49 Condamine Street DALBY QLD 4405 Ph: 07 4662 6860 - Option 2

Email: training@macnellies.com.au

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### Consulting | Training | Sales

Module/s to be Enrolled in (please indicate)		Course date:				
☐ Enter Confined Space (MSMPER205)		☐ Gas Test Atmosphere (MSMWHS217)				
☐ Enter & Work in Confined Spaces (RIIW ☐ Work in accordance with an issued work	☐ Operate Breathing Apparatus (MSMWHS216)					
Unique Student Identifier (USI) From 1 January 2015, we MacNellie's Workplace qualification or statement of attainment when you In addition, we are required to include your USI If you have not yet obtained a USI you can apple	te Safety can be pre bu complete your cou in the data we subm	vented from is: urse if you do r uit to NCVER.	not have a Uni	que Studen	t Identifier (USI).	
USI Number:						
Personal Details (legal name as used to apply for your USI number)						
Family Name (Surname):						
First Name: Mi	Middle Name:		Preferred Name:			
Date of Birth:	Gender:	☐ Male	☐ Female	□ Oth	ner	
	Title: □ M	r 🗆 Mrs	□ Ms	☐ Miss	☐ Other	
Permanent Residential Address:						
Suburb: Stat	<b>e</b> :	Country:			Post Code:	
Postal Address (if different from above)						
Suburb: Stat	<b>e</b> :	Country:			Post Code:	
Home Phone:	Work Phone:					
Mobile Phone:						
Email:						
Alternate Email Address (Optional):						
Employer Details						
Employer Trading Name:						
Employer's Contact Name:		Phone	):			
Do you give permission to be surveyed by – NCVER? (National Centre for Vocational Education Research)						
☐ Excluded from survey use	☐ Invalid address / ☐ Correctional faci ☐ Minor – under aç	lity (address	or enrolment	t)	d of response)	

RTO No: 31494 MacNellie's Workplace Safety Certificate No.:

REF- Form: 021A(a) Version 21 – May 2023 Page **1** of **4** 

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Language and Cultural Diversity						
Country of Birth:	Town of Birth:					
Do you speak a language other than English at home?:	☐ No, English only ☐ Yes, other - please specify:					
Are you of Aboriginal or Torres Strait Islander origin?  ☐ Aboriginal	□ No □ Yes, □ Torres Strait Islander □ Both, ABTSI					
Disability (This is required to Support your training)						
Do you have a disability, impairment or long term medical condition? ☐ No ☐ Yes						
If yes, please indicate:       □ Hearing/deaf       □ Physical         □ Acquired brain impairment       □ Vision       □ Learning	☐ Medical Condition ☐ Mental Illness ☐ Intellectual ☐ Other:					
Please supply additional details, so we can support your training:						
Do you require language or literacy assistance? What supports do you need?	□ No □ Yes					
What is your highest COMPLETED school level? (Tick ONE box only)						
☐ Year 12 or equivalent ☐ Year 11 or equivalent ☐ Year 10 or equivalent	<ul><li>☐ Year 9 or equivalent</li><li>☐ Year 8 or below</li><li>☐ Never attended school</li></ul>					
Are you still enrolled in secondary or senior secondary education?						
□ No	□ Yes					
Previous qualifications SUCCESSFULLY completed?	□ No □ Yes					
<ul> <li>□ Bachelor degree or higher degree</li> <li>□ Advanced diploma or associate degree</li> <li>□ Diploma (or associate diploma)</li> <li>□ Other education (including certificates or overseas qualifications not listed above)</li> </ul>	☐ Certificate IV (or advanced certificate/technician) ☐ Certificate III (or trade certificate) ☐ Certificate II ☐ Certificate I					

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Employment Status					
☐ Full-time Employee ☐ Part-time Employee ☐ Self-Employed – not employing other ☐ Self-Employed – employing others	☐ Employed – unpaid worker in a family business ☐ Unemployed – seeking full-time work ☐ Unemployed – seeking part-time work ☐ Not employed – not seeking employment				
Reasons for doing course					
<ul> <li>□ To get a job</li> <li>□ To develop my existing business</li> <li>□ To start my own business</li> <li>□ To try for a different career</li> <li>□ To get a better job or promotion</li> <li>□ Other reason</li> </ul>	<ul> <li>□ It was a requirement of my job</li> <li>□ I wanted extra skills for my job</li> <li>□ To get into another course of study</li> <li>□ For personal interest of self-development</li> <li>□ To get skills for community/voluntary work</li> </ul>				
Privacy Statement & Studer	nt Declaration (Please read carefully before signing)				
	your personal information so we can process and manage your enrolment in a s. Failure to supply the requested information may result in us being unable to enroll				
an RTO.  How we disclose your personal information  We are required by law (under the National Vocational the personal information we collect about you to the N	ver VET courses to you, and otherwise, as needed, to comply with our obligations as a least Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose ational VET Data Collection kept by the National Centre for Vocational Education or collecting, managing, analyzing and communicating research and statistics about				
We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory authority.					
(Privacy Act) and the NVETR Act. Your personal inform	onal information ersonal information in accordance with the law, including the <i>Privacy Act 1988</i> (Cth) mation may be used and disclosed by NCVER for purposes that include populating facilitation of statistics and research relating to education, including surveys and data				
The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (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:  • Administration of VET, including program administration, regulations, 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/privacy.

If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the details listed at the top of this page.

RTO No: 31494 REF-Form: 021A(a) Version 21 - May 2023 MacNellie's Workplace Safety Page 3 of 4

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DEWR is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfill specified functions and activities. For more information about how the DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at <a href="https://www.dewr.gov.au/national-vet-data/vet-privacy-notice">https://www.dewr.gov.au/national-vet-data/vet-privacy-notice</a>.

#### 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.

#### **Contact Information**

At any time, you may contact MacNellie's Workplace Safety 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
- www.macnellies.com.au

Student Declaration and Consent	
I declare that the information I have provided to the best of my knowledge is true and con	rect.
I consent to the collection, use and disclosure of my personal information in accordance	with the Privacy Notice above.
Student Signature [or electronic acknowledgement]:	Date:
Parent/Guardian Signature [or electronic acknowledgement]:	Date:
*Parental/guardian consent is required for all students under the age of 18.	

RTO No: 31494 MacNellie's Workplace Safety REF- Form: 021A(a) Version 21 – May 2023 Page **4** of **4**