

Application for Enrolment

The following is a list of the qualifications offered.							
You can enroll in a number of qualifications using this form, but you can only undertake the lesser							
qualification. You must complete your enrolment in sequence. You can only do one qualification atany given time.							
Course code and title Duration Course code and title Duration							
AHC30716 Certificate III in Horticulture	52 weeks	AHC51422 Diploma of Agribusiness	52 weeks				
□ AHC40416 Certificate IV in Horticulture	52 weeks	BSB50420 Diploma in Leadership and Management	52 weeks				
AHC50416 Diploma of Horticulture 52 weeks BSB60120 Advanced Diploma in Business 52 weeks							

Make sure you discuss the conditions associated with your course with the training staff before you continue with your selection. (BCH must ensure the course you select is best suited to you and your learning needs).

Which c	ampus are you	enrolling	in? (Select o	ne only)			
Level 3	ane Campus: 97 Creek St, BRIS Harbour Campus:			Cairns Campus: Level 1 88 Abbott	Street, CAIRNS QLD		
Suite 4, Level 2/43 Gordon Street, COFFS HARBOUR NSW							
Personal [Details						
					any middle names. If you donot yet have a USI		
Title	Given names			Family Name (Surname)			
Enter your (Day/month/			Gender (Tick ONE	box only)			
	/ /		D Male	G Female	Other		
Enter your contact information							
Home phone (including area code)				Mobile			
Email addres	S						
Alternative El (optional)	mail address						



Emergency contact name	Relationship to you	Emergency contact number						
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 thanany tempora address at 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' systemas your residential street address. Building/property name is the official place name or common usage name for an address site, including the name of abuilding,								
Aboriginal community, homeste Building/Property name	ead, building complex, agricultur	al property, park or unbounded address site.						
Flat/Unit details								
Street or lot number (e.g. 205 or Lot 118)								
Street name								
Suburb, locality or town								
State/territory		Postcode						
Alternative email (optional address)								

What is your postal address (if different from above)?					
Flat/Unit details					
Street or lot number (e.g. 205 or Lot 118)					
Street name					
Postal delivery information (e.g. PO Box 254)					
Suburb, locality or town					
State/territory	Postcode				

BNB International Colleges Pty Ltd t/a Brisbane college of Horticulture (BCH) Version 12: August 2022 | RTO Code: 32032 CRICOS code: 03226B |

B C V H Brisbane College of Horticulture								
Language and Cultu	ral Diversity							
In which country were	you born?							
Australia	stralia Other – please specify:							
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	Yes – please specify:							
Have you completed a English Test in the las months?								
	or Torres Strait Islander origin? original and Torres Strait Islander origin, mark both 'Ye	s' boxes)						
D No	Yes, Aboriginal	Yes, Torres Strait Islander						
Disability								
Do you consider yours	elf to have a disability, impairment or long-term c	ondition?						
🖵 Yes	No (Go to the next section)							
If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) inthe following list: (You may indicate more than one area) Please refer to the Disability supplement on the following page for an explanation of the following disabilities.								
Hearing/deaf	Acquired brain	impairment						
Physical	Uision							
Intellectual	Medical condition							
Learning	Other:							
Mental illness								
	o the above question do you require any assistar	nce to participate in this course?						



Disability Supplement

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.

'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.

'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 postpolio syndrome.

'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.

'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.

'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.

'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.

'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.

'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.

'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.

B C V H Britana Callage of Intricatore								
Schooling								
What is your highest COMPLETED school level?								
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 inYear 10 the Highest school level completed is Year 9.								
(Tick ONE box only)								
Completed Year 12 Completed Year 9 or equivalent								
Completed Year 11 Completed Year 8 or lower								
Completed Year 10 Never attended school								
Are you still enrolled in secondary or senior secondary education?								
Yes No								
Previous Qualifications Achieved								
Have you SUCCESSFULLY completed any of the qualifications listed below?								
Yes (if yes, please enter one of these Prior Education Achievement Recognition Identifiers any applicable qualification level.) A – Australian E– Australian equivalent Xe – Australian equivalent								
I – International 3. I – International								
A E I								
Bachelor's degree or Higher Degree								
Advanced Diploma or Associate Degree								
Diploma (or Associate Diploma)								
Certificate IV (or Advanced Certificate/Technician)								
Certificate III (or Trade Certificate)								
Certificate II								
Certificate I								
Certificates other than the above								

