

ENROLMENT FORM FOR INTERNATIONAL STUDENTS

Pe	ersonal details:						
1.	Enter your full name:						
	Single name only [] (Tick this box if you have one name only that cannot be written in the follow format. Write your single name in the 'Family name section).	ving					
	Family name (surname)						
	First given name						
	Second given name (middle)						
2.	Enter your date of birth:						
	Day/month/year						
3.	Gender (Tick ONE box only):						
	Male						
	Female						
	Other						
4.	Enter your contact details:						
	Home phone Work phone						
	Mobile Email address						
	Alternative email address (optional)						
5.	What is the address of your usual residence?						
	Please provide the physical address (street number and name, <u>not</u> post-office box) where you usureside rather than any temporary address at which you reside for training, work or other purposes before turning to your home.	•					
	If you are from a rural area, use the address from your state or territory's 'rural property addressing' or 'numbering' system as your residential street address.						
	Building/property name is the official place name or common usage name for an address site, include the name of a building, Aboriginal community, homestead, building complex, agricultural property, property or unbounded address site.						
Bui	ilding/property name:						
Fla	t/unit details:						
Str	eet / lot number:						
Str	eet name:						



State/territory:						
Postcode :						
6. What is your postal address (<u>if</u> different from above)?						
Building/property name:						
Flat/unit details:						
Street / lot number:						
Street name:						
Suburb, locality or town:						
State/territory:						
Postcode :						
Nationality: Passport No:						
Are you currently? ☐ Onshore ☐ Offshore						
Are you on a Visa? ☐ Yes ☐ No Current Visa Grant Number:						
Please tick the relevant course (you may tick more than one, please note <u>pre-requisites</u>):						
□ HLT55118 Diploma of Dental Technology CRICOS 0101102J						
□ HLT51020 Diploma of Emergency Health Care CRICOS 112690D						
☐ HLT35021 Certificate III in Dental Assisting CRICOS 110067K						
☐ HLT45021 Certificate IV in Dental Assisting CRICOS (pending) (Pre-requisite: CIII Dental Assisting)						
☐ HLT45021 Certificate IV in Dental Assisting CRICOS (pending) (Pre-requisite: CIII Dental Assisting)						
(Pre-requisite: CIII Dental Assisting) □ BSB41419 Certificate IV in Work Health and Safety CRICOS 0101209 □ BSB51319 Diploma of Work Health and Safety CRICOS 0101206						
 (Pre-requisite: CIII Dental Assisting) □ BSB41419 Certificate IV in Work Health and Safety □ BSB51319 Diploma of Work Health and Safety (Pre-requisite: Cert IV WHS) □ BSB60619 Advanced Diploma of Work Health and Safety □ CRICOS 102842J 						
 (Pre-requisite: CIII Dental Assisting) □ BSB41419 Certificate IV in Work Health and Safety □ BSB51319 Diploma of Work Health and Safety CRICOS 0101206 (Pre-requisite: Cert IV WHS) 						
 (Pre-requisite: CIII Dental Assisting) □ BSB41419 Certificate IV in Work Health and Safety □ BSB51319 Diploma of Work Health and Safety (Pre-requisite: Cert IV WHS) □ BSB60619 Advanced Diploma of Work Health and Safety (Pre-requisite: Diploma WHS) 						
(Pre-requisite: CIII Dental Assisting) □ BSB41419 Certificate IV in Work Health and Safety CRICOS 0101209 □ BSB51319 Diploma of Work Health and Safety CRICOS 0101206 (Pre-requisite: Cert IV WHS) CRICOS 102842J □ BSB60619 Advanced Diploma of Work Health and Safety CRICOS 102842J (Pre-requisite: Diploma WHS) CRICOS 103956B						
(Pre-requisite: CIII Dental Assisting) □ BSB41419 Certificate IV in Work Health and Safety CRICOS 0101209 □ BSB51319 Diploma of Work Health and Safety CRICOS 0101206 (Pre-requisite: Cert IV WHS) CRICOS 102842J □ BSB60619 Advanced Diploma of Work Health and Safety CRICOS 102842J (Pre-requisite: Diploma WHS) CRICOS 103956B □ BSB40520 Certificate IV in Leadership and Management CRICOS 104185K						
(Pre-requisite: CIII Dental Assisting) □ BSB41419 Certificate IV in Work Health and Safety CRICOS 0101209 □ BSB51319 Diploma of Work Health and Safety CRICOS 0101206 (Pre-requisite: Cert IV WHS) CRICOS 102842J □ BSB60619 Advanced Diploma of Work Health and Safety CRICOS 102842J (Pre-requisite: Diploma WHS) CRICOS 103956B □ BSB40520 Certificate IV in Leadership and Management CRICOS 104185K □ BSB60420 Advanced Diploma of Leadership and Management CRICOS 107166M						
(Pre-requisite: CIII Dental Assisting) BSB41419 Certificate IV in Work Health and Safety CRICOS 0101209 BSB51319 Diploma of Work Health and Safety CRICOS 0101206 (Pre-requisite: Cert IV WHS) BSB60619 Advanced Diploma of Work Health and Safety (Pre-requisite: Diploma WHS) BSB40520 Certificate IV in Leadership and Management CRICOS 103956B BSB50420 Diploma of Leadership and Management CRICOS 104185K BSB60420 Advanced Diploma of Leadership and Management CRICOS 107166M CHC33021 Cert III in Individual Support CRICOS (pending)						



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.

