMENT STATUS			
Of the following categories, which BEST describes your current employment status? <input checked="" type="checkbox"/> (Tick ONE box only)			
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"/>	Unemployed - not seeking work employment <input type="checkbox"/>		

STUDY REASON

What is the main reason for undertaking this course or apprenticeship? <input checked="" type="checkbox"/> (Tick ONE box only)			
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	<input type="checkbox"/>

HOW DID YOU HEAR ABOUT MPA SKILLS

School or School Representative	<input type="checkbox"/>	Friend or Relative	<input type="checkbox"/>
Taste-a-Trade	<input type="checkbox"/>	Newspaper	<input type="checkbox"/>
Career Expo	<input type="checkbox"/>	Master Plumbers / Master Painters Journal	<input type="checkbox"/>
Internet Search	<input type="checkbox"/>	MPA Associations / Industry Event	<input type="checkbox"/>
Trade Representative or Trade Store	<input type="checkbox"/>	Word of Mouth	<input type="checkbox"/>
Employer / Work Experience	<input type="checkbox"/>	Co-worker in the Trade	<input type="checkbox"/>
Other	<input type="checkbox"/>	Please specify:	

MEDICAL HISTORY

Do you consider yourself to have a disability, impairment or long-term condition?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the list:

Hearing/deaf	<input type="checkbox"/>	Learning	<input type="checkbox"/>	Vision	<input type="checkbox"/>
Physical	<input type="checkbox"/>	Mental illness	<input type="checkbox"/>	Medical condition	<input type="checkbox"/>
Intellectual	<input type="checkbox"/>	Acquired brain impairment	<input type="checkbox"/>	Other	<input type="checkbox"/>

Do you need special assistance or equipment to work or complete your studies?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If so what special assistance is required?

PREVIOUS QUALIFICATIONS ACHIEVED

Have you undertaken further studies If Yes, <input checked="" type="checkbox"/> Tick any applicable boxes	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Bachelor Degree or Higher Degree	<input type="checkbox"/>	Certificate III (or trade certificate)	<input type="checkbox"/>	
Advanced Diploma or Associate Degree	<input type="checkbox"/>	Certificate II	<input type="checkbox"/>	
Diploma (or Associate Diploma)	<input type="checkbox"/>	Certificate I	<input type="checkbox"/>	
Certificate IV (or Advanced Certificate)	<input type="checkbox"/>	Certificates other than listed	<input type="checkbox"/>	

I authorise MPA Skills to use all media and photographic images taken of me while attending MPA Skills for training. I am aware that media and photographs may be used for promotional material and on the website.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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TERMS AND CONDITIONS

Cancellation and Refund

All cancellations must be in writing to MPA Skills Head Office, preferably on the Course Cancellation form which is available from training reception or on our website

It is the responsibility of the participants to confirm that their written cancellation has been received.

- Cancellations received fourteen (14) or more days prior to course commencement will receive a full refund.
- Cancellations received between thirteen (13) and one (1) day prior to commencement of the course will receive a refund less the cancellation fee of \$300.00.
- Participants who do not cancel their enrolment and fail to attend the course for which they are enrolled remain liable for the full course fees.

Please note: Cancellation and postponement of course in this instance has the same meaning.

Privacy Statement

Information collected by MPA Skills during a participant's enrolment and attendance will be used for the purposes of general student administration, identification, communication, State and Commonwealth agencies and research organisations.

MPA Skills is bound by the National Privacy Principles of the Privacy Amendment (Private Sector) Act, 2000 and is committed to safeguarding personal information it may hold at any time in respect of any individual, in accordance with the requirements of those principles. Refer to our Privacy Policy for more information.

I have read and agree to the above conditions and that the information provided in this form is true and correct. If you are under 18 years of age, please ensure your parent/guardian signs this form.

Participants Name: _____ Date / /

Participants Signature: _____ Date / /

If you are under the age of 18 a parent or guardian must sign this form on your behalf

Parent /Guardian Signature: _____ Date / /

NOTE: Enrolment may be subject to the receipt of relevant documentation and/or a successful interview (if applicable)

FAX, MAIL, EMAIL OR PERSONALLY DELIVER THE ENROLMENT FORM TO THE TRAINING OFFICE AT:

Maylands Campus
108 Caledonian Avenue
Maylands WA 6051

MPA Skills

Head Office

353 Shepperton Road PO Box 5216
East Victoria Park WA 6061 East Victoria Park WA 6981

Telephone: (08) **9471 6600** reception@mpaskills.com.au
Facsimile: (08) **9471 6601** Web: www.mpaskills.com.au

Maylands Campus
108 Caledonian Avenue
Maylands WA 6051

Bayswater Campus
27-29 Durham Road
Bayswater WA 6053

Jandakot Campus
7 Chullora Bend
Jandakot WA 6164



Training & Apprentice Employment

DIVISION OF MPA GROUP

***For all your Plumbing and Painting Training Requirements Contact:
MPA Skills Training Department at
106-108 Caledonian Ave Maylands
☎ (08) 9471 6600***



Australian Government

Department of Industry

Skills

Unique Student Identifier

HAVE YOU GOT YOUR NUMBER?

From 1 January 2015 each student will need a Unique Student Identifier (USI) to obtain their certificate or qualification from their registered training organisation, when studying nationally recognised training in Australia.

This includes studying at TAFE or with a private training organisation, completing an apprenticeship or skill set, certificate or diploma course.

A USI gives you access to your online USI account which will help keep all your training records together.

For more information visit www.usi.gov.au or ask your training organisation.

Are you ready for the USI?

WWW.USI.GOV.AU



Training & Apprenticeship Employment
Division of MPA Group

UNIQUE STUDENT IDENTIFIER

HOW TO APPLY

Your USI will help keep your training records and results together in an online profile.

- Go into the website to get a Unique Student Identifier www.usi.gov.au
- The website will say: Welcome Student Identifier (USI)



Create a USI

Please make sure you have one form of ID from the list below ready.

- Drivers Licence
- Medicare Card
- Australian Passport
- Birth Certificate (Australian)
- Citizenship Certificate
- Proof of Age Card

You only need to fill in a few details and have one form of ID to verify who you are.

Please select **Create USI** to start your application.

- **Create USI - Personal Details**
- **Confirm Details**
- **Evidence of Identity**
- **Password/Check Questions**
- **Completed**

Once you have received your USI number
with a confirmation email or text,
either forward your email to training@mpaskills.com.au
or forward your text to MPA Skills 0439 930 182
with your USI number including your first name and surname