

COURSE SELECTION

- Cert II in Business BSB20115
- Cert III in Business Administration(Medical) BSB31115
- Cert III in Dental Assisting HLT35015 (2 yrs)
- Certificate IV in Dental Assisting HLT45015 (2 yrs)
- Cert III in Individual Support CHC33015
- Cert IV in Ageing Support CHC43015
- Cert II in Health Support Services HLT23215
- Cert III in Health Services Assistance HLT33115
- Cert III in Dental Laboratory Assisting HLT35115
- Cert II in Medical Service First Response HLT21015
- Certificate II in Engineering Pathways MEM20413
- Cert II in Engineering - Production Technology MEM20205
- Certificate II in Retail Services SIR20216
- Certificate III in Retail SIR30216

Training Location preference: Belmont Malaga Mandurah Bunbury Geraldton

Student High School:

Personal Details

Student Surname Gender

M	F
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Given Names

You are required to provide a copy of your passport or Birth Certificate

Date of Birth / / Email address

Postal Address (No. & street)

Suburb / City State Post code

Phone number 1 () Number 2 ()

Nationality

Student USI *Unique Student Identifier* **MUST** be recorded here before certificate can be issued. <http://www.usi.gov.au/Pages/>

(Tick if applicable) I do not have a USI number and would like DNA Kingston Training to apply for one on my behalf

Please complete and sign this form. By signing you agree that you will commit to the training programme enrolled and pay associated fees and follow the policies and procedures outlined by DNA Kingston Training, if under 18 years of age your Parent/Guardian will need to sign on your behalf

Applicants signature Date

Guardian signature () Date

Guardian name Contact #

Language and Cultural Diversity

1. In which country were you born?
 Australia 1101 Other - please specify: _____
2. 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 1201 English only - Go to Question 9 Yes, other - Please specify: _____
3. How well do you speak English?
 Very well 1 Not well 3
 Well 2 Not at all 4
4. Are you of Aboriginal or Torres Strait Islander origin? For persons of both, mark both "yes" boxes
 No Yes, Aboriginal Yes, Torres Strait Islander

Disability

5. Do you consider yourself to have a disability, impairment or long-term condition?
 Yes Y No N No - Go to Question 12
6. If YES, then please indicate the areas of disability, impairment or long-term condition: (you may indicate more than one area)
- | | | | | | |
|--------------|-----------------------------|---------------------------|-----------------------------|-------------------|-----------------------------|
| Hearing/Deaf | <input type="checkbox"/> 11 | Learning | <input type="checkbox"/> 14 | Vision | <input type="checkbox"/> 17 |
| Physical | <input type="checkbox"/> 12 | Mental Illness | <input type="checkbox"/> 15 | Medical Condition | <input type="checkbox"/> 18 |
| Intellectual | <input type="checkbox"/> 13 | Acquired Brain Impairment | <input type="checkbox"/> 16 | Other | <input type="checkbox"/> 19 |

Schooling

7. What is your highest COMPLETED school level? (Tick ONE box only.)
- | | | | | | |
|-----------------------|-----------------------------|-----------------------|-----------------------------|-----------------------|-----------------------------|
| Year 12 or equivalent | <input type="checkbox"/> 12 | Year 10 or equivalent | <input type="checkbox"/> 10 | Year 8 or below | <input type="checkbox"/> 08 |
| Year 11 or equivalent | <input type="checkbox"/> 11 | Year 9 or equivalent | <input type="checkbox"/> 09 | Never attended school | <input type="checkbox"/> 02 |
- Never attended school – Go to Question 14
8. In which YEAR did you complete that school level? _____
9. Are you still attending secondary school? Yes No

Previous Qualifications Achieved

10. Have you SUCCESSFULLY completed any of the following qualifications?
 Yes Y No N No - Go to Question 17
11. If YES, then tick ANY applicable boxes.
- | | | | |
|--|------------------------------|--|------------------------------|
| Bachelor degree or higher degree | <input type="checkbox"/> 008 | Certificate III (or Trade Certificate) | <input type="checkbox"/> 514 |
| Advanced Diploma or Associate Degree | <input type="checkbox"/> 410 | Certificate II | <input type="checkbox"/> 521 |
| Diploma (or Associate Diploma) | <input type="checkbox"/> 420 | Certificate I | <input type="checkbox"/> 524 |
| Certificate IV (or Adv Certificate/Technician) | <input type="checkbox"/> 511 | Certificates other than the above | <input type="checkbox"/> 990 |

Employment

12. Of the following categories, which BEST describes your current employment status? (tick ONE box only)
- | | | | |
|--------------------------------------|-----------------------------|---|-----------------------------|
| Full-time employee | <input type="checkbox"/> 01 | Employed - unpaid worker in a family business | <input type="checkbox"/> 05 |
| Part-time employee | <input type="checkbox"/> 02 | Unemployed - seeking full-time work | <input type="checkbox"/> 06 |
| Self employed - not employing others | <input type="checkbox"/> 03 | Unemployed - seeking part-time work | <input type="checkbox"/> 07 |
| Employer | <input type="checkbox"/> 04 | Not employed - not seeking employment | <input type="checkbox"/> 08 |

Study Reason

13. Of the following categories, which BEST describes your main reason for undertaking this course (Tick ONE box only.)
- | | | | |
|----------------------------------|-----------------------------|---|-----------------------------|
| To get a job | <input type="checkbox"/> 01 | It was a requirement of my job | <input type="checkbox"/> 06 |
| To develop my existing business | <input type="checkbox"/> 02 | I wanted extra skills for my job | <input type="checkbox"/> 07 |
| To start my own business | <input type="checkbox"/> 03 | To get into another course of study | <input type="checkbox"/> 08 |
| To try for a different career | <input type="checkbox"/> 04 | For personal interest or self-development | <input type="checkbox"/> 12 |
| To get a better job or promotion | <input type="checkbox"/> 05 | Other reasons | <input type="checkbox"/> 11 |