VENUE:

TRISCOTT EDUCATIONAL SERVICES 2016 ENROLMENT FORM

Registered Training Organisation (RTO) 6937 Phone: 03 5962 2848 Fax: 03 5962 4796

ABN: 30 152 551 623

Mail: PO Box 1246 Healesville 3777 Email: info@triscott.com.au

Website: www.triscott.com.au Email: info@

The following information is required by Triscott (and funding bodies) for statistical collection and remains confidential

COURSE INFORMATION	Course name:	□ Certificate IV i	n Education Support	Course code:	□ CHC40213
	□ I	or State Funding statistica	Privacy Policy and accept purposes	ot that this enrolme	ent information can be used com.au and current documentation.
		Student number:	USI:	V	SN:
PERSONAL INFORMATION	Title:	□ Mr	□ Mrs	□ Miss	s □ Ms
	Family				
	Name: Given				
Usual residential	Names:				
address	Address:				
(Please note if postal address is different from above)	Suburb:			Postcode:	
	Date of			□ Male	e 🗆 Female
	Birth:	/	/		
	School: Address:				
	Contact	Home:		Mobile:	
	details:	Work:		Email:	
		I have included a <u>copy</u> of a personal ID document I understand that I am required to provide the <u>original</u> documents at the Induction session.			
	Personal	□ Drivers licence	(identification) or	□ Green M	edicare card (eligibility) or
	ID	□ Current Passpor		Birth Cer	tificate N/A
		Working with C	hildren Check	Naturalis	ation Certificate
FULL FEE	Fee: CHC40213 Cert IV	\$1350.00	Full Fee payment	(Full fee for servi	Concessions – are not available to full-fee paying students
FEE CONCESSION	Payment	Direct Payment:	Bendigo Bank	Chec	que / Money order
DETAILS	options:	Triscott Educational	BSB: 633 000	Triscott Education	nal PO Box 1246
	•	Services	ACC: 151 741 386	Services	Healesville Vic 3777
		ave attached a copy of th understand that Triscott i			der of the identified card ion on an individual basis
TRISCOTT ENROLMENT	Enrolment				Balance of payment:
DETAILS	Date receiv	ved: Date rec	eived: Num	ber:	Receipt number:
			Date for deposit will be the invoice)		Date received:
			Amou	unt:	Amount:

SCHOOLING	What is the HIGHEST level of schooling you have achieved?
OOHOOLING	□ Year 12 □ Year 11 □ Year 10 □ Year 9
	Where did you complete your schooling? (State / Country)
	In which year did you complete your schooling?
	Are you still attending secondary school? Do you have a Victorian Student Number (VSN)? YES / NO YES / NO
	☐ If YES, please include the number in the VSN box on page 1 of this document.
LANGUAGE	Were you born in Australia? YES / NO
AND	If NO, in which country were you born?
CULTURAL DIVERSITY	If NO, are you a naturalised Australian citizen?
2.7.2.1.0	Are you of Aboriginal or Torres Strait Islander origin? YES / NO
	Do you speak a language other than English at home?
	□ (01) Very well (□ (02) Well □ (03) Not well □ (04) Not at all
EMPLOYMENT	Of the following categories, which BEST describes your current employment status? (indicate just one code):
	(mulcute just one code).
	01 Full-time Employee 05 Employed – unpaid worker in a family business
	02 Part-time Employee 06 Unemployed – seeking full-time work 03 Self-employed – not employing others 07 Unemployed – seeking part-time work
	04 Employer 08 Not employed – not seeking work
	Of the following categories, which category BEST identifies your occupation?
	01 Manager 06 Sales Worker
	02 Professional 07 Machinery Operator / Driver
	03 Technician / Trade Worker 08 Labourer
	04 Community and Personal Services 09 Other (please specify) 05 Clerical / Administrative Worker
	Of the following categories, which BEST identifies your industry of employment?
	A Agriculture, Forestry, Fishing K Financial, Insurance Services
	B Mining L Rental, Hiring and Real Estate Services
	C Manufacturing M Professional, Scientific, Technical Support
	D Electricity, Gas, Water, Waste Services N Administrative, Support Services E Construction O Public Administration, Safety
	F Wholesale Trade P Education, Training
	G Retail Trade Q Health Care, Social Assistance
	H Accommodation, Food Services R Arts, Recreation Services I Transport, Postal, Warehousing S Other Services (please specify)
	J Information, Media, Telecommunications
DISABILITY	Do you consider yourself to have a permanent and significant DISABILITY, impairment or long-term condition? YES / NO
	long-term conditions
	(11) Hearing / Deaf (14) Learning (17) Vision
	(12) Physical (15) Mental Illness (18) Medical Condition
	(13) Intellectual (16) Acquired Brain Impairment (99) Not Specified (19) Other:
PRIOR EDUCATION	Since leaving school, have you SUCCESSFULLY COMPLETED any qualifications? YES / NO
/ QUALIFICATIONS	□ Bachelor Degree or Higher Degree □ Certificate III or Trade Certificate
ACHIEVED	□ Advanced Diploma or Associate Degree □ Certificate II
	□ Diploma (or Associate Diploma) □ Certificate I
	□ Certificate IV □ Certificate other than above:
	If YES, please indicate whether your qualification is: (A) An Australian Qualification (B) An Australian equivalent (C) An International Qualification
	(i) An international Qualification (b) An international Qualification
	Please provide Triscott Educational Services with a copy of your highest qualification

