

# International Student Application Form

Agent Details/Stamp



**AUSTRALIAN NATIONAL ACADEMY OF EDUCATION**

This Application Form asks for personal information about you. The main purpose for collecting this information is for administrative, regulatory and/or research purposes and to ensure our course is suitable for your needs. All staff at Australian National Academy of Education are required by law to protect the information provided on this Application Form. More information about privacy is included in the notice at the end of this form.

Course Application						
Tick	Course Code	Course Name	Duration	Course Fees		
			Total (Weeks)	Tuition	Resource	Application
<input type="checkbox"/>	BSB40520	Certificate IV in Leadership and Management	52	\$6,000	\$300	\$200
<input type="checkbox"/>	BSB50420	Diploma of Leadership and Management	52	\$6,000	\$300	\$200
<input type="checkbox"/>	BSB60420	Advanced Diploma of Leadership and Management	52	\$6,000	\$300	\$200
<input type="checkbox"/>	SIT30816	Certificate III in Commercial Cookery	63	\$12,900	\$1,100	\$200
<input type="checkbox"/>	SIT40516	Certificate IV in Commercial Cookery	97	\$14,500	\$1,100	\$200
<input type="checkbox"/>	SIT50416	Diploma of Hospitality Management	95	\$17,000	\$1,100	\$200
<input type="checkbox"/>	SIT60316	Advanced Diploma of Hospitality Management	129	\$18,900	\$1,100	\$200

Preferred start date:	<input type="checkbox"/> As soon as possible <input type="checkbox"/> From:    /    /
Have you ever studied with Australian National Academy of Education before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you wish to apply for <b>Credit</b> ? <i>If YES, certified copies of transcripts from previous qualifications must be provided with this form, along with a Credit Application Form.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe - I'd like more information
Do you wish to apply for <b>Recognition of Prior Learning</b> ? <i>If you indicate YES, you will be contacted to discuss this further.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe - I'd like more information
Would you like to pay a higher amount upfront? <i>(higher than the Total payable to secure this offer)</i>	<input type="checkbox"/> Yes, Amount: <input type="checkbox"/> No

Personal Details	
<b>1. Enter your full name, birth date and gender*</b>	
Family Name:	
First name:	
Birth date (dd/mm/yy)	/ /
Gender (Tick ONE box only)	<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>2. Enter your contact details</b>	
Mobile:	(    )    Home phone: (    )
Email address:	
<b>3. What is the address of your usual residence?</b>	
Flat/unit details:	
Number and Street name:	
Suburb, locality or town:	
State/territory and Postcode:	
<b>4. Is your postal address different from above?</b>	
<input type="checkbox"/> Yes (please specify): <input type="checkbox"/> No	

Passport Details	
<b>5. Please provide details of your passport</b>	
Citizenship:	Passport Number:    Expiry Date:
Are you currently in Australia?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, state your visa Type:	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Spouse <input type="checkbox"/> Others    Visa Subclass:

**Next of kin/emergency contact****6. Please provide an emergency contact**

Name:		Relationship to you:	
Address:			
Mobile:	( ) ( )	Home phone:	( ) ( )
Email:			

**Disability**

<b>7. Do you consider yourself to have a disability, impairment or long-term condition?</b>	<input type="checkbox"/> No (go to question 09)
	<input type="checkbox"/> Yes
<b>8. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list</b>	
<i>You may indicate more than one area) Please refer to the <u>Disability supplement</u> at the back of this form for an explanation of the following disabilities</i>	
<input type="checkbox"/> Hearing/deaf	<input type="checkbox"/> Physical
<input type="checkbox"/> Learning	<input type="checkbox"/> Mental Illness
<input type="checkbox"/> Vision	<input type="checkbox"/> Medical Condition
	<input type="checkbox"/> Intellectual
	<input type="checkbox"/> Acquired brain impairment
	<input type="checkbox"/> Other

**Educational Background****9. Please provide details of your past education including your highest qualification completed.**

Year Started	Year Completed	Name of Qualification	Name of Institution	Country

**Employment****10. Of the following categories, which BEST describes your current employment status? (Tick one box only)**

<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Part-time employee
<input type="checkbox"/> Self-employed - not employing others	<input type="checkbox"/> Employed - unpaid worker in a family
<input type="checkbox"/> Self-employed - employing others	<input type="checkbox"/> Unemployed - seeking full-time work
<input type="checkbox"/> Unemployed - seeking part-time work	<input type="checkbox"/> Not employed - not seeking employment

**Study Reason****11. Of the following categories, which BEST describes your main reason for undertaking this course? (Tick one box only)**

<input type="checkbox"/> 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

**Unique Student Identifier (USI)**

From 1 January 2015, Australian National Academy of Education can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-USI/> on computer or mobile device.

Please enter your USI:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	I don't have a USI number. I consent ANAE to apply on my behalf. You declare that you have read the privacy information at <a href="https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf">https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf</a>								
<input type="checkbox"/>	I don't have a USI number. I will create it myself.								

## PRIVACY NOTICE

Australian National Academy of Education has a Privacy Policy that guides the collection, storage, use and disclosure of information. Our Privacy Policy is provided on our website at [www.anae.edu.au](http://www.anae.edu.au) and summarised in our Student Handbook which all applicants receive prior to enrolment.

