

# INTERNATIONAL APPLICANT ENROLMENT FORM

#### Instructions

- Read this form carefully, complete all sections and ensure that supporting documents are attached.
   Your name, signature, and details must all appear consistent with your passport and other official documents.
   All fields in the form are mandatory and all dates should be mentioned in (DD/MM/YY) format.
- 4. Please use 'NA' where information is not relevant.

SECT	ION A: A	PPLICAN	T DETAILS

TITLE: Mr. Ms. Mrs. Others:		
FAMILY NAME (SURNAME) (As in your passport):		
FIRST NAME (As in your passport):		
MIDDLE NAME (As in your passport):		
DATE OF BIRTH: GENDER:MaleFemaleOther		
EMAIL:		
ALTERNATIVE EMAIL:(Optional)		
PHONE:MOBILE:		
COUNTRY OF BIRTH:NATIONALITY:		
PASSPORT NUMBER:PASSPORT EXPIRY:		
DO YOU CURRENTLY HOLD AN AUSTRALIAN VISA? YES NO		
CURRENT ONSHORE (in Australia) OFFSHORE (outside Australia)		
VISA SUBCLASS:VISA EXPIRY:		
MARITAL STATUS:		
SINGLE NEVER BEEN MARRIED DE FACTO RELATIONSHIP		
HAVE YOUR VISA TO AUSTRALIA OR OTHER COUNTRIES BEEN REJECTED?		
NO YES. PLEASE PROVIDE DETAILS:		

# **SECTION B: COURSE SELECTION**

Please refer to the International Student Handbook for detailed information about our courses. You can find the International Student Handbook on our website at <u>www.riverdaleinstitute.edu.au</u>

SELECT	COURSE NAME	CRICOS CODE	COURSE DURATION	PREFERRED INTAKE
	Cookery Package			
	SIT30821 Certificate III in Commercial Cookery; SIT40521 Certificate IV in Kitchen Management; SIT50422 Diploma of Hospitality Management	112186J 112187H 112188G	104 WEEKS	
	SIT30821 Certificate III in Commercial Cookery	112186J	52 WEEKS	
	<b>SIT40521</b> Certificate IV in Kitchen Management	112187H	68 WEEKS	
	SIT50422 Diploma of Hospitality Management	112188G	62 WEEKS	
	CHC30121 Certificate III in Early Childhood Education and Care	108726J	52 WEEKS	
	CHC50121 Diploma of Early Childhood Education and Care	108727H	52 WEEKS	
	CHC43015 Certificate IV in Ageing Support	114399B	52 WEEKS	
	<b>CHC52021</b> Diploma of Community Services	115448A	96 WEEKS	
	CPC31020 Certificate III in Solid Plastering	110079F	96 WEEKS	
	CPC33020 Certificate III in Bricklaying and Blocklaying	110078G	96 WEEKS	
	<b>RII60520</b> Advanced Diploma of Civil Construction Design	114398C	96 WEEKS	
	<b>BSB80120</b> Graduate Diploma of Management (Learning)	108811A	96 WEEKS	

## **SECTION C: ADDRESS DETAILS**

# **CURRENT RESIDENTIAL ADDRESS IN AUSTRALIA**

STREET ADDRESS:		
TOWN/CITY:		
STATE:	POSTCODE:	
PERMANE	NT ADDRESS IN HOME COUNTRY	
STREET ADDRESS:		
TOWN/CITY:	STATE:	
COUNTRY:	POSTCODE:	
	STATE:	
	STATE:	
COUNTRY:	POSTCODE:	
EMERGENCY CONTACT DETAILS		
FULL NAME:		
MOBILE		
MOBILE:	PHONE:	

## SECTION D. LANCHAGE & CHI TUDAL DIVERSITY

SECTION B. EANGOAGE & COLIONAL DIVERSITI		
In which country were you born?	☐ Australia ☐ Other (please specify):	
Do you speak 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):	
How well do you speak English?	Uery well Well Not well Not at all	
How well do you write English?	Uery well Well Not well Not at all	
Are you of Aboriginal or Torres Strait Islander origin? (For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)	☐ Yes, Aboriginal ☐ Yes, Torres Strait Islander ☐ No	