REASON/S
FOR
CURRENT
STUDY

From the following reasons, which code best describes your reason for undertaking this course?

01To get a job06It was a requirement of my job02To develop my existing business07I wanted extra skills for my job03To start my own business08To get myself into another course or study04To try for a different career09Other reasons

14 To try for a different career 09 Other reasons
15 To get a better job or promotion 10 For personal interest / self development

PARTICIPANT DECLARATION MUST BE SIGNED

I declare that:

- to the best of my knowledge, the information currently provided to Triscott Educational Services is true, correct and complete
- □ I have provided authentic copies of the required documentation (for identification), e.g. driver's licence / working with children's check / current passport
- I understand that providing false information may result in cancellation of my enrolment in the training program

APPLICANT'S NAME:				
	Please PRINT IN UPPER CASE			
APPLICANT'S SIGNATURE:		DATE:	/ _/	/

 \rightarrow

PRIVACY POLICY

- Protecting an individual's privacy and personal information (that is, the privacy of students, trainers and assessors) is important to Triscott management and staff.
- Triscott endeavours to maintain the highest level of confidentiality of the information it collects from students
- Triscott privacy policy supports and endorses the national and state privacy standards.
- Personal information on the enrolment forms is required by the government for statistical purposes.
- Students who require access to their training records need to provide Triscott Educational Services' administration with a written request. The information will be available within 7 working days.

TRISCOTT EDUCATIONAL SERVICES PRIVACY STATEMENT

- I understand that Triscott Educational Services is required to provide the Victorian Government (through the Department of Training) with student training activity data which may include information I provide in this enrolment form. Information is required to be provided in accordance with the Victorian VET Student Statistical Collection Guidelines (available at http://www.education.vic.gov.au/training/providers/rto/Pages/data collection.aspx)
- DET may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, reporting and/or research activities. For these, and other lawful purposes, DET may also disclose information to its consultants, advisers, other government agencies, professional bodies and/or other organisations.
- □ I have been advised by the training organisation that I may be contacted and requested to participate in a National Centre for Vocational Education Research survey or a Department endorsed project or audit or review.
- The Education and Training Reform Act 2006 requires Triscott Educational Services to collect and disclose my personal information for a number of purposes including the allocation to me of a USI number, a Victorian Student Number (VSN) and to update my personal information on the Victorian Student Register. For more information in relation to how student information may be used or disclosed please contact Triscott Educational Services' Privacy Officer (info@triscott.com.au).

Officer (<u>imo@inscott.com.au</u>).	
I acknowledge and agree to the terms described in this privacy statement.	
Student signature:	Date:
\rightarrow	This statement must be signed and dated

FEES AND COSTS RELATED TO THE TRAINING

What costs and other fees should I expect?

