



# **DOMESTIC STUDENT ENROLMENT FORM**

# 01. Type of enrolment (Tick ONE box only)

Apprenticeships and Traineeships (A&T)

Job Trainer (JT)

Training Guarantee for SACE Students (TGSS)

I declare that advice has been provided to me concerning expectations and rules regarding SA government funded training programs offered at Skills Australia Institute. For the Participant Eligibility Criteria apply, visit <a href="https://www.skills.sa.gov.au">www.skills.sa.gov.au</a> for the criteria information.

Do you live or work in South Australia?	Yes	No
Are you 18 years or older?	Yes	No
Are you enrolled in high school?	Yes	No
Would you like to do an apprenticeship or traineeship?	Yes	No
Have you undertaken subsidised training previously?	Yes	No
Are you being referred by a Job Services Australian Provider?.	Yes	No
If yes, have you provided the ESP Referral Form from your employment provider?	Yes	No
Are you being referred by a Disability Employment Service Provider?	Yes	No
If yes, have you provided the ESP Referral Form from your employment provider?	Yes	No
Do you agree to undergo an Upfront Assessment of Need Assessment (UAN)?	Yes	No
Do you agree to the conditions of access determined through the Upfront Assessment of Need (UAN)?	Yes	No

# 02. What qualification are you enrolling into?

Course Code	Course Name	Tick Here	
CARPENTRY			
CPC30220	Certificate III in Carpentry		
	AUTOMOTIVE		
AUR30620	Certificate III in Light Vehicle Mechanical Technology		
CHILDCARE			
CHC30121	Certificate III in Early Childhood Education and Care		
CHC50121	Diploma of Early Childhood Education and Care		
MARKETING			
BSB42415	Certificate IV in Marketing and Communication		
BSB52415	Diploma of Marketing and Communication		

# 03. What is your title?

Mr. Mrs. Ms. Miss

# 04. Enter your full name\*:

Family name (surname):
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Second Given name (Middle):		
*Please write the name that you used when you applied for your Unique Studen and want SAI to apply for a USI on your behalf, you must write your name,includ choose to use for this purpose.		
05. Enter your Date of Birth : 06	. Gender (Tick ON	IE box only) :
Day/month/year: / /	Male Female	Other
07. Enter your Unique Student Identifier (USI) :		
From 1 January 2015, we (SAI) can be prevented from issuing you with a national complete your course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we submit to NCVER. In http://www.usi.gov.au/create-your-USI/ on computer or mobile device.		
08. Residency status (Tick ONE box only)		
Australian Citizen Australian Permanent Resident Permanent Visa	– Please Specify	New Zealand Citizen
If you are on an <u>Australian visa:</u>		
Type of Visa	500, 570, 475,)	Visa Expiry Date
09. Enter your contact details		
Home phone		Mobile
Email address	SS	
10. What is the address of your usual residence?		
10. What is the address of your usual residence?  Building property name		Street Number
·	Flat/unit number	
Building property name	Flat/unit number	Street Number
Building property name  Street Name  Suburb	Flat/unit number	Street Number
Building property name	Flat/unit number State Flat/unit number	Street Number
Building property name	Flat/unit number State Flat/unit number	Street Number
Building property name Suburb Suburb Suburb PO box number Suburb	Flat/unit number  State  Flat/unit number  State	Street Number
Building property name  Street Name  Suburb  11. What is your postal address (if different from above)?  PO box number  Street Name  Suburb  12. In case of emergency details	Flat/unit number  State  Flat/unit number  State	Street Number
Building property name	Flat/unit number  State  Flat/unit number  State  Email:  Flat/unit number	Street Number
Building property name  Street Name  Suburb  11. What is your postal address (if different from above)?  PO box number  Street Name  Suburb  12. In case of emergency details  Name:  Relationship:  Building property name	Flat/unit number  State  Flat/unit number  State  Email:  Flat/unit number	Street Number
Building property name  Street Name  Suburb  11. What is your postal address (if different from above)?  PO box number  Street Name  Suburb  12. In case of emergency details  Name:  Relationship:  Building property name  Street Name  Suburb	Flat/unit number  State  Flat/unit number  State  Email:  Flat/unit number	Street Number
Building property name  Street Name  Suburb  11. What is your postal address (if different from above)?  PO box number  Street Name  Suburb  12. In case of emergency details  Name:  Relationship:  Building property name  Street Name  Suburb  Next of Kin details:	Flat/unit number  State  Flat/unit number  State  Email:  State  Email:	Street Number
Building property name	Flat/unit number  State  Flat/unit number  State  Email:  State  Email:	Street Number

