

## TRAINEE ENROLMENT FORM

### Instructions:

Fill in all sections clearly and carefully by writing in block letters. The form is to be returned to Western Business School with any supporting documents required.

Information requested on this form is for national database and tracking purposes. All information is confidential and is not forwarded to any other party except as required under the Standards for NVR Registered Training Organisations 2015, State Government Contracts (Smart and Skilled) or by law.

### 1 PERSONAL DETAILS

Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names. If you do not yet have a USI and want WBS to apply for a USI on your behalf, you must write your name, including any middle names, exactly as written in the identity document you choose to use for this purpose.

Title: (Please tick) Mr  Ms  Miss  Mrs  Other  \_\_\_\_\_

Surname (Legal Family Name): \_\_\_\_\_

Given Names (Legal Given Names): \_\_\_\_\_

Gender:  Male  Female  Indeterminate/Intersex/Unspecified Date of Birth: / /

In which town or suburb were you born in? \_\_\_\_\_

### 2 UNIQUE STUDENT IDENTIFIER

From 1 January 2015, we Western Business School can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your program if you do not have a Unique Student Identifier (USI).

Enter your Unique Student Identifier (USI)

I do not have a 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 or WBS can create one on your behalf. Refer to the privacy and consent declaration outlined in [Section 18](#) of this enrolment form.

### 3 EMPLOYER DETAILS

Business Name: WPC Group Pty Ltd

Address: Suite 2/190 George St Parramatta Suburb/State: NSW 2150

Workplace Supervisor: \_\_\_\_\_ Telephone: 1300 760 099

Supervisor's Contact Email: \_\_\_\_\_

### 4 PERSONAL CONTACT DETAILS

Phone Numbers: Mobile \_\_\_\_\_ Work \_\_\_\_\_ Home \_\_\_\_\_

Email address: *MUST be provided*  
Primary \_\_\_\_\_

Secondary \_\_\_\_\_

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## 5 EMERGENCY CONTACT DETAILS

Emergency / Next of Kin Contact Details: Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

## 6 RESIDENTIAL & POSTAL ADDRESS

**Residential Address:** Unit Number: \_\_\_\_\_ Building Name: \_\_\_\_\_  
Street Number: \_\_\_\_\_ Street name: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: NSW Post Code: \_\_\_\_\_

Is your postal address the same as your residential address? Please tick No  Yes  Add details below

**Postal Address:** Unit Number: \_\_\_\_\_ Building Name: \_\_\_\_\_  
Street Number: \_\_\_\_\_ Street name: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

## 7 CULTURAL DIVERSITY

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

In which country were you born?  Australia  Other - please specify \_\_\_\_\_

Are you an Australian Citizen  or Permanent Resident

## 8 SECONDARY EDUCATION

Are you still attending secondary school?  Yes  No

What is your highest completed school level?

Completed year 12  Completed year 11  Completed year 10  
 Completed year 9 or equivalent  Completed year 8 or lower  Never attended school

## 9 EMPLOYMENT STATUS

Of the following categories, which best describes your **CURRENT** employment status? (Tick ONE box only) (The role you are about to commence)

Full-time employee  Employed – unpaid worker in a family business  
 Part-time employee  Unemployed – seeking full-time work  
 Self employed – not employing others  Unemployed – seeking part-time work  
 Employer  Not employed – not seeking employment

## 10 DISABILITY SUPPORT

Western Business School is an equal opportunity organisation and we would like to provide you with a learning environment suitable to your needs. To enable us to meet these needs, it is important we have an understanding of the best way to support you during your study. The questions in this section are designed to assist us determine how we can support you.

Do you consider that you have a disability, impairment or long-term condition?  Yes  No - (Go to next section)

If Yes, please indicate the areas of disability, impairment or long term condition: (You may indicate more than one area.)

Vision  Hearing/Deaf  Medical Condition  Physical  Acquired Brain Impairment  
 Learning  Intellectual  Mental Illness  Other

If you have answered yes, would you like to discuss this with us before your training commences?  Yes  No

If yes, who would you like to discuss this with?