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 NCVER and other bodies handle your personal information

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. NCVER is authorised to disclose information to the Australian Government Department of Employment and Workplace Relations (DEWR), 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:

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

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

NCVER does not intend to disclose your personal information to any overseas recipients. For more information about how NCVER will handle your personal information please refer to the NCVER's Privacy Policy at www.ncver.edu.au/privacy.



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.

 For more information on how we collect, store, use and disclose your personal information, please refer to our Privacy Policy and Procedure at https://www.dnakingstontraining.edu.au/about/policies-and-documents/

Contact information – DNA Kingston Training

Email: admin@dnakingstontraining.edu.au

Telephone: +61 8 9479 4865 (international), 1300 855 503 (local)

At any time, you may contact DNA Kingston Training to:

- request access to your personal information
- correct your personal information
- o make a complaint about how your personal information has been handled
- o ask a question about this Privacy Notice.



Language and Cultural Diversity (Government requirement details)

1. In which country were you born? Australia	:				
2. Do you speak a language other than English at hom spoken the most)	e? (If more	than one language, indicat	te the one		
No, English only 1201 Yes, please specify:	□				
3. How well do you speak English? Very well	Not well	☐ 3 Not at a	II <u> </u>		
4. Are you of Aboriginal or Torres Strait Islander origin? No		s of both, mark both "yes" l Yes, Torres Strait Islande	•		
Disability (Government requirement details)					
5. Do you consider yourself to have a disability, impairm Yes □ Y No □ N	_	term condition? O Question 0			
If YES, please indicate the areas of disability, impairment than one area)	t or long-ter	m condition: (you may indi	icate more		
Hearing/Deaf 🔲 11 Learning	1 4	Vision	1 7		
Physical 12 Mental Illness	1 5	Medical Condition	1 8		
No Intellectual ☐ 12 Acquired Brain Impairment	t 1 6	Other	1 9		
Schooling 6. What is your highest COMPLETED school level? (Tick Of Year 12 or equivalent 12 Year 10 or equivalent		y) Year 8 or below	□ 08		
Year 11 or equivalent	□ 09	Never attended school			
		If NEVER, Go to Questi			
7. In which YEAR did you complete that school level?					
8. Are you still attending secondary school?	Yes □	No □			
Previous Qualifications Achieved (Government requi	irement de	tails)			
9. Have you SUCCESSFULLY completed any of the follow	ing qualifica	tions?			
Yes	If NO, Go to	Question 10			
If YES, then tick ALL applicable boxes.					
Bachelor's degree or higher degree	Certificate	III (or Trade Certificate)	□ 514		
Diploma (or Associate Diploma) 420	Certificate		521 524		
Certificate IV (or Adv Certificate/Technician) 511		s other than the above	990		



If YES, in which YEAR did you complete	this Qualifi	cation?			
If YES, in which COUNTRY did you com	plete this Q	ualification?			
Employment (Government require	ment detai	ls)			
10. Of the following categories, which	BEST descril	bes your current employment status? (Tick ONE b	oox only)		
Full-time employee	1 01	Employed - unpaid worker in a family business	□ 05		
Part-time employee	D 02	Unemployed - seeking full-time work	□ 06		
Self-employed - not employing others	□ 03	Unemployed - seeking part-time work	0 7		
Employer	0 4	Not employed - not seeking employment	08		
ONE box only)	BEST descr	ibes your main reason for undertaking this cour			
To get a job	01	It was a requirement of my job	05		
To develop my existing business	02	I wanted extra skills for my job	<u> </u>		
To start my own business	03	To get into another course of study	07		
To try for a different career To get a better job or promotion	□ 04 □ 05	For personal interest or self-development Other reasons	☐ 12 ☐ 11		
APPLICATION INSTRUCTIONS					
qualification or statement of atta Student Identifier (USI). In addit NCVER. If you have not https://www.usi.gov.au/student your USI once you have received	ainment whe tion, we are yet obtain s/create-you d it.	from issuing you with a nationally recognise on you complete your course if you do not have a required to include your USI in the data we sul ned a USI you can apply for it direc ur-usi on computer or mobile device. Please let u	Unique bmit to ctly at us have		
		lication to admin@dnakingstontraining.edu.au , vassess your enrolment eligibility, you must attach	-		
 Passport photo page. 					
Your current and valid visa (if applicable).					
Academic results /transcript of your previous study / qualifications.					