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Email: agent@skillsaustralia.edu.au

- Adelaide Campus Telephone: +61 8 8120 4186
- Fax: +61 8 6148 1310
- ABN: 78 126 274 682

CRICOS Code: 03548F

www.skillsaustralia.edu.au





# LANGUAGE AND CULTURAL DIVERSITY

13. In which country were you born?
Australia Other Please Specify
14. 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
45 A - (A) -
15. Are you of Aboriginal or Torres Strait Islander origin? (For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)
No Yes, Aboriginal Yes, Torres Strait Islander
DISABILITY
Providing information about a disability or medical condition will not disadvantage your application; however SAI needs to assess if we can make any reasonable adjustments to accommodate your disability or medical condition and advise you accordingly.
16. Do you consider yourself to have a disability, impairment or long-term condition?
Yes No (No - go to question 18)
17. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list. (You may indicate more than one area. Please refer to the Disability supplement in Appendix A for an explanation of the following disabilities):
Hearing/deaf Physical Intellectual Learning Mental illness Acquired brain impairment Vision
Medical Condition Other
Provide details about your medical condition/disability in brief
EDUCATIONAL BACKGROUND
18. What is your highest COMPLETED school level? (Tick ONE box only)
Year 12 or equivalent  Year 11 or equivalent  Year 10 or equivalent
Year 9 or equivalent Year 8 or below Never attended school
19. Are you still enrolled in secondary or senior secondary education?
Yes No
PREVIOUS QUALIFICATIONS ACHIEVED
20. Have you SUCCESSFULLY completed any of the qualifications listed below in Australia?
Yes No (No- go to question 21)
f YES, tick ANY applicable boxes

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Bachelor degree or higher degree Advanced diploma or associate degree

Diploma (or associate diploma)

Certificate III (or trade certificate)

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Certificate IV (or advanced certificate/technician)

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**)** Perth Campus Telephone: +61 8 6148 1300

Certificate II

Certificate I

Other education (including certificates or overseas qualifications not listed above)

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V\_April\_2021





#### **EMPLOYMENT**

# 21. Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

For casual, seasonal, contract and shift work, use the current number of hours worked per week to determine whether full time (35 hours or more per week) or part-time employed (less than 35 hours per week).

Full-time employee Part-time employee Self employed – not employing others

Unemployed – seeking full-time work Self employed – employing others Unemployed – seeking part-time work

Employed – unpaid worker in a family business Not employed – not seeking employment

22. 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

To develop my existing business

To try for a different career

I wanted extra skills for my job

To get into another course of study

To get skills for community/voluntary work

For personal interest or self-development Other reasons

# 23. Employer details (Apprenticeship/traineeship student must complete this section) (If applicable)

# **Enter Employer Details**

Company Name		Contact Name	
Work phone	Mobile	Email address	
Building property name		Flat/unit number	Street Number
Street Name	Suburb	State/Territory	Postcode
24. Are you registered with an employ	yment services provider?		
Yes No			
If YES :			
Employment Service Provider Name		Jobseeker ID	

# STUDENT DECLARATION AND CONSENT

- honestly and accurately provided information and evidence for the purposes of enrolment and eligibility
- consented to the collection, use and storage of personal information by Skills Australia Institute;
- been informed by Skills Australia Institute that the enrolment may impact their future entitlement to government subsided Training; and
- agreed to the condition of access determined through the Upfront Assessment of Need

I agree to undertake full assessment with Skills Australia Institute and any subsequent LSS Provider partner to establish eligibility for funded training, including engaging with the Participant Eligibility Criteria at <a href="www.skills.sa.gov.au">www.skills.sa.gov.au</a> and undertaking the Upfront Assessment of Need (UAN), including the CSPA (Core Skills Profile for Adults, the SRNI (Snapshot Reading and Numeracy Indicator) and the LaNCA (Literacy and Numeracy Comprehensive Assessment). I acknowledge that there are no fees associated with these eligibility assessment/s which I am required to pay for.

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I agree to pay the advertised Skills Australia Institute Participant Course Fees (including any Incidentals Fees) which have been advertised by Skills Australia Institute and provided to me, and I agree to provide requested evidence of currently held concession/s in relation to the Participant Course Fee if I am eligible. I agree to provide for sighting and for a copy to be recorded on my Participant's Training Account with the Department of Innovation and Skills a current:

- Health Care Card
- Pensioner Concession Card
- Veteran Affairs Concession Card; or
- I am current Prisoner in custody with the Department of Correctional Services (SA), including all prison inmates, detainees, on remand, those held in institutions and children in South Australian detention centres who are beyond the age of compulsory schooling; or
- Under Guardianship of the responsible Minister (GOM)

#### **Privacy Notice**

### Why we collect your personal information?

As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us. If you do not provide us with your personal information we are not able to enrol you as a student

#### How we use your personal information?

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

#### How we disclose your personal information?

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

# How the NCVER and other bodies handle your personal information?

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the Privacy Act 1988 (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.