Your Industry consultant (WPC Group employees only)  Your trainer  
 Your workplace supervisor  A WBS representative

Would you like your discussions to be through:  a phone call  an email  a face to face meeting

## 11 FURTHER EDUCATION

Have you **SUCCESSFULLY** completed any of the following qualifications?  No ( Go to next section)

Yes. Please enter one of these Prior Education Achievement Recognition Identifiers any applicable qualification level.

Priority Order 1. A=Australian 2. E=Australian Equivalent 3. I = International

A	E	I		A	E	I	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bachelor Degree or Higher Degree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate III (or Trade Certificate)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advanced Diploma or Associate Degree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate II
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Diploma (or Associate Diploma)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate I
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate IV (or Advanced Certificate/Technician)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificates other than the above

Were any of the qualifications completed while at Secondary School?  No  Yes - provide details below

## 12 LANGUAGE

Do you speak a language other than English at home?

No, English only (Go to next section 5 Disability)  Yes, other – please specify \_\_\_\_\_

## 13 STUDY REASON

Of the following categories, which best describes your main reason for undertaking this 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 for a different career
<input type="checkbox"/> To get a better job or promotion	<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

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## 14 COURSE QUALIFICATION DETAILS

<input type="checkbox"/>	BSB30115	Certificate III in Business	<input type="checkbox"/>	BSB40215	Certificate IV in Business
<input type="checkbox"/>	Other	Code _____		Title	_____
Date of enrolment:		_____	Training Agreement No. (Applicable to Studentships Only)		_____

## 15 RPL and CREDIT TRANSFER

Credit Transfer (CT) and Recognition of Prior Learning (RPL) are opportunities for your prior skills and knowledge to be recognised. You have been provided information previously about Credit Transfer and RPL through the Pre-training review, our website and the student hand book. Confirm you have been provided the opportunity to apply for Credit transfer and Recognition of Prior Learning,

<input type="checkbox"/>	Western Business School have provided me with information relating to Credit Transfer and RPL, The information provided on my Pre-training review is correct.
<input type="checkbox"/>	I have/will apply for Credit Transfer/Recognition of Prior Learning and agree to provide the correct evidence required before the commencement of my course. .

## 16 ELIGIBILITY FOR CONCESSION FEE

To be eligible for the TAFE NSW Concession fee (\$240 per course enrolment) under the Smart and Skilled Program, you must meet one of the criteria below on this form and be receiving the entitlement on the enrolment date, or no later than the first day of participation in training.

**For Youth Allowance or Austudy, you must provide the Department of Human Services (Centrelink) approval letter as evidence that the commencement date of the benefit is within two weeks of enrolment, first class attendance or first participation in training. No other grounds will be recognised.**

Note: Concessions are only available to eligible trainees for enrolment in courses where the government subsidised NSW fee applies.

**PLEASE NOTE:** If you wish to apply for the Concession Fee, evidence of eligibility from Centrelink must be provided to Western Business School. **Training will not commence until this evidence and proof of payment has been received.**

**I am applying for Concession and I am currently receiving the following Entitlement(s) (Please tick benefit/allowance):**

<input type="checkbox"/> Age Pension (AGEP)	<input type="checkbox"/> Parenting Payment (Single) (PPS)
<input type="checkbox"/> Austudy (AUS)	<input type="checkbox"/> Sickness Allowance (SICK)
<input type="checkbox"/> Carer Payment (CARE)	<input type="checkbox"/> Special Benefit (SPEC)
<input type="checkbox"/> Disability Support Pension (DSP)	<input type="checkbox"/> Veterans' Affairs Payments (VAS)
<input type="checkbox"/> Newstart Allowance (NEWS)	<input type="checkbox"/> Veterans' Child. Edu. Scheme (VAS)
<input type="checkbox"/> Farm Help Income Support (FHIS)	<input type="checkbox"/> Widow Allowance (WPA)
<input type="checkbox"/> Family Tax Benefit Part A (max rate) (FTBA)	<input type="checkbox"/> Widow 'B' Pension (WIDP)
<input type="checkbox"/> Youth Allowance (YA)	<input type="checkbox"/> Wife Pension (WIFE)