C V H Frishans College et Horiculture							
Employer Details (optional)							
Enter your current employment infor	mation (where applicable)						
Employer organisation name	Your position						
Supervisor name							
Employers street address							
Suburb, locality or town							
State/territory	Postcode						
Telephone							
Email							
Website							
Employment							
Of the following categories, which Bl	EST describes your current employment status?						
For casual, seasonal, contract and shift hours or more per week) or part-time en	work, use the current number of hours worked per week to determine whetherfull time (35 apployed (less than 35 hours per week).						
(Tick ONE box only)							
G Full-time employee	Employed – unpaid worker in a family business						
Part-time employee	Unemployed – seeking full-time work						
Self-employed – not employing	others Unemployed – seeking part-time work						
Self-employed – employing othe	urs Unemployed – not seeking employment						
Occupation							
Which of the following classifications	BEST describes your current or recent occupation?						
(Tick ONE box only) If unemployed, go t	o the next question.						
Managers	Sales Workers						
Professionals	Machinery Operators and Drivers						
Technicians and Trade Workers	Labourers						
Community and Personal Service	e Workers D Other:						
Clerical and Administrative Work	kers						

B C V H Eristene College of Forticalities	
Industry	
Which of the following classifications BEST describ (Tick ONE box only) If unemployed, go to the next question	es the Industry of your current or previous Employer? on.
Agriculture, Forestry and Fishing	Financial and Insurance Services
G Mining	Rental, Hiring and Real Estate Services
Manufacturing	Professional, Scientific and Technical Services
Electricity, Gas, Water and Waste Services	Administrative and Support Services
	Public Administration and Safety
Wholesale Trade	Education and Training
Retail Trade	Health Care and Social Assistance
Accommodation and Feed Services	Arts and recreation Services
Transport, Postal and Warehousing	Other Services
Information Media and telecommunications	

Study Reason

trai	Study Reason – Of the following categories, which BEST describes your main reason for undertaking thiscourse / raineeship /apprenticeship? Tick ONE box only)				
	To get a job	I wanted extra skills for my job			
	To develop my existing business	To get into another course of study			
	To start my own business	□ For personal interest or self-development			
	To try for a different career	To get skills for community / voluntary work			
	To get a better job or promotion	Other reasons			
	It was a requirement of my job				



International document details - for international students only						
Enter the details of your international documents						
Passport No.	port No.		Country of issue			Nationality
Visa no (if applicable)				Details		
Home address (overseas) Street						
Suburb / city Postal code						

Unique Student Identifier

From 1 January 2015, BCH 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). If youhave not yet obtained a USI you can apply for it directly at http://www.usi.gov.au/create-your-USI/ on computer or mobile device. Please note that if you would like to specify your gender as 'other' you will need to contact the USI Office for assistance.

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

In providing my USI, I confirm BCH is authorised to collect, use and disclose my student identifier for thepurposes required under the *Student Identifiers Act 2014*.

I understand that I will receive a notice regarding BCH's use of this information to confirm my USI.

I understand that BCH's name included in the notice may be different to the name they are familiar with –the name of the organisation verifying my USI is BCH.



Privacy Notice & Applicant Declaration

Privacy Notice

Under the *Data Provision Requirements* 2012, BCH is required to collect personal information about you andto 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 BCH for statistical, administrative, regulatory and research purposes. BCH 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 <u>www.ncver.edu.au</u>).

BCH retains a record of personal information about all individuals with whom we undertake any form of business activity. BCH must collect, hold, use and disclose information from our clients and stakeholders for a range of purposes.

As a government registered training organisation, regulated by the Australian Skills Quality Authority, BCH is required to collect, hold, use and disclose a wide range of personal and sensitive information on Students in nationally recognised training programs. This information requirement is outlined in the *National Vocational Education and Training Regulator Act 2011* and associated legislative instruments.

BCH must require and confirm identification however in services delivery to individuals for nationally recognised course programs. We are authorised by Australian law to deal only with individuals who have appropriately identified themselves. That is, it is a *Condition of Registration* for all RTOs under the *National Vocational Education and Training Regulator Act 2011* that we identify individuals and their specific individual needs on commencement of services delivery and collect and disclose Australian Vocational Education and Training Management of Information Statistical Standard (AVETMISS) data on all individuals enrolled in nationally recognised training programs. Other legal requirements, as noted earlier in this policy, also require considerable identification arrangements.

For information about how BCH collects, uses and discloses your personal information generally, including how you can make a complaint about a breach of privacy, please refer to BCH privacy policy which can be found within the Student Handbook and on our website at

http://bch.edu.au/pdf/International_Student_PP_Handbook_V5%20Sep%202021.pdf

This Privacy Policy contains information about how individuals may access and seek correction of the personal information held by us, and how to complain about a breach of privacy, and how we will deal with such a complaint.

In providing your personal information as requested and signing this notice, you are confirming your receipt of, and understanding of these details, and providing your consent for the collection, storage, use and disclosure of your personal information as outlined.



