

# Registration Form

**PARTICIPANT DETAILS (Please print in block letters)**
*One form per person – please photocopy for multiple use*

Please fill in all details below, sections marked with a \* are mandatory

\*Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_ \*D.O.B: \_\_\_\_\_

Name of Workplace: \_\_\_\_\_

\*Daytime Phone No: \_\_\_\_\_ Fax: \_\_\_\_\_

\*Email: Private: \_\_\_\_\_ Work: \_\_\_\_\_

\*Unique Student Identifier (USI): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

COURSE NAME	DATE	AQ LOCATION	COST
<b>CHCAGE005</b> Provide support to people living with dementia			
<b>CHCCCS020</b> Respond effectively to behaviours of concern			
<b>Note: workshop prices are GST inclusive</b>			<b>Total: \$</b>
<b>Accredited Modules are GST Free</b>		<b>TOTAL PAYMENT ENCLOSED: \$</b>	

**Please return completed registration form to:**
**Dementia and Aged Care Services, 47 Tryon Street, Upper Mount Gravatt QLD 4122**
**Or scan and email to: [education@alzheimeronline.org](mailto:education@alzheimeronline.org)**
**Further course enquiries to: 1800 639 331 or [www.alzheimeronline.org](http://www.alzheimeronline.org)**

OFFICE USE ONLY:

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

Receipt Number: \_\_\_\_\_

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As part of national standards for training organisations the following additional information is required for our records. As per all information this is private and confidential. **All questions are compulsory.**

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## 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 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 your 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](http://www.ncver.edu.au/privacy).

If you would like to seek access to or correct your information, in the first instance, please contact AAQ 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 NCVET 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 AAQ 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

Alzheimer's Association Queensland  
47 Tryon Street, Upper Mount Gravatt QLD 4122

Education enquiries: (07) 3422 3000

Monday to Friday 9:00am – 4:00pm

Email: [education@alzheimeronline.org](mailto:education@alzheimeronline.org)

Please refer to the AAQ's privacy policy at [www.alzheimeronline.org](http://www.alzheimeronline.org)

## Personal Details

### 1. Enter your full name\*

Single name only  (Tick this box if you have one name only that cannot be written in the following format. Write your single name in the 'Family name section').

Family name (surname)

First given name

Second given name (middle)

\*Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names.

### 2. Enter your birth date

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 not post office box) where you usually reside rather than any temporary address which you reside for training, work or other purposes before returning 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, including the name of a building. Aboriginal community, homestead, building complex, agricultural property, park, or unbounded address site.

Building/property name

Flat/unit details

Street or lot number (e.g., 205 or Lot 118)

Street name

Suburb, locality, or town

State/territory

Postcode

**6. What is your postal address (if different from above)?**

Building/property name

Flat/unit details

Street or lot number (e.g., 205 or Lot 118)

Street name

Suburb, locality, or town

State/territory

Postcode

## Language and cultural diversity

7. In which country were you born?

Australia  1101

Other – please specify

8. 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  1201

Yes, other – please specify

9. Are you of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)

No  4

Yes, Aboriginal  1 3 (yes to both)

Yes, Torres Strait Islander  2

## Disability

10. Do you consider yourself to have a disability, impairment, or long-term condition?

Yes  Y

No  N **No – go to question 12**

11. If you indicated the presence of a disability, impairment, or long-term condition, please select, and tick the area(s) in the following list:

(You may indicate more than one area) Please refer to the Disability supplement for an explanation of the following disabilities.

Hearing/deaf  11

Physical  12

Intellectual  13

Learning  14

Mental illness  15

Acquired brain impairment  16

Vision  17

Medical condition  18

Other  19

## Schooling

### 12. What is your highest COMPLETED school level? (Tick ONE only)

If you are currently enrolled in secondary education, the *Highest school level completed* refers to the highest school level you have actually completed and not the level you are currently undertaking. For example, if you are currently in Year 10 the *Highest school level completed* is Year 9.

Year 12 or equivalent	<input type="checkbox"/> 12
Year 11 or equivalent	<input type="checkbox"/> 11
Year 10 or equivalent	<input type="checkbox"/> 10
Year 9 or equivalent	<input type="checkbox"/> 09
Year 8 or below	<input type="checkbox"/> 08
Never attended school	<input type="checkbox"/> 02

**Never completed any primary or secondary level education – go to Question 14**

### 13. Are you still enrolled in secondary or senior secondary education? Please Tick.

Yes	<input type="checkbox"/> Y
No	<input type="checkbox"/> N

## Previous qualifications achieved

### 14. Have you SUCCESSFULLY completed any of the qualifications listed in question 15? Please tick.

Yes	<input type="checkbox"/> Y
No	<input type="checkbox"/> N <b>No – go to question 16</b>

### 15. If YES, tick ANY applicable categories listed.

Bachelor degree or higher degree	<input type="checkbox"/> 008
Advanced diploma or associate degree	<input type="checkbox"/> 410
Diploma (or associate diploma)	<input type="checkbox"/> 420
Certificate IV (or advanced certificate/technician	<input type="checkbox"/> 511
Certificate III (or trade certificate)	<input type="checkbox"/> 514
Certificate II	<input type="checkbox"/> 521
Certificate I	<input type="checkbox"/> 524
Other education (including certificates or overseas Qualifications not listed above)	<input type="checkbox"/> 990