**I am currently a dependant child, spouse or partner of a recipient of an eligible Entitlement**

Please indicate the dependency status:

<input type="checkbox"/> Dependant Child of a Beneficiary (excluding the Disability Support Pension) (CHLD)
<input type="checkbox"/> Austudy (AUS)
<input type="checkbox"/> Dependant Spouse or Partner of a Beneficiary (excluding the Disability Support Pension) (PART)
<input type="checkbox"/> Dependant Child of a Disability Support Pension (Centrelink/Veterans' Affairs) Beneficiary
<input type="checkbox"/> Dependant Spouse or Partner of a Disability Support Pension (Centrelink/Veterans' Affairs) Beneficiary
<input type="checkbox"/> Newstart Allowance (NEWS)

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## LIST OF APPROPRIATE EVIDENCE TO SUPPORT YOUR APPLICATION

I have attached the following evidence to support my claim for Concession payment:

- A letter from the Department of Human Services (Centrelink) or the Department of Veterans' Affairs confirming that you are currently receiving the stated allowance (Required for Youth Allowance or Austudy)
- Current Pensioner Concession Card
- Austudy approval for 2019
- A current Department of Human Services (Centrelink) Income Statement      **OR**
- Evidence that the benefit provider accepts you as the dependant child, spouse or partner of a beneficiary receiving a benefit or allowance

**Note:** A Department of Human Services (Centrelink) Health Care Card is not acceptable proof of current beneficiary status.

## 17 ELIGIBILITY FOR FEE EXEMPTION

I seek a full exemption from paying fees for the following reasons:

- I am an Australian Aboriginal and/or Torres Strait Islander (*please indicate in Section 4 LANGUAGE AND CULTURAL DIVERSITY*)
- I am currently receiving a Disability Support Pension (Centrelink/Veterans' Affairs) (*please indicate in Section 5*)
- I am a dependent child, spouse or partner of a recipient of the Disability Support Pension (Centrelink/Veterans' Affairs).

I have attached the following evidence to support my claim for Exemption from payment (*not required for Australian Aboriginal and/or Torres Strait Islander*):

- A letter from the Department of Human Services (Centrelink) or the Department of Veterans' Affairs confirming that you are currently receiving the stated allowance
- Current Pensioner Concession Card (*Health Care Cards/Low Income Cards/Travel Cards not accepted*)
- A current Department of Human Services (Centrelink) Income Statement
- Evidence that the Entitlement provider (Centrelink or Department of Veterans' Affairs benefit, pension, payment or allowance) accepts the child/spouse/partner as a dependant must be sighted

## 18 UNIQUE STUDENT IDENTIFIER - PRIVACY & CONSENT STATEMENT

Western Business School must have your consent to access your private information in order to create and or verify your USI.

### Privacy Notice

If you do not already have a Unique Student Identifier (USI) and you want Western Business School to apply for a USI to the Student Identifiers Registrar (Registrar) on your behalf, Western Business School will provide to the Registrar the following items of personal information about you:

- your name, including first or given name(s), middle name(s) and surname or family name as they appear in an identification document;
- your date of birth, as it appears, if shown, in the chosen document of identity;
- your city or town of birth;
- your country of birth;
- your gender; and
- your contact details.

When we apply for a USI on your behalf the Registrar will verify your identity. The Registrar will do so through the Document Verification Service (DVS) managed by the Attorney-General's Department which is built into the USI online application process if you have documents such as a Medicare card, birth certificate, drivers' licence, Australian passport, citizenship document, certificate of registration by descent, ImmiCard or Australian entry visa.

If you do not have a document suitable for the DVS and we are authorised to do so by the Registrar we may be able to verify your identity by other means. If you do not have any of the identity documents mentioned above, and we are not authorised by the Registrar to verify your identity by other means, we cannot apply for a USI on your behalf and you should contact the Student Identifiers Registrar.

In accordance with section 11 of the Trainee Identifiers Act 2014 Cth (SI Act), we will securely destroy personal information which we collect from you solely for the purpose of applying for a USI on your behalf as soon as practicable after the USI application has been made or the information is no longer needed for that purpose, unless we are required by or under any law to retain it.