- course fees and costs are outlined below
- a non-refundable deposit of \$150 is required to establish your place in the training program
- the non-refundable deposit of \$150 is required when your Enrolment Form is submitted However, if a Course is already filled you (the student) will be notified and your deposit will be refunded
- After eligibility has been determined, students will be invoiced for the balance of fees
- Full payment of course fees and mandatory attendance at an induction session will confirm your enrolment in the training program
- full payment of Course fees is required at least 7 days before the date that the Course is scheduled to begin

Course Fees:

Course fees include all tuition costs.

In 2016, all Triscott students will be Full-fee paying students. Triscott will not have access to 2016 VTG Funding.

Fee for Service (Full Fee Paying students):	Full Payment Due \$1350.00	Deposit paid on enrolment \$150.00	Balance of Fees as per Invoice \$1200.00
	***************************************	******	,

Nationally registered training does not attract GST

Class materials

Students will be provided with an up-to-date work-book/manual at the first training session.

Work-placement Agreement documentation and work-placement materials will be included in the work-book/manual.

Concessions and Refunds: Concessions are not available to Full-fee paying students. Individual situations will be clarified.

Refund Policy:

- A full refund will be organised if the training is cancelled, postponed (by more than 4 weeks) or if other arrangements cannot be made by Triscott refunds will be transferred into the student's nominated account
- If enrolment is withdrawn by a student, the \$150 non-refundable deposit will be retained by Triscott and the balance of the student's fees will be transferred into the student's nominated account
- No refund will be paid if the client withdraws after the training begins

_		
Payment	t of non-	refundable \$150 deposit / \$1350 full fee
Payment method		direct payment to Triscott Educational Services Pty Ltd by: direct payment – BSB: 633 000 Account: 151 741 386 I have enclosed the receipt for the direct payment enclosed a cheque enclosed a money order
	My payr	ment is for:
Payment		initial non-refundable deposit (\$150) full fee (\$1350)
		I am interested in negotiating a payment plan with Triscott – fortnightly part payments will be stipulated, full payment to be received at Triscott 7 days before the training starts.

VICTORIAN TRAINING GUARANTEE 2016 EVIDENCE OF STUDENT ELIGIBILITY AND STUDENT DECLARATION

Section A – to be completed by an authorised delegate of Triscott Educational Services

Evide	nce o	f citizenship/res	idency and age) :					
I confi	irm tha	at in relation to							
1 0011				(Student's	full name)			
l havo	ciaht	ad and of the follo	wing original do	soumonts OD a col	rtified pho	otocony o	f the original docu	mant	
Illavo	; signi	ea <u>one</u> or the lond	Willy Oligilial ac	ocumento on a <u>ce</u>	<u>Illiieu</u> prio	llocopy o	f the original docu	III C III	
ا	□ a	n Australian Birth	Certificate (not	a birth extract)		a currer	nt Australian Passp	oort	
ا	□ а	current New Zea	land Passport			a natura	alisation certificate		
	□ a	current green Me	edicare Card			a signed	d declaration by a	relevant refer	ee
ا		ormal documentat esidence	ion issued by th	e Australian Depa	rtment of	Immigrati	ion and Citizenshi _l	p confirming p	permanent
and if		tudent's age is rele a current drivers licence	evant to their eli or	gibility – and the do a current learner permit	ocument pr <u>or</u>		om the list above do a Proof of Age <u>o</u> card		a date of birth: a 'Keypass' card
Section	on R 1	I – To be complet	ed by the stud e	ant					
Jectic	JII D. I	I – TO be complet	ed by the stude	511 L					
Educa	ation	history							
Q1	The h	nighest qualification	I currently hold is	:					
		(Inc	lude the full title o	of your highest qualif	ication, e.ç	g. Certifica	ate III in Children's S	Services)	
Q2	in - to	undertake this yea	r?				vernment subsidised		
		de training that you not yet started.	have enrolled in -	- to undertake with 1	riscott Edi	ucational S	Services and any otl	her training pro	viders – but
	0	1	2	3		4+	circle numbe	er)	
Q3		ncluding the course	-	to enrol in now – how	w many oth	ner govern	nment subsidised co	urses are you ι	undertaking
	0	1	2	3		4+	circle number	er)	
Q4	•	ur lifetime, how mar icate IV in Educatio		bsidised courses ha	ve you sta	rted/comm	nenced that are at th	ne same level a	s the
	0	1	11 Support? 2	3		4+	(circle numbe	er)	
							_		