SECTION	E: SCHOOLING		
What is your highest COMPLETED school level?  (Tick ONE box only. If never completed any primary or secondary level education, go to 'Section F'.)	Year 12 or equivalent Year 11 or equivalent Year 10 or equivalent Year 9 or equivalent Year 8 or equivalent Never attended school		
Are you still enrolled in secondary or senior secondary education?	☐ Yes ☐ No		
SECTION F: PREVIOUS	QUALIFICATIONS ACHIEVED		
Have you SUCCESSFULLY completed any of the qualifications listed below?	☐ No ☐ Yes. If YES, tick applicable boxes below:		
	Bachelor degree (or higher degree) Advanced diploma (or associated degree) Diploma (or associated degree) Certificate IV (or advanced certificate/technician) Certificate III (or trade certificate) Certificate II Certificate I Other education (Including certificates or other overseas qualifications not listed)		
SECTION G: EMPLOYMENT			
Of the following categories, which BEST describes your current employment status? 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). (Tick ONE box only)	Full-time Part-time Self-employed (not employing others) 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)		
SECTION H	STUDY REASON		
Of the following categories, select the one which BEST describes the main reason you are undertaking this course. (Tick ONE box only)	To get a job To try for a different career It was a requirement of my job To develop my existing business For personal interest or self-development I wanted extra skills for my job To start my own business To get a better job or promotion To get into another course of study To get skills for community/voluntary work Other reason		
SECTION I: DISABILITY			
disability or medical condition and advise For further information rea	al condition will not disadvantage your application. However, nake any reasonable adjustments to accommodate your you accordingly. In some cases, there may be a cost. larding health matters please refer to: health-requirements/meeting-healthreg.htm		
Do you consider yourself to have a dis impairment or long-term medical cor	sability, Yes		

If 'YES, please provide the details below:	Hearing/Deaf Vision Physical Intellectual Learning Medical Condition Mental Illness Acquired Brain Impairment Other:
Do you have a medical or health related issue that may prevent a student visa being issued?	☐ Yes ☐ No
If 'YES', please provide the details:	

# **SECTION J: UNIQUE STUDENT IDENTIFIER (USI)**

UNIQUE STUDENT IDENTIFIER (USI)
SECTION K: ENGLISH LANGUAGE PROFICIENCY

Is English your first language? (If 'NO', please specify your first language)	☐ Yes ☐ No (please specify):
Have you studied at secondary level with English as the language of instruction?	☐ Yes ☐ No
Have you undertaken an English Language Proficiency Test?	☐ Yes ☐ No
TEST NAME	
SCORE	
TEST DATE	

SECTION L: FUNDS	REQUIRED
Do you understand the costs associated with studying in Australia and associated policies of Riverdale Institute available on our website (www.riverdaleinstitute.edu.au)? (Including the cost of tuition, living expenses, overseas student health cover and travelling costs etc.)	☐ Yes ☐ No
What is your planned source of funding while studying? You may choose more than one option given:	Self-financed Family in home country Family in Australia Bank loan Other (please specify):



P Level 1, 120 Miller Street, West Melbourne, VIC 3003







### SECTION M: OVERSEAS STUDENT HEALTH COVER (OSHC) DETAILS

Do you have a current OSHC?	☐ Yes ☐ No
Would you like Riverdale Institute to arrange an OSHC on your behalf?	☐ Yes ☐ No
If 'YES', please select the type of OSHC	☐ Single ☐ Couple ☐ Family

Please refer to the link below for the current OSHC prices and other information at https://www.privatehealth.gov.au/health\_insurance/overseas/overseas\_student\_he alth cover.htm

# SECTION N: RECOGNITION OF PRIOR LEARNING (RPL) OR CREDIT TRANSFER (CT)

Do you wish to apply for recognition of prior learning?	☐ Yes ☐ No
Have you been employed or gained experience through informal learning in the area covered by the course applied for?  (If you have, you may be eligible for Recognition of Prior Learning - contact the Admission Office for further information You must attach verified copies of documents to support an RPL application.)	□Yes □No
Do you wish to apply for credit transfer?	☐ Yes ☐ No
Have you enrolled in the same or a similar course you have selected above elsewhere? (If you have, you may be eligible for a credit transfer contact the Admission Office for further information. You must attach verified copies of documents to support a credit transfer application)	□Yes □ No

### **SECTION O: TUITION FEE PAYMENT OPTIONS**

Kindly choose one of the following methods for settling your ongoing tuition fees:

■ A. PAY SEMESTER FEE IN FULL

Pay the full semester fee prior to the scheduled due date.

OR

■ B. PAYMENT PLAN (DIRECT DEBIT)

Establish a structured payment plan, enabling automatic withdrawals from your designated bank account or credit/debit card through EziDebit https://www.ezidebit.com/en-au).

- · You will be required to complete a Direct Debit Authority Form on the day of
- The student is accountable for covering fees associated with the initiation of the Direct Debit
- A late fee of \$100 will be applied for any payments made after the specified

# **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, the Commonwealth including the TPS, or state or territory agencies, in accordance with the Privacy Act 1988.

#### > 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

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

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.

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.

DEWR 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 DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at https://www.dewr.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.

At any time, you may contact Riverdale Institute (RI) 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

Email: info@riverdaleinstitute.edu.au Phone No: 1800 902 480

### **Enrolment Declaration**

The information herein provided is to the best of my knowledge true, correct and complete at the time of my enrolment.