The personal information about you that we provide to the Registrar, including your identity information, is protected by the Privacy Act 1988 Cth (Privacy Act). The collection, use and disclosure of your USI are protected by the SI Act.

If you ask Western Business School to make an application for a trainee identifier on your behalf, Western Business School will have to declare that Western Business School has complied with certain terms and conditions to be able to access the online trainee identifier portal and submit this application, including a declaration that Western Business School has given you the following privacy notice:

**You are advised and agree that you understand that the personal information you provide to us in connection with your application for a USI:**

- is collected by the Registrar for the purposes of:
- applying for, verifying and giving a USI;
- resolving problems with a USI; and
- creating authenticated vocational education and training (VET) transcripts;
- may be disclosed to:
- Commonwealth and State/Territory government departments and agencies and statutory bodies performing functions relating to VET for:
- the purposes of administering and auditing Vocational Education and Training (VET), VET providers and VET programs;
- education related policy and research purposes; and
- to assist in determining eligibility for training subsidies;
- VET Regulators to enable them to perform their VET regulatory functions;
- VET Admission Bodies for the purposes of administering VET and VET programs;
- current and former Registered Training Organisations to enable them to deliver VET courses to the individual, meet their reporting obligations under the VET standards and government contracts and assist in determining eligibility for training subsidies;
- schools for the purposes of delivering VET courses to the individual and reporting on these courses;
- the National Centre for Vocational Education Research for the purpose of creating authenticated VET transcripts, resolving problems with USIs and for the collection, preparation and auditing of national VET statistics;
- researchers for education and training related research purposes;
- any other person or agency that may be authorised or required by law to access the information;
- any entity contractually engaged by the Trainee Identifiers Registrar to assist in the performance of his or her functions in the administration of the USI system; and
- will not otherwise be disclosed without your consent unless authorised or required by or under law
- and you consent to WBS accessing and using this information to verify and/or create your USI.

## Privacy and complaints policies

You can find further information on how the Registrar collects, uses and discloses the personal information about you at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf> or by contacting the Registrar on 1300 857 536. The Registrar's Privacy Policy contains information about how you may access and seek correction of the personal information held about you and how you may make a complaint about a breach of privacy by the Registrar in connection with the USI and how such complaints will be dealt with.

You may also make a complaint to the Information Commissioner about an interference with privacy pursuant to the Privacy Act, which includes the following:

- misuse or interference of or unauthorised collection, use, access, modification or disclosure of USIs; and
- a failure by us to destroy personal information collected by you only for the purpose of applying for a USI on your behalf.

For information about how Western Business School collects, uses and discloses your personal information generally, including how you can make a complaint about a breach of privacy, please refer to Western Business School's privacy policy which can be found at [www.wbs.org.au](http://www.wbs.org.au)

Please sign in the next section to confirm your understanding of the USI information provided above.

**The Smart and Skilled website is available for you to access at any time. <https://smartandskilled.nsw.gov.au/> or call 1300 772 104. The Administration Manager of WBS is the delegated Consumer Protection Officer and can be contacted on 039321 0844**

## 19 DATA COLLECTION AND WESTERN BUSINESS SCHOOL PRIVACY STATEMENT

Read the Privacy notification below, provided by the Federal Government, the New South Wales Government and WBS

### Federal Government Privacy Notice

The Privacy Notice and Student Declaration is a statement acknowledged by a student to indicate awareness that personal information collected from the student may be used together with training activity information. The privacy statement lists the ways information about the student is held, used, disclosed and managed.

### Smart and Skilled – NEW SOUTH WALES

#### CONSENT TO USE AND DISCLOSURE OF PERSONAL INFORMATION

I understand and agree that, under the Data Provision Requirements 2012, Western Business School (WPC Group Ltd) is required to collect personal information (information or an opinion about me), collected from me, my parent or guardian, such as my name, Unique Trainee Identifier, date of birth, contact details, training outcomes and performance, or sensitive personal information (including my ethnicity or health information) and other enrolment and training activity-related information (together **Personal Information**) and disclose that Personal Information to the National Centre for Vocational Education Research Ltd (NCVER).