- Completed Genuine Student form (pages 8 to 12 of this Application).

 Processing time: Please allow up to 5 days for processing of applications. Once process.
- **Processing time:** Please allow up to 5 days for processing of applications. Once processed successfully, a Letter of Offer will be provided to you outlining your course information and fees payable.

to apply is **IELTS 6.0**. If packaged with ELICOS, the minimum requirement is IELTS 5.5.

Evidence / transcript of your English test results. Please note that the minimum score required

- Read our policies: Please ensure that you have read and understood your offer as well as applicable course information and college policies including the college Fee Policy and Cancellation and Refund Policy prior to proceeding with your offer. All relevant policies can be found on the DNA Kingston Training College website: www.dnakingstontraining.edu.au.
- Acceptance and Confirmation of Enrolment (CoE): Once your initial payment has cleared our bank account and you have submitted your signed Acceptance of Offer, we will issue your electronic CoE.



STUDENT DECLA	STUDENT DECLARATION						
I declare the information provided in this document is current and correct.							
I agree to comm	I agree to commit to the training qualifications enrolled and pay the associated fees.						
I have read and agree to follow the policies and procedures outlined by DNA Kingston Training, including the College's Fee Policy and Cancellation and Refund Policy:							
Student signature:					Date:		
Guardian Signature (if student is under 18 years of age):					Date:		
Guardian Name:							
AGENT DECLAR	ATION						
I declare that the person making this application has been assessed as a Genuine Student as defined by the Australian Department of Immigration and Border Protection. The applicant has every intention of completing all courses listed in this application and I have verified the authenticity and validity of the documents presented by the applicant. The applicant has been given information about DNA Kingston Training's courses and the campus location, and information on fees and living costs in Australia and understand their obligations to pay all fees:							
Agency Name:			Name of A	gent:			
Signature:				Date:			

Please note that we do **not** accept electronic signatures.

DNA Kingston Training

Empower your dreams, make them happen!



GENUINE STUDENT (GS) APPLICANT ASSESSMENT FORM

This form is to be completed by students ONLY.

GS forms completed by Agents will not be accepted.

Dear Student,

Thank you for your application to study at DNA Kingston Training. Please complete the following questions:

Family Name:						
Given Names:						
Date of Birth:	dd / mm / yyyy					
Country of Birth:						
Citizenship:						
	1. Have you travelled to Australia before? * If yes, when and for what reasons? □ Yes □ No					
2. Have you ever had a visa application denied or a visa cancelled? * If yes, please provide more details and which countries: □ Yes □ No						



3.	Do you have any relatives or friends living in Australia? * If yes, please provide:		□ Yes	□No
Their	name/s:			
Their	relationship to you:			
State	they live in:			
4.	Do you have any immediate family members (e.g. children, pa will remain in your home country whilst you are in Australia? * If yes, please provide:	rents) who	_	□No
Their	name/s:			
Their	relationship to you:			
5. V	Vhat is your relationship status? Please specify:	☐ Single	☐ Married	☐ De facto
	have a spouse/partner, is he/she coming to Australia with you, and anton your student visa?	as a	☐ Yes	□ No
	yes, has he/she previously applied for an Australia visa? lease provide his/her full name		□ Yes	□No
——	is/her full name:			
		-		
	o you have any children? If yes, how many and will they accompany you to Australia?		☐ Yes	□No
	o you have property or own a business in your home country	?	☐ Yes	□ No



8. Do you have guaranteed employment when you return home after your study has been completed? * If yes, please advise company name, title, and attach letter from company	□ Yes □ No
 Student visa applicants will need to show they have a minimum of AU\$24,505 in annual living costs. Please <u>detail</u> how you intend to sustain your living and study ex the duration of your course. 	
10. Why did you shooks to study in Australia and not in your home country?	
10. Why did you choose to study in Australia and not in your home country?	
11. Why have you chosen to study at DNA Kingston Training?	
12. Why have you chosen to study this course/s?	



13. How will this program benefit your future?
14. How is this program related to your previous studies?
15. If this program is not related to your previous studies, why have you decided to change your career path?
16. What do you know about this program?
17. What do you like about the program structure?
18. How will you implement the qualification, once you return to your home country?



Student Declaration

I declare that all information I have provided in this form is accurate and complete, and that DNA Kingston Training may refuse my application or cancel my enrolment if any information is found to be incorrect, false or misleading.

I also understand that, by completing this form, I am giving DNA Kingston Training written consent to verify the information I have supplied in this form and to request further support documentation.

I declare that I have a genuine intention to undertake the study pathway for which I have applied.

Student signature:			Date:		
Guardian Signature (if student is under 18 years of age):			Date:		
Guardian Name:					
Please note that we do <u>not</u> accept electronic signatures.					
COLLEGE OFFICE	USE ONLY - (thi	s section)			
Received by:			Date:		
Processed by:			Date:		
Outcome:	□ Approved □	Rejected	Date Notified:		