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## Employment

**16. Of the following categories, which BEST describes your current employment status?**

(Tick **ONE** category 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	<input type="checkbox"/> 01
Part-time employee	<input type="checkbox"/> 02
Self-employed – note employing others	<input type="checkbox"/> 03
Self-employed – employing others	<input type="checkbox"/> 04
Employed – unpaid worker in a family business	<input type="checkbox"/> 05
Unemployed – seeking full-time work	<input type="checkbox"/> 06
Unemployed – seeking part-time work	<input type="checkbox"/> 07
Not employed – not seeking employment	<input type="checkbox"/> 08

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## Study reason

**17. Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship** (Select **ONE** category only)

To get a job	<input type="checkbox"/> 01
To develop my existing business	<input type="checkbox"/> 02
To start my own business	<input type="checkbox"/> 03
To try for a different career	<input type="checkbox"/> 04
To get a better job or promotion	<input type="checkbox"/> 05
It was a requirement of my job	<input type="checkbox"/> 06
I wanted extra skills for my job	<input type="checkbox"/> 07
To get into another course of study	<input type="checkbox"/> 08
For personal interest or self-development	<input type="checkbox"/> 12
To get skills for community/voluntary work	<input type="checkbox"/> 13
Other reasons	<input type="checkbox"/> 11

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## Unique Student Identifier (USI)

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From 1 January 2015, AAQ can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you 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 NCVET. If you have not yet obtained a USI you can apply for it directly at <https://www.usi.gov.au/students/createyourusi> on computer or mobile device.

**18.** Enter your Unique Student Identifier (USI) (if you already have one)

You may already have a USI if you have done any nationally recognised training, which could include training at work, completing a first aid course or RSA (Responsible Service of Alcohol) course, getting a white card, or studying at a TAFE or training organisation. It is important that you try to find out whether you already have a USI before attempting to create a new one. You should not have more than one USI. To check if you already have a USI, use the 'Forgotten USI' link on the USI website at <https://www.usi.gov.au/faqs/ihaveforgottenmyusi>

Unique Student Identifier (USI)

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## Proof of Identity

The Registered Training Organisation is responsible for sighting the identifying information about the learner and certifying that these documents have been sighted.

The identification documents which may be used are listed below.

The learner must produce two (2) original identification documents to confirm their identity and attach with your Registration Form. Together the documents must show:

- full name;
- date of birth; and
- signature.

At least one document must include a signature of the individual identified.

Where any document is in a former name, an original official document (eg. marriage certificate or change of name certificate) must be sighted.

<b>Please tick the relevant box for the identification you have sighted</b>	
<b>List 1 – Primary Identification Documents</b>	<b>List 2 – Secondary Identification Documents</b>
<input type="checkbox"/> Birth certificate <input type="checkbox"/> Current Australian driver licence containing a photograph of the engaged person <input type="checkbox"/> International travel document, namely: <input type="checkbox"/> a current passport; or <input type="checkbox"/> an expired passport that has expired less than 2 years before the expired passport is sighted; or <input type="checkbox"/> another current identity document, having the characteristics of a passport issued by a government, the United Nations or <input type="checkbox"/> an agency of the United Nations for the purposes of international travel; or <input type="checkbox"/> another expired identity document, having the characteristics of a passport issued by a government, the United Nations or an agency of the United Nations for the purposes of international travel that expired less than 2 years before the expired document is sighted. <input type="checkbox"/> An evidence of Australian citizenship document <input type="checkbox"/> Visa or entry permit under the Migration Act 1958 (Cwth) <input type="checkbox"/> Current consular identity document containing a photograph of the learner <input type="checkbox"/> A document the Director-General of the department considers provides sufficient identification of the learner <input type="checkbox"/> Australian citizenship certificate or current document evidencing permanent Australian residency status. Form 10-	Recent (the last 12 months) account or notice issued by a public authority (for example: council rate notice; electricity account statement; gas account statement, land valuation notice, telephone account statement) <input type="checkbox"/> Recent (the last 12 months) document evidencing electoral enrolment <input type="checkbox"/> Identification card issued by Commonwealth or a State as evidence of the engaged person’s entitlement to a financial benefit (for example: Commonwealth seniors health card, health care card, Medicare card, pensioner concession card and repatriation health card) <input type="checkbox"/> Current account card or current credit card from a bank/building society/credit union (with name and signature) <input type="checkbox"/> Passbook or account statement issued by a bank/building society/credit union dated in the last 12 months.

## Disability supplement

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

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**If you indicated the presence of a disability, impairment, or long-term condition, please select the area(s) in the following list:**

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.

### '11 – 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.

### '12 – 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.

### '13 – 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.

### '14 – 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.

### '15 – 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.

#### '16 – 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.

#### '17 – 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.

#### '18 – 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.

#### '19 – 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.

**DECLARATION: To be completed by the learner**

**Please read the following carefully before signing:**

- I declare that the information that I have provided in this form and the identification documents shown to the Registered Training Organisation are true and correct.
- I understand the privacy notice in this form and I consent to the collection, use and disclosure of my personal information in the manner described in that notice.

**Signature:**

**Date:**