VICTORIAN TRAINING GUARANTEE 2016 EVIDENCE OF STUDENT ELIGIBILITY AND STUDENT DECLARATION

Studen	t Declaration
l,	in seeking to enrol in
	(Student's full name)
	CHC40213 Certificate IV in Education Support
Declare	the following to be true and accurate statements:
a.	I AM / AM NOT enrolled in a school – including government, non-government, independent, Catholic or home school
	(circle appropriate response)
	(and appropriate response)
b.	I AM / AM NOT enrolled in the Commonwealth Government's Skills for Education and Employment program.
D.	(circle appropriate response)
	(Circle appropriate response)
C.	I understand that my enrolment in the CHC40213 Certificate IV in Education Support may be subsidised by the
	Victorian and Commonwealth Governments under the Victorian Training Guarantee. I understand how enrolling in the
	above qualification will affect my future training options and eligibility for further government subsidised training under
	the Victorian Training Guarantee.
d.	I acknowledge and understand that I may be contacted by the Department or an agent to participate in a student
	survey, interview or other questionnaire.
Signed:	Date:
Section	C – To be completed by an authorised delegate of Triscott Educational Services
Numbe	
	er of courses the student is currently eligible for:
rtanio	er of courses the student is currently eligible for:
Triscot	t Educational Services' Declaration
Triscot	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and
Triscot	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form
Triscot	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET
Triscot	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in
Triscot	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET
Triscott Based o	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in Education Support
Triscot	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in Education Support
Triscott Based o	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in Education Support
Triscott Based of	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in Education Support
Triscott Based of	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in Education Support Date: Date:
Triscott Based of	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in Education Support Date: Date:
Triscott Based of	t Educational Services' Declaration on discussion with the student, the above evidence I have sighted 9and retained a copy of) in Section A, and the information provided to me by the student in Section B of this form I believe that the above individual satisfies the Victorian Training Guarantee eligibility criteria as set out in the VET Funding Contract and is eligible for funding under the Victorian Training Guarantee for the CHC40213 Certificate IV in Education Support Date: Date: Position:



CHC40213 Certificate IV in Education Support 2016 PRE-ASSESSMENT INTERVIEW

SECTION 1A - STUDENT DE	TAILS	
Student name:		
Student address: (for mailing)		Contact number Mobile:
		Email:
Employer/school name:		
Employer/school address:		Date employed:
Employer's Declaration	I can confirm that the student identified above is Principal / Assistant Principal:	s a staff member at the above-mentioned school
SECTION 1B - QUALIFICATI	ION DETAILS	
Packaging rules:	CHC40213 - Certificate IV in Education Support 12 x Core units, plus 5 x Elective units (listed or	
Overview of the Education Support Worker's job role:	theoretical concepts	dictable problems edge to a wide variety of contexts – with depth in ion from a variety of sources s - in relation to specified quality standards ity and quality of the output of others a range of education and school settings - who student learning under broad based supervision. quired tasks with a moderate level of autonomy
Occupational names may include:	Education support worker Teacher aide Aboriginal and/or Torres Strait Islander education officer	Teacher assistant Home tutor Indigenous language and culture teaching assistant

Units of
Competency
required for the
qualification:

CHCDIV001	Work with diverse people
CHCDIV002	Promote Aboriginal and/or Torres Strait Islander cultural safety
CHCECE006	Support behaviour of children and young people
CHCEDS001	Comply with legislative policy and industrial requirements in the education environment
CHCEDS019	Support student's mathematics learning
CHCEDS020	Support students' literacy learning
CHCEDS021	Assist in facilitation of student learning
CHCEDS022	Work with students in need of additional support
CHCEDS023	Supervise students outside the classroom
CHCEDS024	Use educational strategies to support Aboriginal and/or Torres Strait Islander education
CHCEDS025	Facilitate learning for students with disabilities
CHCEDS028	Assist in production of language resources
CHCEDS031	Provide support to students with autism spectrum disorder
CHCEDS032	Support learning and implementation of responsible behaviour
CHCPRP 003	Reflect on and improve own professional practice
CHCPRT001	Identify and respond to children and young people at risk
HLTWHS001	Participate in workplace health and safety

Course participants include people who are currently working in a range of education and school settings – providing assistance and support to teachers to facilitate students' learning under broad based supervision.

