



# Training Enrolment Application

## Domestic Student

### Instructions

Fill in all sections clearly and carefully by writing in block letters.

Information requested on this form is for national database; state government funding and tracking purposes and assists in ongoing qualification issuance as required.

All data is confidential and is not forwarded to any other party with the exception of the national statistical database and state government to inform future federal and state funding in Vocational Education and Training.

### Personal Details

|                |  |
|----------------|--|
| Title          |  |
| Family Name    |  |
| Middle Name    |  |
| Given Name     |  |
| Date of Birth* |  |
| Gender         |  |

\*Swann College does not accept enrolments for students Under 18 years of age.

### Contact Information

|               |  |
|---------------|--|
| Email         |  |
| Mobile Number |  |

### Nationality

|                          |  |
|--------------------------|--|
| Country you were born in |  |
| Country of citizenship   |  |
| Country of residence     |  |
| Visa Type*               |  |
| Visa Subclass            |  |
| Passport No              |  |

\*Please see here for temporary visa types for government subsidised training: <https://providers.skills.sa.gov.au/check-student-eligibility>

### Residential Address

|                   |  |           |  |
|-------------------|--|-----------|--|
| Unit              |  |           |  |
| Street No. & Name |  |           |  |
| Suburb/Town       |  | Post Code |  |
| State             |  | Country   |  |



**Postal Address**

|  |  |
|--|--|
|  | Tick this box if Postal Address is same as Residential Address, if not please complete below table |
|--|--|

|                   |  |           |  |
|-------------------|--|-----------|--|
| Unit              |  |           |  |
| Street No. & Name |  |           |  |
| Suburb/Town       |  | Post Code |  |
| State             |  | Country   |  |

**Emergency Contact Information**

|                |  |
|----------------|--|
| Person Name    |  |
| Relationship   |  |
| Contact Number |  |

**Courses**

Please select the Courses or qualifications you wish to enroll in:

| Name of the course/qualification  | Tick |
|---|------|
| AUR21920 – Certificate II in Automotive Tyre Servicing Technology   |      |
| AUR30320 – Certificate III in Automotive Electrical Technology  |      |
| AUR 30620 – Certificate III in Light Vehicle Mechanical Technology  |      |
| AUR30720 – Certificate III in Outdoor Power Equipment   |      |
| AUR30820 – Certificate III in Motorcycle Mechanical Technology  |      |
| AUR31120 -Certificate III in Heavy Commercial Vehicle Mechanical Technology   |      |
| AUR31520 – Certificate III in Automotive Diesel Engine Technology   |      |
| AUR40216 – Certificate IV in Automotive Mechanical Diagnosis  |      |
| AUR40620 – Certificate IV in Automotive Electrical Technology   |      |
| AUR50116 – Diploma of Automotive Management   |      |
| AUR50216 – Diploma of Automotive Technology   |      |
| BSB50120 – Diploma of Business  |      |
| BSB60120 – Advanced Diploma of Business   |      |
| UEE60220 – Advanced Diploma of Electronics and Communications Engineering   |      |
| *Automotive Air Conditioning Training<br>AURETU013 Service Air Conditioning and HVAC Systems AURETU014 Diagnose and Repair Air Conditioning and HVAC components |      |
| AURSS00064 Battery Electric Vehicle Inspection and Servicing <b>Skill Set</b>   |      |
| AURSS00037 Hybrid Electric Vehicle Inspection and Servicing <b>Skill Set</b>  |      |
| *Battery/ Hybrid Electric Vehicle Inspection <b>Module 1</b>  |      |
| *AURETR149 Apply knowledge of ADAS technology in vehicle pre-repair scans   |      |
| *AURETH012 Service and maintain electrical components in hybrid electric vehicles   |      |

\*The following training products are not on the Subsidised Training List therefore these are not funded.



**Credit Transfer/RPL**

Do you wish to apply for Credit Transfer or RPL (Recognition of Prior Learning)?

|                 |  |     |  |
|-----------------|--|-----|--|
| Credit Transfer |  | RPL |  |
|-----------------|--|-----|--|

**When do you want to start the course**

|                |  |      |  |
|----------------|--|------|--|
| Specific Month |  | Year |  |
|----------------|--|------|--|

**Employment Details**

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"/> Employed unpaid worker           |
| <input type="checkbox"/> Self-employed-not employing others | <input type="checkbox"/> Employer                 | <input type="checkbox"/> Unemployed-seeking fulltime work |
| <input type="checkbox"/> Unemployed-seeking part time work  | <input type="checkbox"/> Not employed-not seeking |   |

|                  |  |
|------------------|--|
| Your Position    |  |
| Business Name    |  |
| Business Address |  |
| Contact Number   |  |

**Schooling**

Are you still attending secondary school? Yes  No

\*School-enrolled students are subject to separate eligibility criteria. However, Swann College does not enrol students who are still in Secondary School.

If no, in which year did you complete school?

What is your highest completed school level?

|                   |  |                           |  |                      |  |
|-------------------|--|---------------------------|--|----------------------|--|
| Completed year 12 |  | Completed year 11         |  | Completed year 10    |  |
| Completed year 9  |  | Completed year 8 or lower |  | Did not go to school |  |

**Previously achieved qualifications**

Have you successfully completed any of the following qualifications?

|   |   |
|---|---|
| <input type="checkbox"/> Bachelor's degree or Higher Degree Year completed:           | <input type="checkbox"/> Certificate III (or Trade certificate) Year completed: |
| <input type="checkbox"/> Advanced Diploma or Associate Degree Year completed:         | <input type="checkbox"/> Certificate II Year completed:                         |
| <input type="checkbox"/> Diploma (or Associate Diploma) Year completed:               | <input type="checkbox"/> Certificate I Year completed:                          |
| <input type="checkbox"/> Certificate IV (or Advanced Cert/Technician) Year completed: | <input type="checkbox"/> Certificates other than the above Year completed:      |

\*Entitlement's based on an individual's highest level of non-school education and their employment status at first enrolment in subsidized VET can be found here: <https://providers.skills.sa.gov.au/check-student-eligibility>. Currently, eligible students can access courses regardless of their prior qualifications and undertake more than one course or short course.



