



**STUDENT ENROLMENT FORM**

**COURSE NAME:**

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**Personal Information**

Surname \_\_\_\_\_ Given name(s) \_\_\_\_\_

Home address \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone Home \_\_\_\_\_ Work \_\_\_\_\_

Fax \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

Gender Male  Female  Date of Birth: \_\_\_\_\_

**Were you born in Australia?** Yes  No  If 'No', country of birth \_\_\_\_\_

**Are you an Australian Citizen or Permanent Resident?** Yes  No

Are you of Aboriginal or Torres Strait Islander origin? Yes  No   
If 'Yes', please specify \_\_\_\_\_

Do you speak a language other than English at home? Yes  No   
If 'Yes', please specify \_\_\_\_\_

Do you consider yourself to have a permanent disability? Yes  No   
If 'Yes', please specify \_\_\_\_\_

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**Education and Training**

Are you currently attending school? Yes  No   
If 'Yes', specify level \_\_\_\_\_ If 'No', year left school \_\_\_\_\_

Highest completed schooling Yr 8 or lower  Yr 9  Yr 10  Yr 11  Yr 12

Since leaving school, have you completed any qualification? Yes  No   
If 'Yes', name of qualification \_\_\_\_\_

Level of qualification Cert 1  Cert II  Cert III  Cert IV   
Diploma  Advanced Diploma  Degree

Are you seeking recognition of competencies or skills? Yes  No  If 'Yes', ensure you obtain an RCC/RPL kit

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**Employment (if Applicable)**

Employer \_\_\_\_\_

Worksite address \_\_\_\_\_

Current position/title \_\_\_\_\_ Employment start date \_\_\_\_\_

Full time  Part time  Other  Approx hours per week \_\_\_\_\_

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**PAYMENT DETAILS - \*credit cards will incur a 1.6% surcharge.**

**Amount:** \$1,300 (No GST)

**Credit Card:** VISA or MASTERCARD ONLY

**Credit Card No.**..... **Expiry No.**..... **3 digit Code on Back of Card**.....

**Name on Card**.....

**Using your personal information (Benchmark OHS Consulting Pty Ltd Privacy Policy)**

The objective of our Privacy Policy is to ensure that a sound privacy foundation and framework is established and maintained by Benchmark OHS Consulting Pty Ltd. **Your personal information will not be disclosed to a third party without your written permission.**

Benchmark OHS Consulting Pty Ltd is committed to complying with Australia’s Privacy Act. Our primary purpose in collecting personal information is to enable us to perform tasks such as respond to your requests, send you replacement cards or to contact you via mail, email or phone to assist you with any enquiries regarding products or services we offer. You can request to access you personal information at any time to update or correct the information we hold on you by email, post or phone as detailed below.

**THIS FORM SHOULD BE EMAILED OR FAXED BACK TO:**

**Attention: Enrolments**  
**Benchmark OHS Consulting Pty Ltd**  
**PO Box 197**  
**MIRANDA NSW 1490**  
**E: [ask@benchmarkohs.com.au](mailto:ask@benchmarkohs.com.au)**  
**Phone: (02) 95310474**  
**Fax: (02) 95314761**

Benchmark OHS Consulting Pty Ltd has based its Privacy Policy on the ten (10) National Privacy Principles (NPPs), including an Information Handling Practices Statement which sets out the complaints procedure for persons to follow should they believe contravention of any or all of the NPPs has taken place. Unless otherwise stated, Benchmark OHS Consulting Pty Ltd is bound by each of the NPPs in their entirety, as outlined in the new privacy provisions of the Commonwealth Privacy Act 1998.

The Benchmark OHS Consulting Pty Ltd Privacy Policy extends to and covers all operations and functions of the organisation. Management, employees and/or any other third parties who have access to and/or utilise personal information collected and/or held by Benchmark OHS Consulting Pty Ltd must abide by this Privacy Policy. You can obtain a full copy of our privacy policy by asking us to send it to you.

**Student obligations**

1. Attend work and observe the conditions of course qualification and follow the directions of Registered Training Organisation
2. Work toward achieving the qualification stated.
3. Undertake any training and assessment in accordance with course outline and RTO guidelines
4. Acknowledge that all instructions and any other material provided by Benchmark OHS Consulting Pty Ltd and comes into the possession of the student remains the possession of the RTO and all information obtained from Benchmark OHS Consulting Pty Ltd and given in circumstances of confidence must be kept confidential and not be used or disclosed without the express approval of Benchmark OHS Consulting Pty Ltd
5. Comply with the requirements of the these training guidelines signed by the student and Benchmark OHS Consulting Pty Ltd –t he Registered Training Organisation
6. If you should this qualification, sign a termination or transfer of qualification agreement by letting the RTO know in writing or by email that you wish to discontinue the training.

**Compliance agreement**

I undertake to:-

- Read the Privacy Policy of the Benchmark OHS Consulting Pty Ltd
- Agree to comply with the obligations stated above
- Work towards the achievement of the qualification stated in the attachment to this application
- Undertake any training and assessment in accordance with requirements of this qualification.
- Comply with the requirement that, where assignments must be submitted, any other material provided by the RTO and/or the Benchmark OHS Consulting Pty Ltd shall remain the possession of the company and/or the Benchmark OHS Consulting Pty Ltd

**Declaration**

I declare that to the best of my knowledge the details entered on this application by me or in relation to me are true and correct. I understand that it is a serious offence plagiarise any work or to have any other person other than myself conduct the online training and assessments for or to provide a false or misleading statements in connection with this training program or application. I understand that enrolment into this qualification is subject the qualification fees being paid prior to commencement and I will undertake to arrange payment of this fee.

Print name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

**Declaration – Enrolling Officer**

This is to certify that this trainee has been given information in relation to the above and has been provided with advice and support where appropriate and has freely chosen to enrol in this program.

Print name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