The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (DESE), Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- Administration of VET, including program administration, regulation, monitoring and evaluation
- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at www.ncver.edu.au/

If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below.

DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how the DESE will handle your personal information, please refer to the DESE VET Privacy Notice at https://www.dese.gov.au/national-vet-data/vet-privacy-notice.

#### Surveys

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

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#### **Contact Information**

At any time, you may contact Skills Australia Institute to:

- Request access to your personal information
- Correct your personal information
- Make a complaint about how your personal information has been handled
- Ask a question about this Privacy Notice

I allow Skills Australia Institute to use, store and publish photographs, testimonials and videos taken of me for advertising or marketing purposes

#### **Student Declaration and Consent**

Tick here to confirm you have declared and consented to the above mentioned.

Student Name	Signature of Student	Date	//
Parent/Guardian Name	Signature of Parent/Guardian	Date	//

# **APPENDIX A: DISABILITY SUPPLEMENT**

#### Introduction

The purpose of the Disability supplement is to provide additional information to assist with answering the disability question

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.

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<sup>\*</sup>Parental/guardian consent is required for all students under the age of 18.





#### 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.

#### **ENROLMENT CONDITIONS**

Students must inform Skills Australia Institute of any changes to their residential address and/or contact details within 7 days of the change

### **REFUND AND CANCELLATION POLICY**

# **Refund and Cancellation Policy Overview**

The Skills Australia Institute Refund and Cancellation Policy covers how REFUND and CANCELLATION Fees are calculated in the event of cancellation of enrolment before course completion, either at the request of Skills Australia Institute, or as a result of a breach of Skills Australia Institute's code of conduct.

# Refund for fees paid in advance

The calculation applied for fees paid in advance is listed in Table 1.

#### Cancellation fees

Where a course of study is cancelled before the agreed Completion Date, Skills Australia Institute will calculate the Cancellation Fee in accordance with Table 1.

# **DEFINITIONS**

# Fees payable may include the following:

FULL REFUND of Student Fees will be made when:

- A student withdraws from a course when the course and/or a unit is cancelled or re-scheduled to a time that is unsuitable to the student; or
- A student is not given a place due to maximum number of places being reached;

**Tuition Fees:** Are the fees payable to Skills Australia Institute for undertaking a course. The Refund and Cancellation Policy specifications detailed below cover TUITION FEES only

**Other Fees:** Any other fees are as specified in your agreement with Skills Australia Institute. Fees may change and students will be notified about changes of other fees. Other Fees are not refundable

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#### **GENERAL INFORMATION**

- Course Fees and Charges are as per our Skills Australia Institute Course Fee List. Note: in line with our regulatory framework, Skills Australia Institute will only accept a maximum payment of \$500 before commencement of studies. Details of instalments are included in the Payment Agreement.
- All Refund Requests and Cancellation Notifications must be submitted using the Course Variation Form and the Refund Application Form, both of which are available at the Reception Desk or via the Skills Australia Institute website www.skillsaustralia.edu.au. VERBAL notifications to Skills Australia Institute staff are not valid.
- The date the written notice is received by Skills Australia Institute is the CANCELLATION DATE, and is the date used for the calculation of any refund and/or cancellation fee.
- In case of a cancellation by the student or Skills Australia Institute, any outstanding fees to Skills Australia Institute become due within 7 (seven) days.
- Any costs incurred by Skills Australia Institute to recuperate outstanding fees will be charged to the student.
- Unpaid fees will be recorded as a debt and recovered by action in acourt of competent jurisdiction.
- Skills Australia Institute will not release any testamurs/awards to students until outstanding course fees have been paid in full.
- All amounts are in Australian Dollars (AUD).
- Where a refund is approved by the CEO, Skills Australia Institute will make payment of refund within 28 days of receipt of the application.
- The refund will be deposited into the student's bank account only, as nominated on the Refund Application Form.
- All refunds will be paid in Australian Dollars, via an Australian Bank Account, as nominated by the student.
- No refunds will be paid to a third party (a person other than the student), unless directed by the student.