This Application Form asks for personal information about you. The main purpose for collecting this information is for administrative, regulatory and/or research purposes and to allocate appropriate resources for your learning and assessment needs.

All staff at Australian National Academy of Education are required by law to protect the information provided on this Application Form.

### EMERGENCY CONTACTS

These are people that Australian National Academy of Education may need to contact in an emergency during your participation in training. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Australian National Academy of Education.

### PERSONAL INFORMATION

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

### COLLECTION OF YOUR DATA

Australian National Academy of Education is required to provide the Department with student and training activity data. This includes personal information collected in the Australian National Academy of Education Application form and unique identifiers such as the Victorian Student Number (VSN) and the Commonwealth's Unique Student Identifier (USI).

Australian National Academy of Education provides data to the Department in accordance with the Victorian VET Student Statistical Collection Guidelines, available at <http://www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx>

### USE OF YOUR DATA

The Department uses student and training data, including personal information, for a range of VET purposes including administration, monitoring and planning.

A student's USI may be used for specific VET purposes including the verification of student data provided by Australian National Academy of Education; the administration and audit of VET providers and programs; education-related policy and research purposes; and to assist in determining eligibility for training subsidies.

### DISCLOSURE OF YOUR DATA

As necessary and where lawful, the Department may disclose VET data, including personal information, to its contractors, other government agencies, professional bodies and/or other organisations for VET-related purposes. In particular, this includes disclosure of VET student and training data to the Commonwealth and the National Centre for Vocational Education Research (NCVER).

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

- 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 statements of attainment or 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 programme 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)).

### LEGAL AND REGULATORY

The Department's collection and handling of enrolment data and VSNs is authorised under the Education and Training Reform Act 2006 (Vic). The Department is also authorised to collect and handle USIs in accordance with the Student Identifiers Act 2014 (Cth) and the Student Identifiers Regulation 2014 (Cth).

### SURVEY PARTICIPATION

You may be contacted to participate in a survey conducted by NCVER, Australian National Academy of Education's registering body, Australian Skills Quality Authority (ASQA) or a Department-endorsed project, audit or review relating to your training. If you participate you may choose to keep your responses confidential. This provides valuable feedback on the delivery of VET programs in Victoria. Please note you may opt out of the NCVER survey at the time of being contacted.

### CONSEQUENCES OF NOT PROVIDING YOUR INFORMATION

Failure to provide your personal information may mean that it is not possible for you to enrol in VET and/or to obtain a Victorian Government VET subsidy.

### ACCESS, CORRECTION AND COMPLAINTS

You have the right to seek access to or correction of your own personal information. You may also complain if you believe your privacy has been breached.

For further information, please contact Australian National Academy of Education's Privacy Officer in the first instance by writing to [info@anae.edu.au](mailto:info@anae.edu.au)

### FURTHER INFORMATION

For further information about the way the Department collects and handles personal information, including access, correction and complaints, go to <http://www.education.vic.gov.au/Pages/privacypolicv.aspx>.

For further information about Unique Student Identifiers, including access, correction and complaints, go to <http://www.usi.gov.au/Students/Pages/student-privacy.aspx>.

### UPDATING YOUR RECORDS

Please let us know if any of your details change by providing updated information to our office. This is particularly important if your phone number, residential, postal or email address change during your enrolment with Australian National Academy of Education

## DISABILITY SUPPLEMENT

If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list: Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.

### Hearing/deaf

Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

### Physical

A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

### Intellectual

In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

### Learning

A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

### Mental illness

Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.

### Acquired brain impairment

Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

### Vision

This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

### Medical condition

Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable, yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic fibrosis, asthma or diabetes.

### Other

A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.

### Student Declaration and Consent *please tick all*

<input type="checkbox"/>	I declare that the information I have provided to the best of my knowledge is true and correct.
<input type="checkbox"/>	I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.
<input type="checkbox"/>	I consent to the use and publication of my photograph by ANAE for academic and promotional purposes
Student Signature:	
Student Name:	
Date:	

### Application Checklist

<p><i>Provide a copy of the following documents with your application (you will need to bring the originals to your orientation day for verification):</i></p> <p><i>Please tick those that you are providing</i></p>	
<input type="checkbox"/>	Valid passport copy
<input type="checkbox"/>	Valid visa (if you have one)
<input type="checkbox"/>	High School certificate or other relevant certificates
<input type="checkbox"/>	Proof of English Language Proficiency
<input type="checkbox"/>	Any other relevant documents to support your application

### How did you find our college?

<input type="checkbox"/>	Website
<input type="checkbox"/>	Google
<input type="checkbox"/>	Facebook
<input type="checkbox"/>	WeChat
<input type="checkbox"/>	Recommendation
<input type="checkbox"/>	Agent (which?)
Agent Email:	
Officer:	

### Office Use only (ANAE staff to complete)

<input type="checkbox"/>	Applicant has completed all sections in the form (if not, contact the student for details)
<input type="checkbox"/>	Applicant has attached all supporting documents (if not, contact the student for details)
Checked by:	Date: