

ENROLMENT FORM 2016

www.careinstitute.com.au | Tel: (02) 8628 0170



PERSONAL DETAILS

1. Enter your full name

Given Name(s) _____

Family Name(surname) _____

2. Enter your birth date (DD/MM/YYYY)

____ / ____ / ____

3. Sex (TICK one box only)

Male Female

4. 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 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 territory's 'rural property addressing' or 'numbering' system as your residential street address.

Flat/unit details _____

Street or lot number _____

Street name _____

Suburb, locality or town _____

State/territory _____

Postcode _____

Contact Number _____ Email _____

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

Flat/unit details _____

Street or lot number _____

Street name _____

Suburb, locality or town _____

State/territory _____

Postcode _____

6. Course details?

	<i>Course Name</i>	<i>Course Fees</i>
CHC33015	Certificate III in Individual Support (AGEING)	\$1500.00
CHC33015	Certificate III in Individual Support (DISABILITY)	\$1500.00
CHC33015	Certificate III in Individual Support (HOME & COMMUNITY CARE)	\$1500.00
CHC43015	Certificate IV in Ageing Support	\$2000.00
CHC43115	Certificate IV in Disability	\$2000.00
HLTAID003	Provide First Aid	\$75.00

LANGUAGE & CULTURAL DIVERSITY

7. In which country were you born? Australia Others - 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 Yes, other - please specify _____

9. How well do you speak English? Very Well Well Not Well Not at all

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

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

No Yes, Aboriginal Yes, Torres Strait Islander

DISABILITY

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

Yes No No - Go to question 13

12. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list: (You may indicate more than one area)

Hearing/Deaf	<input type="checkbox"/>	Physical	<input type="checkbox"/>	Other	<input type="checkbox"/>
Intellectual	<input type="checkbox"/>	Learning	<input type="checkbox"/>		
Mental Illness	<input type="checkbox"/>	Acquired brain impairment	<input type="checkbox"/>		
Vision	<input type="checkbox"/>	Medical condition	<input type="checkbox"/>		

SCHOOLING

13. What is the highest COMPLETED school level? (Tick ONE box only)

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

Never attended school - go to question 15

14. In which year did you completed that school level? _____

15. Are you still attending secondary school? Yes No

PREVIOUS QUALIFICATIONS ACHIEVED

16. Have you SUCCESSFULLY completed any if the following qualifications?

Yes No *No - go to the question 18*

17. If YES, then tick ANY applicable boxes.

- | | |
|---|--------------------------|
| Bachelor degree or higher degree | <input type="checkbox"/> |
| Advanced diploma or associate degree | <input type="checkbox"/> |
| Diploma (or associate diploma) | <input type="checkbox"/> |
| Certificate IV (or advanced certification/technician) | <input type="checkbox"/> |
| Certificate III (or trade certificate) | <input type="checkbox"/> |
| Certificate II | <input type="checkbox"/> |
| Certificate I | <input type="checkbox"/> |
| Certificates other than the above | <input type="checkbox"/> |

EMPLOYMENT

18. Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

- | | |
|---|--------------------------|
| Full-time employee | <input type="checkbox"/> |
| Part-time employee | <input type="checkbox"/> |
| Self-employed - not employing others | <input type="checkbox"/> |
| Employer | <input type="checkbox"/> |
| Employed - unpaid worker in a family business | <input type="checkbox"/> |
| Unemployed - seeking full-time work | <input type="checkbox"/> |
| Unemployed - seeking part-time work | <input type="checkbox"/> |
| Not employed - not seeking employment | <input type="checkbox"/> |

STUDY REASON

19. Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship? (Tick ONE box only)

- | | | | |
|----------------------------------|--------------------------|---|--------------------------|
| To get a job | <input type="checkbox"/> | It was a requirement of my job | <input type="checkbox"/> |
| To develop my existing business | <input type="checkbox"/> | I wanted extra skills for my job | <input type="checkbox"/> |
| To start my own business | <input type="checkbox"/> | To get into another course of study | <input type="checkbox"/> |
| To try for a different career | <input type="checkbox"/> | For a personal interest or self - development | <input type="checkbox"/> |
| To get a better job or promotion | <input type="checkbox"/> | Other reasons | <input type="checkbox"/> |

DECLARATION

I apply for admission in Care Institute of Australia and declare that:

