1 Iron Knob Street, Fyshwick ACT 2609

Phone: (02) 6175 5900

Email: training@mba.org.au

RTO No: 88163

ABN: 62130865253



Short Course Enrolment Form

STANDARD VERSION

Name of Course:		Date of Course:	/	
Unique Student Identifier (USI)				
From 1 January 2015, MBA Group Training Limited (MBA GT) ca or statement of attainment when you complete your course if yo link on the USI website at https://www.usi.gov.au/students/find- https://mba.org.au/policies-and-procedures/. Please enter your	ou do not have a USI. -your-usi. For further	To check if you alre details please see o	ady have a USI,	use the 'Find Your USI'
USI Number:				
Personal Details				
Please write the name that you used when you applied for your lapply for one before your course commences. Please visit				

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Invoice (will be sent to payee email address listed above)

Yes, Torres Strait Islander

Employment Of the following categories, which BEST describes your current employment status? (tick one box 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 Part-time Self employed - not Self employed -Employed - unpaid worker employing others in family business employee employee employing others Unemployed - seeking full time work Not employed - not seeking employment Unemployed - seeking part time work **Company Details** Company PO Company Contact No.: Name: No.: Attendee's Position or Company Occupation with Company: Email: Company Address Suburb State/Territory Postcode ABN/ACN: Business Owner/ Email: Managing Director Name: **Payment Details** Who will be responsible for payment? Company/Employer Attendee/Individual Payee Email:

Language and Cultural Diversity

In which country were you born?	Australia	Other, please sp	ecify:		
Do you speak a language other than English at home?	No, English on	Yes, pleas	e specify:		
How would you describe your Eng	lish proficiency?	Very well	Well	Not well	Not at all

Yes, Aboriginal

Credit Card (please phone the office on (02) 6175

5900 to make payment)

mark both 'Yes' boxes.

Are you of Aboriginal or Torres Strait Islander origin?

For persons of both Aboriginal and Torres Strait Islander origin,

Disability

Payment Method:

If you consider yourself to have a disability, impairment or long-term condition, please select the relevant area(s) in the following list. You may indicate more than one area. For an explanation of the following disabilities, please refer to the disability supplement at https://www.mba.org.au/training/policies-and-procedures/.

No

Hearing/deaf	Physical	Intellectual	Vision	Learning	
Mental illness	Medical condition	Other	Acquired brain impairment		

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Education							
Are you still enrolled in secondary or senior secondary education?	No						
What is your highest COMPLETED school level? (tick one box only) If you are currently enrolled in secondary education, the highest school level completed refers to the higher level you are currently undertaking. For example, if you are currently in Year 10, the highest school level con			actually	comple	eted ar	nd not	the
Year 12 or Year 11 or Year 10 or Equivalent Equivalent Equivalent	Yea Belo	ar 8 or ow		Nev Sch		tende	d
Year completed Where completed							
Previous Qualifications Achieved Please tick any qualifications that you have SUCCESSFULLY completed.							_
Bachelor Degree or Higher Degree Advanced Diploma or Associate Deg	jree	Diplo	oma (or	Asso	ciate l	Diplor	maj
Certificate IV (or Advanced Certificate/Technician) Certificate III (or Trade Certificate)		Certi	ficate II				
Certificate I Other Education (including Certificate	es or Overse	eas Quali	fication	s Not	Liste	d Abo	ve
Study Reason							
To try for a different career Professional/self development It was	a requireme	ent of my	y job		To g	et a jo	b
I want extra skills for my job For another course of study To get	get a better job or promotion Other						
For community/voluntary work To start my own business To dev	levelop my existing business						
Privacy Statement and Student Declaration							
As a registered training organisation (RTO), we collect your personal information so we can proceducation and training (VET) course with us. We use your personal information to enable us to deneeded, to comply with our obligations as an RTO. The RTO obligations include sharing your per training authorities. Further information about how MBA GT and other VET authorities may use a found in MBA GT's privacy policy published at: https://mba.org.au/policies-and-procedures/. By signing the below you are declaring that the information provided within this form is, to the bealso confirming that you understand the following: • that the information contained on this enrolment form may be used by MBA GT or the third padministrative, regulatory and/or research purposes • training activity at MBA GT, including all enrolment fees and course attendance/cancellation and procedures published at: https://mba.org.au/policies-and-procedures/	deliver VET co rsonal inform and handle yo est of your kr parties listed	ourses to nation with our perso nowledge	you, and h releval nal infol , true an GT's priv	d othe nt stat rmatio nd corr acy po	rwise, re and on can rect. Y	as territo be ou are	ory
Student Signature:	Date:		/		/		
Guardian/parental consent is required for all students under the age of 18. NCVER will use, see accordance with the VET Data Protocol and all NCVER policies and protocols (including those www.ncver.edu.au .			-		in		
Guardian Signature:	Date:		/		/		

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