Entry requirement for this program includes validated evidence in directly supervised support roles as an education support worker – as included on the individual's Pre-Assessment Interview. A prerequisite for enrolment in the program is that the participant is currently employed on a part-time basis – generally between 15-22 hours per week – in a school setting.

The program is offered over 48 weeks and participants require a training commitment of between 10-12 hours per week – acknowledging that much of the learning will be achieved 'on-the-job' in their current on-going workplace.

Trainers will arrange workplace visits for each participant on an individual basis – in consultation with the participant's workplace supervisor.

SECTION 2 – YOUR WORK HISTORY In the space provided, indicate any work experience that you feel is relevant to your application. (This may include either full or part-time experience, voluntary or paid work). **Employment details** Type of work undertaken Employer name and Contact person and Position and dates address address

SECTION 3 - LIST ANY PROFESSIONAL DEVELOPMENT AND/OR PROGRAMS THAT YOU HAVE COMPLETED OR PARTICIPATED IN. Record below - any relevant training / induction programs that you have attended through your current position or previous employment. Please attach a copy of any training records you have retained. Course provider and date (approx) Name/Description of training course **Topics covered**

SECTION 4 -	YOUR	OTHER	INTERESTS
OLCHON 4 -	IOUN	OIILL	INILITEDIO

In the space provided below, list any other interests or activities that may have assisted you to develop and acquire skills and knowledge that complement the qualification/or units of competency that you are claiming recognition for.

Description of interest	Duration	Skills acquired

SECTION 5 – STUDENT'S EDUCATIONAL HISTORY						
Record your formal educational achievements.						
Date	Level of study	Name of qualification	Result			

For Triscott Educational Services to complete:			
SECTION 6 – VALIDATED EVIDENCE			
the required evidence will be compiled in your portfolio to support	vour application		
and required evidences thin see complice in your persons to capper.	. your application		
Type of evidence	Result/Comment		
Copy of position (description/comment)			
Training records			
Middle and a second			
Written references			
Verbal references N/A			
Supervisor report			
Supervisor report			
Other evidence (describe)			
This section will be completed by your assessor when you complete the qualification requirements.			
It becomes part of our records.			
Signed: Date:			
Triscott Assessor	Completion date		

Certificate Number:

Page 13 is provided for your information and does not need to be submitted to Triscott

BEFORE YOU SUBMIT YOUR ENROLMENT DOCUMENTATION TO TRISCOTT PLEASE CHECK Page 1 **Personal Information** - have you ... ? applied for and included your USI included your VSN (if relevant) Note: Triscott will issue you with a student number after your enrolment has been processed attached a copy of an ID document, e.g. drivers licence, Working with Children Check Page 1 **Fee Information** paid \$150 non-refundable deposit into the Triscott account Your receipt for \$150 will be forwarded to you as part of your invoice – outlining the balance of payments. Pages 2-3 Government statistical information completed details relating to Schooling, Language and Cultural Diversity, Employment, Disability, Qualification/s achieved since leaving school, Reason/s for current study Page 3 **Triscott Privacy Statement** signed and dated Page 4 Method of payment identified how your \$150 non-refundable payment has been paid Pages 5-6 Declaration completed, signed and dated Pages 7-11 **Pre-Assessment Interview** completed, signed and dated Reminder Have you taken note of the dates and times related to your training sessions? Have you noted that you will need to provide either original or certified copies of your supporting documents to Triscott when enrolling – they will be scanned and filed

YOUR ENROLMENT CANNOT BE PROCESSED WITHOUT THIS DOCUMENTATION