#### **REFUND APPLICATION FORM**

- Refund and Cancellation applications WILL NOT be processed where the signature on the Course Variation and/or Refund Application Form DOES NOT match the student's signature as shown on other documents provided by the student for admission to Skills Australia Institute.
- Students will receive a clear Statement of Refunds explaining how the refund was calculated, where a cancellation fee has been applied, students will receive a Statement of Cancellation clearly outlined how our Cancellation Policy has been applied.
- This agreement, and the availability of the complaints and appeals processes, does not remove the right of the student to take further action under

# **AUSTRALIA'S CONSUMER PROTECTION LAWS**

• The Refund and Cancellation Fee Policy is subject to review from time to time

REASON FOR REFUND	NOTIFICATION PERIOD	REFUND
• The Cancellation & Refund Request is received in writing within 7 Calendar Days of agreed starting date or	Before Course Commences	Full refund less 25% of the course fees
<ul> <li>The Cancellation &amp; Refund Request identifies and Skills Australia Institute agrees that the student received misinformation during the enrolment process or</li> <li>If the College defaults.</li> </ul>	After /Course Commences	No Refund

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# STUDENT DEFAULT OCCURS WHEN:

- The course starts at the location on the agreed starting day, but the student does not start the course on that day (and has not previously withdrawn); or
- Skills Australia Institute refuses to provide, or continue providing, the course to the student because of one or more of the following events
- The student failed to pay an amount he or she was liable to pay theprovider, directly or indirectly, in order to undertake the course
- Breach of Skills Australia Institute Code of Conduct as outlined in the Student Handbook.

# **REFUNDS ON SKILLS AUSTRALIA INSTITUTE DEFAULT**

# In the unlikely event of Skills Australia Institute default, within 14 days of the default, Skills Australia Institute will:

- Either offer you an alternative place at Skills Australia Institute's expense, that is accepted by you in writing; or
- Refund you the unused portion of the prepaid fees

#### **PAYMENT**

Note, all amounts mentioned are in AUD. Fees may be paid in the form of a bank draft or bank cheque payable to Skills Australia Institute. Fees can also be paid by electronic funds transfer (EFT) to:

Bank: Commonwealth Bank of Australia (CBA) Address: 413 Albany Highway, Victoria Park, WA 6100

Account Name: Skills Australia Institute **Bsb:** 066 128

Account Number: 1062 6125 **SWIFT Code: CTBAAU2S** 

PLEASE COMPLETE THIS FORM AND SEND IT TO

Email: admissions@skillsaustralia.edu.au

### **HOW TO PROTECT YOUR USI ACCOUNT PRIVACY**

# There are several ways you can protect your personal information

- Install security software on your computer
- Don't open email attachments from unknown senders
- Be careful exchanging files with people you work with or friends
- Only provide necessary personal information when completing online forms (you can skip fields marked as optional)
- Never share or email your password
- Make your password as strong as possible
- Change your password regularly
- Report suspicious activity to us

For more information about privacy, visit the Office of the Australian Information Commissioner

# The Student Identifiers Registrar's Privacy Policy explains how

- To access and correct personal information
- To make a breach of privacy complaint
- Privacy complaints are handled

Before an education or training provider applies for a USI on behalf of a student, they're required under the Student Identifiers Registrar's terms and conditions to give you a Privacy Notice explaining how your personal information will be used

Student USI exemptions: If you have a genuine personal objection to being assigned a USI, you can apply for an exemption to the Student Identifiers Registrar.

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#### How your personal information is used

The USI application process requires personal information, including:

- Your Name
- Date and Place of Birth
- Gender
- Contact Details
- A form of identification

This information is to confirm your identity and ensure your USI is unique.

Your information may be disclosed for the purposes set out in our terms and conditions.

The USI Registry System only keeps information about your name, date and place of birth, gender, contact details and the type of identification provided.

The USI Registry System doesn't retain details from the ID used to create your USI.

If you've authorised a third party to create a USI on your behalf, typically an education or training provider, they're required by law to destroy your personal information as soon as possible after making the USI application

# Protecting your computer

To protect your computer:

- Install security software that includes anti-virus, anti-spyware, firewall and anti-spam filters
- Regularly scan your computer for viruses
- Always run the current version of your security software.

#### Other steps you can take to protect your computer

- Check your internet browser's security settings for ways to make your browsing more secure
- Don't open email attachments from unknown senders
- Only download files from trusted websites
- Be careful exchanging files with colleagues or friends
- Never click on links in emails from unknown sources

### Protecting your password

To protect your personal details and privacy:

- Never share your password
- Never send your password via email
- Make your password as strong as possible
- Change it regularly

# Sharing your USI and VET transcript

Read about providing your VET transcript to your training organisations

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