My Personal Information (including the personal information contained on my enrolment form and my training activity data) may be used or disclosed by Western Business School (WPC Group Ltd) for statistical, regulatory and research purposes. Western Business School (WPC Group Ltd) may disclose my personal information for these purposes to third parties, including:

- School – if I am a secondary student undertaking VET, including a school-based apprenticeship or traineeship
- Employer – if I am enrolled in training paid by my employer
- Commonwealth and State or Territory government departments and authorised agencies, including the NSW Department of Industry (Training Services NSW)
- NCVER
- Organisations conducting student surveys; and
- Researchers

Personal Information disclosed to NCVER may be used or disclosed for the following purposes:

- Issuing a VET Statement of Attainment or VET 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
- Administration VET, including program administration, regulation, monitoring and evaluation.

I may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. I may opt out of the survey at the time of being contacted.

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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)).

The Department may disclose my Personal Information to other Australian government agencies, including those located in States and Territories outside New South Wales.

The above government agencies may use my Personal Information for any purpose relating to the exercise of their government functions, including but not limited to the evaluation and assessment of my training, the determination of my eligibility to receive subsidised training or for any Fee Exemptions or Concessions. My Personal Information may also be disclosed to other third parties if required by law.

I also acknowledge and agree that the Department may contact me by telephone, email or post during or after I have ceased subsidised training with Western Business School for the purposes of evaluating and assessing my subsidised training.

I ..... acknowledge that I have read the Privacy Notices in relation to the USI, and both Federal and State Governments. I have read, understand and consent to the collection, use and disclosure of my personal information in the manner outlined above by Western Business School (which may include sensitive information) pursuant to the information detailed at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf> (also outlined above) and NCVER policies, procedures and protocols published on NCVER's website at [www.ncver.edu.au](http://www.ncver.edu.au). I declare that the information I have provided to the best of my knowledge is true and correct.

I understand, acknowledge and agree to the terms described in this privacy statement at items 18 and 19 above.

Student signature\*: ..... Date: / / Time: am / pm

\*If under 18 Parent/guardian to sign

Parent / Guardian Name: .....

Parent / Guardian signature \*: ..... Date: / /



## 20 PAYMENT OF COURSE FEES

Please indicate below the payment method that will be used to pay for your course fees (tick the appropriate box).

Your training will only commence once your enrolment is complete and the applicable course fees have been approved and finalised.

Tick applicable Payment Amount and Method of Payment.

### PAYMENT AMOUNT – TRAINEESHIP ONLY

Standard Fee  \$1000.00    Concession Fee (\*Evidence is required)  \$240.00\*    Exemption  \$0 fees\*

Salary Deduction Request (please attach completed Salary Deduction Form with enrolment)

## 21 REFUNDS

All applications for refunds must be made in writing by way of the 'Application for Refund' form and submitted to RTO Administration. Approved applications will be processed within 14 days from the date of application.

The assessment of refund applications shall be granted as indicated below:

Outline of Refunds	
Withdrawal prior to agreed start date	Full refund
Withdrawal after the agreed start date	50% refund of unused tuition fees
Course withdrawn by RTO	Full refund
The RTO is unable to provide the course for which the original enrolment and payment has been made	Full refund

### ***Extenuating circumstances***

Trainees may have extenuating circumstances that prevent them from attending scheduled workplace visits.

These circumstances may include (but are not limited to):

- Illness
- Family or personal matters
- Other extraordinary reasons

Where evidence can be successfully provided to support the Trainee's circumstances, a refund of unused course fees will be issued. The decision of assessing the extenuating circumstances shall be assessed on a case by case situation.