**Study Reason**

Of the following categories, which BEST describes your main reason for undertaking this course/traineeship /apprenticeship?  
(Tick ONE box only)

- |  |  |
|--|--|
| <input type="checkbox"/> To get a job                              | <input type="checkbox"/> To develop my existing business     |
| <input type="checkbox"/> To start my own business                  | <input type="checkbox"/> To try a different career           |
| <input type="checkbox"/> To get a better job                       | <input type="checkbox"/> It was a requirement of my job      |
| <input type="checkbox"/> I wanted extra skills for my job          | <input type="checkbox"/> To get into another course of study |
| <input type="checkbox"/> For personal interest or self-development | <input type="checkbox"/> other reasons                       |

Please explain in a few words what your career goals and aspirations are

**Unique Student Identifier (USI) Authority**

Do you have a Unique Student Identifier (USI) number? Yes  No

If yes, my USI number is:

If no, I authorise Swann College to apply for my USI number on my behalf. Yes  No

**You will need to supply a copy of your driver’s license with your application form to obtain a USI from us or please obtain a USI number by visiting the website [www.usi.gov.au](http://www.usi.gov.au).**

**Language and cultural diversity**

Are you of aboriginal or Torres Strait Islander origin? No   
 (For persons of both Aboriginal AND Torres Strait Islander origin, mark both “Yes” boxes) Yes   
 Yes, Torres Strait Islander

Is English your first language Yes  No

Do you speak a second language No, English only  Yes, other:

How well do you speak English? Very well  Well  Not well  Not at all

Have you completed an English Proficiency Test within the last 24 months? Yes  No

**\*If yes please attach a certified copy of your results\***

**Disabilities**

Do you have a disability, impairment or long-term condition that may impact your studies and for which you will require support? (You may indicate more than one area)

|       |              |                |          |                           |
|-------|--------------|----------------|----------|---------------------------|
| No    | Vision       | Hearing/Deaf   | Physical | Medical Condition         |
| Other | Intellectual | Mental Illness | Learning | Acquired brain impairment |



**Caring Responsibilities**

Understanding any unpaid caring responsibilities you have can inform Swann College in addressing any barriers to participation in vocational education and training that may exist.

Do you have any caring responsibilities for a child/children and/or another adult/s?

- Yes                       No                       Prefer not to say.

If yes, please select all that apply:

If you share care responsibilities equally then please answer as the primary carer. A primary carer is defined as an individual who plays a substantial role in the care of another person, who may or may not have multiple primary carers. Primary thus describes the level of responsibility to care for another person, rather than being the sole carer for that person.

- Primary carer of a child or children (under 18 years)
- Primary carer of a child or children who is disabled or has a health condition or illness, or temporary care needs, (Under 18 years).
- Primary carer or assistant for a disabled adult or adults (18 years and over)
- Primary carer or assistant for an older person or people (65 years and over)
- Secondary carer (another person carries out main caring role)
- Prefer not to say.

**Document Checklist**

Please ensure you have included the following applicable documents when submitting your Enrolment Form:

- Passport including Visa details/Australian citizenship certificate
- Driving Licence
- Birth certificate: not an extract
- Proof of age card
- I attached my 100 points ID documents with this form.
- Medicare card
- Evidence of Qualification
- Unique Student Identifier (USI)

**Swann College’s Obligations**

Swann College is responsible for the quality of the training and assessment in compliance with the Standards for Registered Training Organisations (RTOs) 2015, and for the issuance of the Australian Qualifications Framework [AQF] certification documentation.

**Student Declaration**

I understand information contained in these forms may be provided to State and Commonwealth agencies and research organisations and I consent to that occurring. I certify all details provided on these forms are true & correct.  
I agree to pay the full course fees 14 days before the commencement of my course.



I understand I will be required to undertake an Upfront Assessment of Needs (UAN) in order to access subsidised qualifications, skill sets and managed courses, including qualifications delivered under a Training Contract arrangement or through a project. I further understand all relevant documentation including notes in relation to my enrolment and any identified needs and relevant support will be retained by Swann College.

I understand once my UAN is completed, I will be required to complete the participant agreement form prior to my training account has been completed.

I understand further information regarding Swann College’s work experience component, policies and procedures as well as (funded) learning support and eligibility is available on its website: [www.swanncollege.edu.au](http://www.swanncollege.edu.au).

Student Sign:  Date:

**Payment Details**

Please do not hesitate to contact Swann College if you require an Invoice prior to payment, however, a Receipt will be issued to business or personal name once we receive the payment.

Account Name: - Swann College  
Bank: - Bank SA  
BSB: - 105-029  
Account No: - 083417340

**Office Use Only**

Application Fee Paid    Yes     No     Receipt Number

Application accepted    Yes     No

Accepted by:     Sign     Date

Rejected by:     Sign     Date

The reason for rejecting this application (if rejected):

Information entered on SMS    Yes     Date

Administrator Sign     Date