- □ Riverdale Institute may refuse my application or cancel my enrolment if any information is found to be
- I consent to the collection, use and disclosure of my personal information in accordance with the Privacy
- □ I understand that by completing this application, I am giving written consent to Riverdale Institute to independently verify the information supplied by me in this form and request further documents as required.
- I agree to undertake a testing requirement prior to course entry, if deemed necessary by Riverdale Institute, and adhere to any other pre requisite identified above.
- I have got access to all the relevant policies and procedures of Riverdale Institute and also have browsed its website for other pre-enrolment information.
- ☐ I have been informed of my rights and obligations as a student with Riverdale Institute, and agree to abide by all rules and regulations of Riverdale Institute. I confirm that all arrangements are made to pay outstanding fees and charges applicable to this training program and that Riverdale Institute can withhold my academic results until my debt is fully paid and any property belonging to Riverdale Institute has been returned.
- ☐ I confirm that I have received and read a copy of Riverdale Institute's student Handbook and understand the entry requirements of the course and relevant policies and procedures.
- (Optional) I hereby give my permission to Riverdale Institute to use my (Name, Testimonial, Image / notograph) in publications and advertisements produced by or for Riverdale Institute. I understand that:
- ▶These may be used for publication in film, photographs, in printed materials, electronically and on the internet.
- I will not receive any compensation or payment for the above.
- >Once my personal information has been published on the internet, Riverdale Institute has no control over its subsequent use and disclosure.

A student's USI may be used for specific VET purposes including the verification of student data provided by Riverdale Institute, the administration and audit of VET providers and program; education-related policy and research purposes, and to assist in determining eligibility for training subsidies.

- □ I agree to the Fee Charges and Refund Policy and Procedure
- I have read and understood the complaints and appeals processes, my rights as a student, the Privacy Statement and my right to access Australian Consumer Protection law.
- □ I have also been provided with information about the college, course information, course fees, entry requirements, work placement requirements (if applicable), appropriate attire to work in kitchen or workshop, delivery location/s, duration of my course, maintaining satisfactory course progress and attendance. I understand how to access support services (first point of contact -student support officer) and information. I understand that access to academic records is provided free of charge. Riverdale Institute will not charge for Referral to any legal services or any third party for any service or support. I have been informed about the study load and agree to attend classes as scheduled in timetable.
- □ I acknowledge that providing false, misleading or inaccurate information may affect the acceptance of this application and/or the continued provision of training and assessment services.
- ☐ I acknowledge that all fees are payable in full on course commencement or the commencement of the term that fees are due.

APPLICANT'S SIGNATURE:				
APPLICANT'S NAME:		DATE:		



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SECTION P: STUDENT	SCHECKLIST			
Student must make sure that you attaches all the docum Please note that all the documents m	nents (if applicable) as mentioned below. ust be in English Only.			
DOCUMENTS	TICK APPROPRIATE			
Passport (Bio data page)	☐ Yes ☐ No ☐ N/A			
VISA or VEVO	☐ Yes ☐ No ☐ N/A			
Overseas Student Health Cover (copy of OSHC)	☐ Yes ☐ No ☐ N/A			
English Proficiency Test	☐ Yes ☐ No ☐ N/A			
Academic Transcripts (Testamurs, Statement of Attainment, Results obtained overseas and/or in Australia)	☐ Yes ☐ No ☐ N/A			
Employment Certificates (if applicable)	□Yes □No □N/A			
Do you require any language, literacy or numeracy assistance?	☐ Yes ☐ No ☐ N/A			
Do you require help organising accommodation or Temporary Accommodation?	☐ Yes ☐ No ☐ N/A			
Do you require airport pick-up?	☐Yes ☐ No ☐ N/A			
SECTION Q: EDUCATION AGENT DETAILS & DECLARATION				
COMPANY NAME:				
CONTACT NAME:CONTACT NUMBER:				
Email:				
SUBMISSION OF APP	LICATION			
If you are a successful applicant, Riverdale Institute will issue you with an Offer letter and enrolment acceptance agreement expressing the course for which you have been offered a place to study at Riverdale Institute. The Offer letter and enrolment acceptance agreement will express all the course points of interest and in addition the charges for the course.				
The acknowledgment of the Offer letter and enrolment acceptance agreement is the genuine assertion, which expresses all the information about the course, fees, refund, and other details.  Sign and return the Offer letter and enrolment acceptance agreement to Riverdale Institute and retain a copy of the signed Offer letter and enrolment acceptance agreement for your records.				
Apply at: apply@riverdaleinstitute.edu.au				
or hand over your application at our head office: Level 1, 120 Miller Street, West Melbourne, VIC 3003				
CONTACT DETAILS				
Riverdale Institute Pty Ltd t/a Riverdale Institute RTO No: 45754   CRICOS Code: 03949M				

Office: Level 1, 120 Miller Street, West Melbourne, VIC 3003 E-mail: info@riverdaleinstitute.edu.au Website: www.riverdaleinstitute.edu.au Phone: 1800 902 480

# FOR OFFICE USE ONLY

APPLICATION APPROVED:			
☐ Yes	□No		
STAFF'S CO	MMENTS:		
STAFF NAM	<b>E</b> :		
SIGNATURE	:		
DATE:			



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