Important Information – Please read and ensure you understand the following

BCH is required to provide the below info to students prior to enrolment:

TRAINING

Information on Training Services provided by BCH is available from the office via phone or in written format. Prior to enrolling into your chosen course, ensure you have a full understanding of the structure of the course. All courses are delivered in line with State and any National requirements utilising equipment that complies with all safety standards. Courses are delivered as a theory lesson with a practical component and all participants must ensure they can undertake the training. All costs, durations and outcomes are available from the office or on the website.

ASSESSMENT

Assessments of units will be conducted at a time agreed to by both parties after the following requirements are met.

- Successfully complete all required training, and
- Paid any outstanding monies owed,

Additional assessment processes will be explained to you at the time of training. Should you have any additional questions regarding your assessment method or have any concerns please discuss these with an BCH Staff Member.

SUPPORT SERVICES AND SPECIAL NEEDS

BCH will take every possible action to ensure we support you throughout your training and assessment process. If at anypoint through-out your course you require any assistance or support please discuss these needs with BCH staff and we will do our best to help. If you have any special needs, including Language, literacy and numeracy, learning, mobility, visual impairment or hearing please notify staff prior to enrolment to allow us to cater for your needs. If you do not notify us ofany condition that may affect your learning, we will not be able to assist you if the need arises.

YOUR RIGHTS

As part of your training and assessment, you have various rights. BCH wants to ensure your time spent with us is both beneficial and enjoyable. If at any point you feel harassed, discriminated or feel abused, please notify the Principal immediately either face to face, via phone or in writing. If you feel you need to complain about an aspect of service or training and assessment you may do so verbally or in writing. Appeals on any decision made by BCH may be lodged to the Principal and must be done so in writing. For more information on your rights, please talk to the staff.

PRIVACY POLICY

In compliance with the Privacy Act, the information requested on this enrolment form will only be used for the process of enrolment and maintaining the student records. All information will be kept confidential and access to this information is only available to you, the Principal and the trainer. If you want to view your files at any time, lodge the request with your trainer.

RULES AND REGULATIONS

1. To complete your enrolled course students must be able to fulfil the following obligations:

- Demonstrate to the Trainer and Assessor through attendance and assessment, both written and theory that academic and professional skills have been obtained to a satisfactory and competent level.

- Satisfy all academic, administrative and financial obligations to the organisation.

- 2. No food is to be taken into classrooms, and smoking is not permitted in the organisation's premises
- 3. Students must promptly notify BCH of any change of name, address and contact details.

4. BCH may take telephone messages for students if requested and if it is an emergency. Mobile phones must be switched off during class.

5. Students may be suspended or expelled from BCH at the Principal's discretion for:

- non or late payment of fees
- failure to uphold or maintain any of BCH Policies and Procedures
- Serious misconduct or breach of legislation

REFUND POLICY

Version 12: August 2022

BCH will safeguard any money paid by you in advance of your course. BCH will refund you any money paid by you in fullin the event we cancel or discontinue a course. If you withdraw from a course due to illness, (verified by a medical certificate) we will refund any course fees paid less an administrative fee of 20 % of your course cost. Should you withdrawfor any other reason other than illness, with less than two week's notice you will forfeit 50% of your course cost. **If you failto commence the course you will forfeit all monies paid.**

C V H Brisbane College of Horticulture	
Applicant Declaration and Co	nsent
I declare that the information I h	ave provided to the best of my knowledge is true and correct.
I consent to the collection, use	and disclosure of my personal information in accordance with the Privacy Notice above.
	olment, I am aware of the consequences that may arise from providing false, misleading or g the cancellation of my enrolment or the withdrawal of any offer made by BCH.
	e collection, use and disclosure of my personal information (which may include sensitive prmation detailed, and NCVER policies, procedures and protocolspublished on NCVER's
Marketing Use Content	
may be recognised) as may be	n to use photo of myself in public material and social media (including anyphotos where I useful. I also acknowledge BCH may seek to use images ofmy participation in training to eting and business purposes. However BCHwill not publish any such material without my
I understand that I retain the rig	nt to withdraw my consent at any time.
□ I choose to opt-out of this m	irketing and usage consent.
Applicant Signature:	Date:
*Parental/guardian consent is requ	red for all students under the age of 18.
Parent / Guardian Name:	
Parent / Guardian	
Signature:	Date:

The RTO must provide the learner with student handbook and any other information relating to the course selected.

Please attach to this form & copy of 100 points photo ID.

Office Use only: Training representative Name:

D

By signing this form, I certify that I will make every effort to deliver on the services outlined to students and provide every possible opportunity to students to complete their planned course.

Sign:_____DATE:____/___/