

Your application cannot be processed unless full documentation is attached. Please complete all sections and return to [admissions@hunter.edu.au](mailto:admissions@hunter.edu.au)

Disclaimer: Incorrect or incomplete applications will not be processed and may lead to a delay in processing time. Please ensure that all documents provided are certified or notarised by an authorised organisation. Hunter Education Group reserves the right to decline applications for any reason at our discretion.

## 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 NCVER and other bodies handle your personal information*

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.

NCVER is authorised to disclose information to the Australian Government Department of Employment and Workplace Relations (DEWR), 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.

NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how 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).

DEWR 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 DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at <https://www.dewr.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 NCVER 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 Hunter Education Group at [ask@hunter.edu.au](mailto:ask@hunter.edu.au) 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

## Part 1: Personal Details

(Please include a certified copy of the identification pages of your passport/drivers license) (attach documents)

OFFICE  
USE  
ONLY

### Personal Details

Have you previously applied/studied with us?  Yes  No If yes, please provide your Institute ID number:

Title:  Mr  Mrs  Ms  Dr  Other:

Family name (as in passport):

Given name(s):

Date of birth (DD/MM/YYYY):  Sex:  Male  Female  Other

Current age:  First language:

Citizenship (as in passport):  Country of birth (as in passport):

### Home address in Australia

Address:

Suburb:

State:

Post Code:

Mobile  
Phone:

Email:

### Postal address in Australia (if different to home address)

Address:

Suburb:

State:

Post Code:

## Language & Cultural Diversity

In which country were you born?

Do you speak a language other than English at home?  Yes  No

If yes, please specify.

Are you of Aboriginal or Torres Strait Islander origin?  Yes Aboriginal  Yes Torres Strait  No

## Disability/Allergies

Do you have a disability, impairment, allergy or long term medical condition which may affect your studies?  Yes  No

If 'Yes', please select from below: *(This information is for support services only and will not affect the outcome of your application)*

- |                                       |  |  |
|---------------------------------------|--|--|
| <input type="checkbox"/> Hearing/deaf | <input type="checkbox"/> Physical          | <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"/> Other                     |

Please refer to Disability Supplement at the end of this form for an explanation of the above.

## Part 2: Course and Education Background

### Course Selection

Course	Course Code	Course Title	Intake	Campus (Newcastle/Gold Coast)
Course 1				
Course 2				

Do you wish to apply for Credit? If yes, please complete a credit application for and attach documents to this application.  Yes  No

Do you wish to apply for RPL? If yes, we will contact you to discuss this further.  Yes  No

Do you agree to undertake a Language Literacy & Numeracy (LLN) test if required? (If no, we may not be able to progress your application.)  Yes  No

### Schooling

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 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.

- |  |   |
|--|---|
| <input type="checkbox"/> Year 12 (or equivalent) | <input type="checkbox"/> Year 9 (or equivalent) |
| <input type="checkbox"/> Year 11 (or equivalent) | <input type="checkbox"/> Year 8 (or equivalent) |
| <input type="checkbox"/> Year 10 (or equivalent) | <input type="checkbox"/> 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  No

If yes, please select those completed from the below.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Bachelor degree or higher          | <input type="checkbox"/> Certificate IV (or advanced certificate/technician) | <input type="checkbox"/> Certificate I  |
| <input type="checkbox"/> Advanced Diploma/ Associate degree | <input type="checkbox"/> Certificate III (or trade certificate)              | <input type="checkbox"/> Other education (including certificates or qualifications) |
| <input type="checkbox"/> Diploma/ Associate Diploma         | <input type="checkbox"/> Certificate II                                      |   |

## Part 3: Employment & reason for study

### Employment status

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).

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

### Reason for study

Of the following categories, select the one which best describes your main reason for applying to study a vocational course with us.  
(Tick ONE box only)

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



## Part 4: Declaration

### Applicant's declaration

1. I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice.
2. I declare that the information I have provided to the best of my knowledge is true, correct and complete.

Signature of applicant: (as in passport signature page)

Date (DD/MM/YY)

Note: Applicant declaration must be signed by a parent or legal guardian if the student is under 18 years of age at the time of application.

Signature of guardian:

Date (DD/MM/YY)

DISCLAIMER: Hunter Education Group respects your privacy. Other than stated in the Privacy Notice, the information you have provided will not be given to any third parties, and will only be used internally. Upon graduation, you will automatically become a part of the Hunter Education Group Alumni. Please note: you will be given the opportunity to unsubscribe at the time of completing your course.

We have made every effort to ensure that the information contained in this document is correct at the time of printing. Hunter Education Group reserves the right to change the admission requirements, fees and units of competency in listed courses whenever necessary. All reasonable attempts will be made to publish the most up-to-date information, but course details can change, and you will always find the most current information on our website at [www.hunter.edu.au](http://www.hunter.edu.au)

## Disability supplement

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.

### 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 post-polio 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.