- I will comply with the rules of Care Institute of Australia.
- I have read, understood and agree to all the Terms and Conditions.
- I have read and understood information provided in the Participant Handbook.
- I have read and understood the course information provided in the Course Brochure and Hope Institute website (www.hopeinstitute.edu.au).
- The information that I have provided is true and correct to the best of my knowledge.
- I understand that my personal details will be collected for the purpose of student records required by Hope Institute and will not be sold to any party.
- I acknowledge that Hope Institute has the right to pursue outstanding amount through a debt collection agency should I fail to pay all debts owing to Hope Institute. All associated collection cost will be added to the outstanding amount.
- I can access my records by written requests.
- I will provide identification in the form of either a birth certificate, Driver's License or Passport.
- I will provide my USI details

Participants Signature _____ Date _____

CARE Representative's Signature _____ Date _____

TERMS AND CONDITIONS - FEES, PRICING, COURSE VARIATIONS & REFUNDS

(Please read carefully. This form is the part of your agreement with Care Institute when you enrol in a course.)

Public Course Fees & Payment Plans

- Pricing for individuals registering for public courses will be at the published rate in the course flyers and on the website.
- The enrolment fee is non-refundable.
- We offer payment plans.
- Other special offers and discounts may be marketed from time to time.

Course Name	Course Fees
CHC33015 Certificate III in Individual Support (AGEING)	\$1500.00
CHC33015 Certificate III in Individual Support (DISABILITY)	\$1500.00
CHC33015 Certificate III in Individual Support (HOME & COMMUNITY CARE)	\$1500.00
CHC43015 Certificate IV in Ageing Support	\$2000.00
CHC43115 Certificate IV in Disability	\$2000.00
HLTAID003 Provide First Aid	\$75.00

Recognition of Prior Learning

RPL for Full Qualification

Certificate III in Individual Support (CHC33015)	\$1000.00
Certificate IV in Disability (CHC43115)	\$1500.00
Certificate IV in Ageing Support (CHC43015)	\$1500.00

RPL Per Unit

Certificate III in Individual Support (CHC33015)	\$150.00
Certificate IV in Disability (CHC43115)	\$300.00
Certificate IV in Ageing Support (CHC43015)	\$300.00
RPL Application Fee*	\$300.00

*RPL Application Fee is a non-refundable fee. It is to cover the cost of assessing and application to determine whether or not it is ready for RPL.

Signature: _____

Date: _____

If Enrolling in Certificate III in Individual Support (Home & Community Care) (CHC33015)

Total Course Fee: \$1500.00

You must meet the conditions (1), (2),(3) &(4)

1. 1st instalment of \$500 at enrolment;
2. 2nd instalment of \$500 within 30 days of course commencement date;
3. 3rd instalment of \$500 within 60 days of course commencement;
4. You must have paid the full course fee before the issuance of the qualification.

If Enrolling in Certificate IV in Ageing Support (CHC43015)

Total Course Fee: \$2000.00

You must meet the conditions (1), (2),(3) &(4)

1. 1st instalment of \$1000 at enrolment;
2. 2nd instalment of \$500 within 30 days of course commencement date;
3. 3rd instalment of \$500 within 60 days of course commencement;
4. You must have paid the full course fee before the issuance of the qualification.

If Enrolling in Certificate IV in Disability (CHC43115)

Total Course Fee: \$2000.00

You must meet the conditions (1), (2),(3) &(4)

1. 1st instalment of \$1000 at enrolment;
2. 2nd instalment of \$500 within 30 days of course commencement date;
3. 3rd instalment of \$500 within 60 days of course commencement;
4. You must have paid the full course fee before the issuance of the qualification.

If Enrolling in Provide First Aid (HLTAID003)

Total Course Fee: \$75

You must pay the entire fee at enrolment.

Corporate Pricing for Groups

- Quotations will be provided to businesses and organisations that wish to register 5 or more individuals. Courses and dates will be negotiated with the customer.
- Payment will be requested by invoice under the usual company terms.

Care Institute guarantees the following which forms the agreement by the RTO.

