



LEADERS INSTITUTE OF TRAINING AND EDUCATION
Trading as LITE SECURITY RTO ID 41313 CRICOS ID 03503G

• Knowledge • Practice • Success • Continuity

Enrolment Form v5.4

Course/ Qualification/ Unit Code/Name	CPP20218 Certificate II in Security Operations										
Course Commencement Date											
Unique Student Identifier (USI) <i>All students have a USI if they have studied in Australia after 1st January 2015. Enter it here if you know it (search your email). If you do not have one, apply for one at www.usi.gov.au.</i>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										

Personal details

1. Enter your full name

Family name (surname) _____

First given name _____

Second given name (middle) _____

I have one name only

2. Enter your birth date

Day/month/year | | |

3. Gender (Tick ONE box only)

Male

Female

Other

4. Enter your contact details

Mobile _____ Email address _____

Alternative email address (optional) _____

5. What is the address of your usual residence?

Building/ name property _____

Flat/unit details _____

Street number _____

Street name _____

Suburb, locality or town _____ Postcode _____

6. What is your postal address (if different from above)?

Building/ name property _____

Flat/unit details _____

Street number _____

Street name _____

Suburb, locality or town _____ Postcode _____

Language and cultural diversity

7. In which country were you born?

Australia

Other – please specify _____

8. Do you speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)

No, English only

Yes, other – please specify _____

For International Students only - your IELTS/PTE score

Your date of award IELTS/PTE



LEADERS INSTITUTE OF TRAINING AND EDUCATION

Trading as LITE SECURITY RTO ID 41313 CRICOS ID 03503G

• Knowledge • Practice • Success • Continuity

Enrolment Form v5.4

9. Are you of Aboriginal or Torres Strait Islander origin?

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander

Disability

10. Do you consider yourself to have a disability, impairment or long-term condition?

Yes Y

No N **No – Go to question 12**

11. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following **list:**

- Hearing/deaf
- Physical
- Intellectual
- Learning
- Mental illness

- Acquired brain impairment
- Vision
- Medical condition
- Other

Schooling

12. What is your highest COMPLETED school level? (Tick ONE box **only**)

- Year 12 or equivalent Year 9 or equivalent
- Year 11 or equivalent Year 8 or below
- Year 10 or equivalent Never attended school

Never completed any primary or secondary level education – go to question 14

13. Are you still enrolled in secondary or senior secondary education?

Yes

No

Previous qualifications achieved

14. Have you SUCCESSFULLY completed any of the qualifications listed in question 15?

Yes Y

No N **No – go to question 16**

15. If YES, tick ANY applicable boxes.

- | | |
|--|---|
| 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/technician) <input type="checkbox"/> | Other education (including certificates or overseas qualifications not listed above) <input type="checkbox"/> |

Employment

16. Of the following categories, which BEST describes your current employment status? 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"/> |
| Self employed – employing others <input type="checkbox"/> | Not employed – not seeking employment <input type="checkbox"/> |



LEADERS INSTITUTE OF TRAINING AND EDUCATION

Trading as LITE SECURITY RTO ID 41313 CRICOS ID 03503G

• Knowledge • Practice • Success • Continuity

Enrolment Form v5.4

Study reason

17. Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship (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"/>	To get skills for community/voluntary work	<input type="checkbox"/>
		Other reasons	<input type="checkbox"/>

Privacy Notice

Under the *Data Provision Requirements 2012*, Leaders Institute of Training and 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).

Your personal information (including the personal information contained on this enrolment form), may be used or disclosed by Leaders Institute of Training and Education for statistical, administrative, regulatory and research purposes. Leaders Institute of Training and Education may disclose your personal information for these purposes to:

- Commonwealth and State or Territory government departments and authorised agencies; and
- NCVER.

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:

- populating authenticated VET transcripts;
- facilitating statistics and research relating to education, including surveys and data linkage;
- pre-populating RTO student enrolment forms;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive a student survey which may be administered by a government department or NCVER employee, agent or third party contractor or other authorised agencies. Please note 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 National VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

SUPPORTING DOCUMENTS

Email copies of the following to admin@leaderstraining.com.au, with your name and course date in the subject line. Note: We are required to keep copies of these documents. These will be kept securely and not shared with any third parties.

- Proof of address (i.e. phone or utilities bill, bank statement, lease, credit card bill or driver licence, etc)
- Email or screen shot of your Unique Student Identifier *Plus*

For Internationals

- Valid passport
- Visa grant letter (with QR code)
- Confirmation of enrolment at other

For Australian Residents/Citizens (100 points of ID)

- Medicare Card (25 points), *plus*
- Valid passport (Australian/foreign), or full birth certificate, or Australian Citizenship Certificate (70 each)
- Driver licence (40) or Council rates notice (35)



LEADERS INSTITUTE OF TRAINING AND EDUCATION
Trading as LITE SECURITY RTO ID 41313 CRICOS ID 03503G

• Knowledge • Practice • Success • Continuity

Enrolment Form v5.4

Institution/s (*Student visa-holders only*)

STUDENT DECLARATION AND CONSENT

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

I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

STUDENT SIGNATURE **DATE**

[OR ELECTRONIC ACKNOWLEDGEMENT]

PAYMENT METHODS (SEE ENROLMENT AGREEMENT FOR DETAILS OF PAYMENT SCHEDULES)

Payment can be made in person at the institution or via bank transfer using the following details:

EFT Banking Details:

Account Name: Leaders Institute of Training and Education

BSB: 063 225 **A/C No.** 10439998

Commonwealth Bank of Australia

Reference *Your Name, Start date of your course*

STUDENT MARKETING SURVEY (OPTIONAL) Please tell us how you heard about this course:

Word of Mouth (friend's recommendation) Facebook

Google search Other Internet search

www.leaderstraining.com.au Other _____

NOTES (OPTIONAL)

The course schedule is posted on the notice board at LITE. Please review the schedule and notify us of any issues regarding your availability during the course duration. International students may also wish to advise short visa conditions, etc.