

APPLICATION/ENROLLMENT FORM 2023

Student ID:	Course: CHC33015 Certificate III in Individual Support	Ageing <input type="checkbox"/> Disability <input type="checkbox"/> Ageing, Home & Community <input type="checkbox"/>
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NOTE: The current course, CHC33015 Certificate III in Individual Support, has been superseded. Students who are currently enrolled or commencing this course will be transferred to the updated qualification, CHC33021 Certificate III in Individual Support. However, if a student's completion date extends beyond 14/06/2024, they will need to undergo a transition course, including gap training, to attain the new qualification of CHC33021 Certificate III in Individual Support.

INSTRUCTIONS: The application form must be completed in English. Information should be typed in, or if written, block capitals should be used. Please ensure that all fields are filled in on the form. You must initial at the bottom of each page. Missing or incorrect information may cause delays in the application process. Return your completed application form, supported documentation and application fee to Star Community College. Please provide your family name(s) and given name(s) as shown on your National ID e.g. Passport or Driver License etc.

READ & UNDERSTAND THE FOLLOWING:

It is advised that you must make yourself familiar with the following before submitting the application form. You can contact the college for further information.

STAR Student Handbook
<http://star.edu.au/download>

STAR Website
<http://star.edu.au>

Unique Student Identifier (USI)

From 1 January 2015 legislation states that Registered Training Organisations (RTOs) must not issue a Statement of Attainment or a Qualification unless the student has been assigned a USI You are required to provide your Unique Student Identifier with your application

My Unique Student Identifier is: _ _ _ _ _

To Create Your USI, please Visit at <https://www.usi.gov.au> or Talk to reception for the help.

- I DO NOT HAVE and will apply my own and provide to SCC.
- I DO NOT HAVE and I am giving authority to SCC to create a USI behalf of me.

1. PERSONAL DETAILS

Title: (Mark X in one box only) Mr. Miss Mrs. Ms. Other

Preferred Name: _____

First Given Name _____ **Second Given Name** _____

Family/Last Name _____

Gender Male Female Indeterminate **Date of Birth** / /

Home Phone: _____ **Mobile:** _____ Work Phone: _____

Email: _____

2. CONTACT DETAILS

Flat/ Unit Number: _____ Building/ Property Name: _____

Street Number & Name: _____

Suburb: _____ **State:** _____ **Post Code:** _____

Country: Australia _____

Name of Emergency Contact Person: _____

Relationship with Emergency Contact Person: _____

Contact Number of Emergency Contact Person: _____

Mailing Address (if different from Home Address)

Same as Home Address (Please go to next question)

Post Office Box: _____ Care of (who or place): _____

Street No. _____ Street Name: _____

Suburb: _____ State: _____ Post Code: _____

Country: _____

3. ENGLISH LANGUAGE PROFICIENCY LEVEL (Mark X and complete details that apply to you)

Do you speak a language other than English at home? English only Yes

If Yes then **which language:** _____

How well do you speak English? (Mark X against what you believe applies to you)

Very Well Well Not Well Not at all

4. CULTURAL DIVERSITY (Mark X and complete details that apply to you)

In which country where you born? Australia or Other (Please specify) _____

Place of Birth: _____ Are you an Australian Citizen? Yes No

Are you a Permanent resident? Yes No **Other Visa**

Are you an international student? Yes No

(if you are an international student, we cannot offer you any course)

If you are not a citizen of Australia, please provide a certified copy of your visa

Are you of Aboriginal or Torres Strait Islander origin? (Mark X one box only)

No

Torres Strait Islander

Aboriginal

Both Aboriginal and Torres Strait Islander

5. SUPPORT SERVICES

Do you identify yourself as having a disability? (Mark X to all that apply to you)

No

Hearing/ Deaf

Intellectual

Vision

Learning

Physical

Medical

Other

Is there anything we can do to assist you achieve your learning?

6. EDUCATIONAL BACKGROUND

Education: What is your highest COMPLETED **school level**? (Mark X in ONE box only)

Never attended school

Year 10 or equivalent

Year 8 or below

Year 11 or equivalent

Year 9 or equivalent

Year 12 or equivalent

What year did you complete school? _____ I'm **still at school**

Have you successfully completed any of the following qualifications?

(Mark X if you have any qualifications) (Please provide an evidence if you have marked X in any)

Certificate I

Certificate II

Certificate III (or Trade Certificate)

Certificate IV or Advanced Certificate/Technician

Diploma (or Associate Diploma)

Advanced Diploma or Associate Degree

Other Certificate not listed (Please Specify)

Provide more details:

Is this the first time you have enrolled at Star Community College of Australia?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you applying for Recognition of Prior Learning (RPL) ? (for RPL fee please visit at www.star.edu.au)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you applying for Credit Transfer ? (for Credit transfer fee please visit at www.star.edu.au)	Yes <input type="checkbox"/> No <input type="checkbox"/>

7. PURPOSE OF STUDY

Which category best describes your reason for undertaking this course?

(Mark X in 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 a different career <input type="checkbox"/>	For personal interest or self-development <input type="checkbox"/>

8. CURRENT EMPLOYMENT STATUS (Which of the following best describes your current

Full time employee in CHC Sector <input type="checkbox"/>	Unemployed – seeking full time work <input type="checkbox"/>
Part time employee CHC Sector <input type="checkbox"/>	Unemployed – seeking part time work <input type="checkbox"/>
Self- employed (CHC Sector) <input type="checkbox"/>	Unemployed – not looking for work <input type="checkbox"/>
Employer (CHC Sector) <input type="checkbox"/>	Unpaid family worker <input type="checkbox"/>

9. WHICH COURSE YOU ARE ENROLLING IN?

CHC33015 Certificate in Individual Support

Specialisation Options (Tick)

Ageing, Home & Community

Disability | Ageing

Delivery Mode: Full Time Part Time

10. COURSE FEE & PAYMENT PLANS

Pricing for individuals registering for public courses will be at the published rate in the INFORMATION PACK and on the website.

- The enrolment fee is non-refundable.
- Other special offers and discounts may be marketed from time to time.
- For fee breakdown please visit our course fee section on www.star.edu.au

We don't accept payment of **more than \$1500** from a prospective or current learner prior to the commencement of the course.

For more details on the fees & payment options, please refer to the Student Handbook.

Course Detail	Enrolment Fee (Non-refundable)	Specialisation Tuition Fee	Materials Fee	Payment Plan Negotiable
CHC33015 Certificate III in Individual Support Specialisation (Ageing, Home & Community)	\$150	\$1050	\$150	Yes
CHC33015 Certificate III in Individual Support Specialisation (Disability)	\$150	\$650	\$150	No
CHC33015 Certificate III in Individual Support Specialisation (Ageing)	\$150	\$1350	\$150	Yes
RPL Fees (Any Specialisation)	\$50	\$600	NA	NO

Refunds

Note: Refund request needs to be submitted in written or by email. Request time will be calculated based on time when request is submitted. If refund request received after hours by email that will be consider in next working day's request.

1. Please refer to the student handbook for information on refunds.
2. A non-refundable administration/enrolment fee of \$150 must be paid, (\$50 for RPL) prior to course commencement, to confirm place into a course.
3. Administration/ enrolment fees are not refundable and cannot be transferred to another student.
4. Refunds is allowed in the following circumstances:
 - 1) Participants have overpaid.
 - 2) Participants enrolled in training that has been cancelled by Star Community College.
 - 3) If the participant withdraws from a course or program due to illness or extreme hardship as determined by Star Community College.
 - 4) If the participant withdraws **two weeks** before commencing training.
5. Refunds are calculated as:
 - Refund = total fee - administration fee where no units have been completed
 - Refund = total fee - administration fee (number of completed units x unit cost)
7. No refunds will be issued after commencement of the course.
8. Students are responsible for safe storage of their certificates and Statements of Attainment. If a student requires a reissue of their Certificate or Statement of Attainment, an administration of \$65 will be charged.

Detailed fee structure can be found in our student Handbook. Please visit us at www.star.edu.au

11. CAREER PLAN

Why do you want to study the proposed course/s?

Do you have any experience in the community sector field?

What are your future career goals? Describe how the proposed course will help you in achieving your career goals?

Why did you choose to study at Star Community College?

Do you currently have access to a workplace for a minimum of 120 hours relevant to your specialisation (Ageing, Disability, Home & Community service organisation)?

If you do not have a current access to the specific workplace, are you willing to attend workplace assigned by Star Community College?

12. COMPUTER SKILL CHECKLIST (For each question, mark X in ONE box only)

My skill level at these Computer Operations is:	Competent	Need support	No Experience
Start and shut down computer and related equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use a USB memory stick, CD memory disc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Switch Wi-Fi on and off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
File and Folder Management			
Create, delete, copy and rename files and folders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Save documents in folders and open files from folders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Word Processing (such as MS Word)			
Enter & edit text and use the following functions: clipboard, cut, copy, paste, delete and insert	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change font style, size, colour and change margins, line/paragraph spacing, use tabs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Create and edit headers and footers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insert page numbers, file name, date time, pictures, bullet & numbered lists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insert and edit tables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use clip art, shapes, text boxes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet			
Enter and understand web addresses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Search for and access resources and information through a search browser	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Download, store and print information from the Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reference material sourced from the Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understand the use of copyright material from electronic sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Create, write and send an email	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use functions in emails, such as: copy, past, font size & style,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach files, open attachments, store and print attachments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sort emails into folders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. PRE ENTRY QUESTION SECTION

Eligibility for entry into courses at Star Community College requires demonstration, by prospective candidates, of their ability to understand entry requirements, prerequisites of Training Plan and the potential ability to achieve the competencies stipulated in the training package. Star Community College uses the candidate's responses to the questions in this application form to perform the eligibility assessment. Further information may be required by telephone interview, written or computer-based assessment or face-to-face interview.

Star Community College is also obliged to assess whether the course for which candidates are applying is suitable to satisfy the candidate's training needs and will assist them with their vocational objectives. Candidates should also declare any other learning needs they may have that will assist Star Community College to provide the best possible training outcomes.

Please complete the following:

- I am aged over 18 years and will provide evidence of my age.
- I understand that to complete listed course/s, I require to spend 120 or more hours on Work placement, which is unpaid work to get experience in real environment.
- I understand that Language Literacy and Numeracy (LLN) test is required for entry in to listed course/s

Or

- Equal or Higher qualification from Any Australian Institute and I will provide evidence of achieved qualification.
 - CHC33015 Certificate III in Individual Support (All Streams)
 - HLTAID003 Provide First Aid
 - HLTAID001 Provide cardiopulmonary resuscitation
 - HLTWHS005 Conduct manual tasks safely

Please sign the declaration at the end of this document. Information contained in this document must be your personal responses. You must not solicit help or accept assistance from another person.

14. ENROLLING STUDENT DECLARATION OF UNDERSTANDING

Privacy Notice

I understand that:

Star Community College is required to provide to the Government through the relevant Department, with **student and training activity data** which may include information I provide in the enrolment form. Information is required to be provided in accordance with the Australian Skills Quality Authority (www.asqa.gov.au - Activity Data Collection). The Department may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, and reporting and / or research activities. For these and other lawful purposes, the Department may also disclose information to its consultants, advisers, other government agencies, professional bodies and / or other organisations. 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.

For further information in relation to how student information may be used or disclosed, please contact CEO-Star Community College on phone 02 8678 6260

I have read and understood the college complaint and appeal policy and processes of lodging complaint and appeal from the student handbook provided to me prior to enrolment.

Terms and Conditions of your enrolment

- I agree to be bound by the College's Student Code of Conduct, policies and procedures whilst I remain an enrolled student.
- I agree to pay all fees and charges relating to my enrolment, unless payment is to be made by my employer or other contracted third party, in which case a purchase order or authority to invoice letter will be presented at time of fees payment.
- I acknowledge and agree to the terms and conditions.

By signing this form, I certify that the information provided is true and correct. I further certify that:

1. I acknowledge that any false information and/or failing to disclose any relevant information on my application for enrolment may result in the withdrawal of any offer and/or cancellation of enrolment at the discretion of Star Community College;
2. I have received the Student Handbook, read and understood all the contents of it.
3. I have received the course fees plan and payment plan information (if applicable) and have been informed of the refund policy;
4. I have read and understood the relevant course information and I agree to the course requirements.
5. If applicable to my course, I have received the information about any materials, documents and / or resources which I have to provide/or obtain myself;
6. If applicable to my course, I have been informed about the practical placement requirements which I must attend to achieve my qualification;
7. I acknowledge that my Certificate and/ or Statement of Attainment will be issued by Star Community College within 30 calendar days from being deemed competent in my course; however, release of my certificate or statement of attainment may be delayed if all payments have not been received in full, or I have not provided my Unique Student Identifier number;
8. I have received the relevant course information and have been informed of the training and assessment services and the related educational and support services to be provided and units of competency to be completed;
9. I have read the RTO **Complaint & Appeal** Policy, forms and processes.

I understand that my personal information is protected by law under the Privacy Act 1988 and Privacy Amendment Act 2014, and is collected by Star Community College to assess my eligibility of enrolment. The information is required to process my application. My information may be used by Star Community College. Personal information will only be provided to other persons or agencies with my permission or where required by law.

15. ENROLLING STUDENT DECLARATION OF UNDERSTANDING

Applicant's Full Name: _____

Sign: _____

Date: ___/___/___

Office Use Only

Task	Outcome	Checked by
Application / Enrolment Form filled, signed and dated	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Clients meets age requirements (18 or over)	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Client satisfies the criteria of literacy–speaking, reading and comprehension and writing	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Client possess Satisfactory Computer Skills – Emails, Internet, Word, PowerPoint	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Existing skills and knowledge criteria assessed	<input type="checkbox"/> YES <input type="checkbox"/> NO	
RPL process required	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Amount of training discussed with client	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Is client suitable for the course offered	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Offer Letter to be issued	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Student ID Issued	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Support documents have been collected	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Enrolment Fee Collected	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Invoicing and payment plan (if any) arranged	<input type="checkbox"/> YES <input type="checkbox"/> NO	

Final Enrolment process Conducted by:

Name: _____

Signature: _____

Date: _____