***Please note: where the Trainee breaches the conditions of enrolment no refund is payable.***

## 22 ENROLMENT CONDITIONS

In completing this enrolment form the trainee is agreeing to a contract with Western Business School that stipulates the following:

- Once the trainee commences the nominated course, Western Business School will deliver the Training Program using competency based training principles and practices in accordance with Australian Skills Quality Authority (ASQA) and Standards for NVR Registered Training Organisations 2015.
- WBS and the Trainee agree to work together to produce a unified approach in the Trainee achieving the relevant qualification.
- The course fees payable to Western Business School include the provision of the following services:
  - Training and Assessment
  - Ongoing Administration Processes
  - Certification/Statement of Attainment
- Where a trainee has undertaken an assessment and it has been marked as 'Not yet Competent' (NYC), they be allowed to re-sit the test/or have a re-assessment. If they are deemed 'NYC' for a second time they are to re-enrol into that unit/ subject.
- A request for WBS to provide a duplicate Certificate of Qualification and Record of Results or Statement of Attainment should be completed in writing to the Administration Manager of Western Business School and a charge of \$50 will apply.
- WBS reserves the right to accept or reject any application for enrolment at its discretion.
- WBS reserves the right to cancel any course prior to the commencement date of the course should it be deemed necessary and in that event, shall refund all payments received from the trainee, if applicable. Please refer to our refund policy.
- Refunds are made when a trainee application supports one of the above reasons for refund. Any refundable amounts found to be due to the trainee will be made within 14 days.
- If false or inaccurate information is provided at the time of enrolment in regards to eligibility of Concession, any decision made as a result may be reversed and the Standard fee will be required to be paid without delay.

## 23 TRAINEE DECLARATION

In signing and submitting this 'Enrolment Form' the trainee acknowledges:

- That the information provided is complete and correct.
- In the event they (the trainee) cancels or ceases training, any unused paid tuition fees shall be refundable where a request is received in writing within 30 days of cancellation.
- They agree to be bound by the WBS rules and regulations and any amendments made to the rules and regulations.
- A Pre-training review, including a Language, Literacy and Numeracy test has been conducted prior to the course commencement.
- Opportunities for Recognition of Prior Learning and Credit Transfer have been discussed.
- Any other pre-requisites identified through the enrolment process will be adhered to.
- In the event contact details change while studying with WBS, the trainee must advise us of these changes within 7 days. These details include but are not limited to details such as e-mail, address, and contact phone details.
- The process for payment of fees and charges has been explained to me and I have provided my consent for deduction from my salary (where applicable).
- The Participant Information Handbook provided before enrolment has been read and understood.
- They have read and understand the RTOs Privacy Policy, the Complaints and Appeals Policy and process as outlined on the website [www.wbs.org.au](http://www.wbs.org.au)
- They understand they are undertaking a Traineeship which is subsidised by the NSW government as part of the Smart and Skilled Program.
- They understand that information contained in these forms may be provided to State and Commonwealth agencies and research organisations and consent to sharing of that information.
- Information provided on this form is true and correct and will be used as evidence of eligibility for a subsidised training position, funded by the NSW government.
- They agree to the Enrolment Conditions (listed above in this document).
- Making a false declaration has serious consequences which may result in the Student/student having to pay full course fees.

Trainee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Western Business School Provider ID 4183

Authorised by: General Manager

Document Owner: RTO Administration Manager

Page 10 of 11

Original Issue: Dec 2014

Current Version: 07/01/2019

Review Date: 01/12/2019

## 24 SUPPORTING DOCUMENTS

Please tick the following relating to any attached documents:

### Concession

- I am receiving Youth Allowance and I have attached my Department of Human Services (Centrelink) approval letter as evidence
- I am currently receiving a Centrelink benefit other than Youth Allowance, and have provided relevant evidence for your records
- I am applying for a Centrelink benefit other than Youth Allowance, and have attached a copy of relevant Centrelink evidence for your records
- I am applying for exemption from tuition fees and have attached relevant evidence for your records

### Payment of Course Fees

- I agree to have my course fees deducted from my pay on a fortnightly basis.

## 25 RTO CONFIRMATION OF ENROLMENT

Enrolment process completed by:

RTO Delegate Name: \_\_\_\_\_ Signed \_\_\_\_\_ Date:    /    /

### OFFICE USE ONLY

Please tick the following relating to any attached documents:

- Concession /Health Care Card is hard copy
- Salary Deduction Request form
- Health Care Concession Card is Digital Wallet
- JSA Referral Form attached
- Sponsorship form completed
- Evidence of identification for the purposes of gathering USI

RTO Delegate Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_