- Upon receipt of completed course enrolment details & the course fee (1st Installment) to;
- Provide services according to the terms & conditions of enrolment;
- Provide a receipt (tax invoice);
- Confirm the course enrolment &
- Confirm the course commencement date;
- Confirm the payment plan as selected & appropriate for the course;
- Provide access to the course materials & assessments;
- Provide a classroom based face-to-face course as described in the marketing information;
- Provide trainer & administration support to participants throughout the enrolment;
- Mark, provide feedback & results on the submitted assessment tasks;
- Support participants to achieve their goal of completion of the qualification.
- Provide support for participants with specific & special needs identified by the parties within the capacity of the RTO;
- Issue results & a qualification or statement of Attainment/s upon satisfactory completion of the course requirement (if applicable);
- Provide a fair & reasonable complaints & assessment appeal process;
- Seek feedback on Care Institute's client services.

Acceptance of course enrolment & the terms & conditions forms the agreement by the participant:

Upon signing the course enrolment and making the first payment, the participant acknowledges their understanding of the agreement entered into with Care Institute and agrees that:

- details provided on enrolment are correct and the participants warrants he/she is aware of and meets the entry requirements and has discussed special needs with the RTO;
- Course enrolment is complete when the 1st installment is paid and the money is deposited in the Care Institute account;
- the terms and conditions of enrolment are accepted including fees and refund policy;
- Care Institute has the participant's consent to undertake, if applicable, a credit check with the Credit Reference Association of Australia (*where payment is by direct debit from a credit card*);
- Care Institute will provide the date of course commencement date;
- Participants are responsible for their own attendance, progress and submission of work including assessments;
- Participants will communicate with the trainer and administration if there are issues or barriers to completion of the course where Care Institute may be able to help to support the participants;
- Care Institute provides opportunities for feedback on its services and complaints and assessment appeal process;

Signature: _____

Date: _____

ADMINISTRATION FEES

We will always do our best to provide good service and assist you with short turnaround time when handling administrative matters. In some cases, a request will incur an administrative charge below:

Administrative Fees	\$ (GST)	
Late payment penalties for customers who do not pay fees on time	2% late fee charge on outstanding amount	If the student has attended more than 1 class. No refund is given unless special circumstances apply.
Enrolment Fee	\$150 Enrolment fee	Cancellation or withdrawal request is received by the Care Institute office after 7th day of commenced date No refund is given after 7th day of the commencement date unless special circumstances apply.
Credit transfer processing fee	\$29 per unit	
Re-assessment fees available to customers who are deemed not yet competent on completion of training and assessment after re-submit and re-sit options.	\$89 per unit	<ul style="list-style-type: none"> You must submit notice of the intention and the request for a refund in writing. Evidence to support the request can be submitted. You must be up to date with course fees at the time of the request. The request will be assessed based on information provided and the progress through the course. If the request is successful, a refund administration fee is charged and deducted from the refund. A refund calculation letter is provided that explains the decision. Statements of Attainment for units completed and paid to date will be issued.
Re-enrolment fees for customers whose time for submission of work has passed and they wish to extend the length of the course.	\$90 non-refundable re-enrolment & \$49 per unit	
Fee for issuing a replacement qualification test.	\$49	
Fee for processing refunds	\$89	
Fees for processing cancellations & course variations	\$49	
Fee for replacement textbook or full suite of learning assessment materials	\$89	

Provider Default - If CARE cannot offer or continue a course

Where Care Institute is in a “default” situation such as cancellation of course, a Full refund including Enrolment Fee will be refunded and no refund Administration Fee will be charged.

A refund letter showing the fees to be refunded is sent to the customer.

The payment is processed within a maximum of 4 weeks (20 working days) from the date on the refund is requested.

REFUNDS

Course Variations - Withdrawal or Cancellation from a Course and refund request

An enrolment fee of \$150 is non-refundable.

Request may be in writing or email. A form is completed. The form is available from the website's download page.

Date of first class of the course that includes Induction, will be considered as the course “Commencement Date”.

Class Room Delivery		
Cancellation or withdrawal request is received by the Care Institute office prior to course commencement date.	100% of the fees received from the client less enrolment and refund fee will be refunded.	
If the cancellation or withdrawal request is received by Care Institute office within 7 days of commencement date and student has attended only 1 class.	100% of the fees received from the client less enrolment and refund fee will be refunded. A material fee of \$89 will be charged as the student would have received and opened the material in his/her first class.	

Signature: _____

Date: _____