

Enrolment Application Form

SIT20316 Certificate II in Hospitality

Please fill in all sections of this enrolment form and return completed and signed to Marr Mooditj Training. If you do not fill in all sections including which concessional rate applies to you then your application will not be processed.

Student Details

Title Mr Mrs Miss Ms Other Gender Male Female Other

Surname _____ Given name(s) _____

Address _____ Suburb _____

Postcode _____ DOB _____ Place of birth _____

Home phone _____ Mobile phone _____

Email address _____

Unique Student Identifier (USI)

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
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|--|--|--|--|--|--|--|--|--|--|

If you do not have a USI please create one at the following website. <http://www.usi.gov.au/create-your-USI>

Course Fee Information

Fees 2021 Enrolment

| | |
|----------------|-------------|
| Concession | \$ 318.99 |
| Non Concession | \$ 1,058.96 |

The Student tuition fees are indicative only and are subject to change given individual circumstances at enrolment. Additional fees may apply such as Student Services and Resource Fees.

All fees are calculated according to the nominal hours for each unit in the qualification, multiplied by the hourly rate specified by the WA Department of Training & Workforce Development in accordance with the *VET Fees and Charges Policy 2021* (Available at [Department of Training and Workforce Development: VET fees and charges policy 2021 \(v1.0\)](http://www.dtwd.wa.gov.au) (dtwd.wa.gov.au). Detailed unit costs can be provided on request.

To be eligible for concession rate, YOU MUST provide the following with the application form: Youth Allowance, Pension or Current Health Care Card.

If no evidence is provided with this application, the non-concession rate will apply to your enrolment in this qualification

Enrolment Requirements

Below are listed the requirements for enrolment at Marr Mooditj Training. Please tick the boxes that apply.

- I have been provided the fees and charges
- I am of Aboriginal and/or Torres Strait Islander descent and older than 18 years
- I agree to adhere to Marr Mooditj Training's policies and procedures and student code of practice
- I have attached evidence that I am eligible for concessional rate
- I am currently living in Western Australia
- I have attached a certified copy of my Police Clearance or a Criminal History Check and Working with Children Check or application receipts
- I am an Abstudy approved student and have provided certified evidence of my away from base address and Abstudy statement (**students who require away from base funding**)

To access travel and accommodation you must be an Abstudy approved student. You must provide the Abstudy statement to Marr Mooditj Training before any travel and accommodation can be arranged.

What Are Your Reasons for Doing this Course

Please tick your reasons for doing this course in the boxes below (tick all that apply)

| | |
|--|---|
| To get a job <input type="checkbox"/> | It is part of my job requirements <input type="checkbox"/> |
| To develop my own business <input type="checkbox"/> | I want extra skills <input type="checkbox"/> |
| To try for a different career <input type="checkbox"/> | For personal interest/Self development <input type="checkbox"/> |
| To get a promotion <input type="checkbox"/> | Other reasons (write reasons below) <input type="checkbox"/> |

Previous Enrolments

Is this the first time you have enrolled in a course at Marr Mooditj? Yes No

If NO, please list the courses in which you have previously enrolled, and approximate date(s)

| Course | Date |
|--------|------|
| | |
| | |
| | |
| | |

Language, Literacy and Numeracy

Please tick the boxes that apply for your level of English language, literacy and numeracy (LLN). We need this information to identify whether you need LLN support.

| | Very Well | Well | Not very well | Not at all |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| I can speak/understand English | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I can read English | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I can write in English | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I can do maths | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Educational Background

Please tick the boxes below to show your secondary (school) and post secondary (university/vocational) education.

| Secondary (tick highest attended) | Post-Secondary (tick all that apply) |
|--|---|
| Year 12 or equivalent <input type="checkbox"/> | Doctorate <input type="checkbox"/> |
| Year 11 or equivalent <input type="checkbox"/> | Master's Degree <input type="checkbox"/> |
| Year 10 or equivalent <input type="checkbox"/> | Bachelor's Degree <input type="checkbox"/> |
| Year 9 or equivalent <input type="checkbox"/> | Advanced Diploma <input type="checkbox"/> |
| Year 8 or equivalent <input type="checkbox"/> | Diploma or Associate Diploma <input type="checkbox"/> |
| Never attended school <input type="checkbox"/> | Certificate IV <input type="checkbox"/> |
| | Certificate III or Trade <input type="checkbox"/> |
| Year completed (eg 1961) _____ | Certificate II <input type="checkbox"/> |

Support Needs

Do you have any disability, impairment or health condition that might affect your studies or require special support? Yes No

If YES, please provide details of the disability/condition(s) and support needed

| Disability/Condition | Support required |
|----------------------|------------------|
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| | |
| | |



Privacy Notice & Declaration

Under the *Data Provision Requirements 2012*, **Marr Mooditj Training** 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 **Marr Mooditj Training** for statistical, administrative, regulatory and research purposes. **Marr Mooditj Training** 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).

How Did You Hear About Us?

Newsletter Radio Word of Mouth Family/Friend Facebook Website Job Network Other _____

Employment History

Please tick the box that best describes your current employment status

| | |
|--|--------------------------|
| Full time | <input type="checkbox"/> |
| Part time | <input type="checkbox"/> |
| Employer | <input type="checkbox"/> |
| Unemployed, seeking full time employment | <input type="checkbox"/> |
| Unemployed seeking part time employment | <input type="checkbox"/> |



Please provide your employer's contact details

Employer Name _____

Address _____

Suburb _____ Postcode _____

Position held _____

Employer phone _____

Supervisor's email _____

Confirm if employer is paying for the non-concessional fees for your course Yes No

STUDENT SIGNATURE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

Parent Guardian signature for all applicants under the age of 18

Submit Your Application to:

MARR MOODITJ TRAINING INC

PO BOX 1030, BENTLEY DELIVERY CENTRE, WA 6983

Phone: (08) 9351 9344 Fax: (08) 9350 6830

Email: reception1@marmooditj.com.au

Application Process

1. A letter of acknowledgement will be sent by mail to you within 2 working days of receipt of your application. If you have not received an acknowledgement please telephone Marr Mooditj Training.
2. Marr Mooditj Training's Enrolments/Course Advisor will process your application within 5 working days, and upon successful application, will send you a confirmation of your enrolment.
3. Applicants may be encouraged to complete Language, Literacy and Numeracy training prior to enrolment in the course of their choice.
4. If you have not provided the required evidence, this may interrupt your processing and take longer to confirm your enrolment.



OFFICE USE ONLY

Name and signature of person receiving application.

| | | |
|-------|-----------|-------|
| _____ | _____ | _____ |
| Name | Signature | Date |

Name and signature of person sending acknowledgement letter.

| | | |
|-------|-----------|-------|
| _____ | _____ | _____ |
| Name | Signature | Date |

Name and signature of person approving application.

| | | |
|-------|-----------|-------|
| _____ | _____ | _____ |
| Name | Signature | Date |

If application is not approved, please provide reasons.

| | | | |
|---|------------------------------|---|------------------------------|
| Is student eligible for Travel and Accommodation? | <input type="checkbox"/> Yes | If YES, has Travel and Accommodation Officer been informed? | <input type="checkbox"/> Yes |
| | <input type="checkbox"/> No | | <input type="checkbox"/> No |

Name and signature of person sending confirmation of enrolment letter.

| | | |
|-------|-----------|-------|
| _____ | _____ | _____ |
| Name | Signature | Date |