**Note Please write your name exactly as you used when applying for your USI any information left off from highlighted will result in your enrolment not progressing**

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| Distance delivery CUA30313 Certificate III Assistant Dance Teaching | RPL Delivery CUA30313 Certificate III in Assistant Dance Teaching | | | Distance delivery CUA40313 Certificate IV Dance Teaching Management | | RPL Delivery CUA40313 Certificate IV Dance Teaching Management | | CUA50313 Diploma of Dance Teacher Management (RPL only ) | | CUA50213 Diploma of Musical Theatre (RPL only) |
| Miss Mrs.  Mr. Ms. | | | First name | | | | Middle name | | Last name | |
| Date of Birth  Place of Birth | | | Male Female | | | | USI number  Note no applications accepted without USI number usi.gov.au | | School student number  LUI, SACE, VSN | |
| Australian/New Zealand Citizen  Yes  No | | | |
| Telephone number home | | | Mobile number | | | | Email | | | |
| Street Address | | | Unit number | | | | What is the reason for undertaking this course  To get employment  To develop existing skills  To start my own business  To change careers  To get a promotion  Job requirement  Personal interest  To get a better job  To get in another course | | Employment Status  Full time  Part time  Unemployed | |
| Street number | | | |
| Street name | | | |
| Suburb/town | | | |
| State | | | |
| Post code | | | | Are you a school based student? Yes  No  If so what is your current year at school  Yr. 12 or equivalent  Yr. 11 of equivalent  Yr. 10 or equivalent  Yr. 9 or equivalent  Yr. 8 or below | | | |
| Postal address  Same as above | | | Unit number | | | |
| Street number | | | |
| Street name | | | |
| Suburb/town | | | |
| State | | | |
| Post code | | | | What was the highest school level completed  Yr. 12  Yr. 11  Yr. 10  Yr. 9 or equivalent  Yr. 8 or below  In what year did you achieve this | | | |
| Permanent address  Same as above | | | Unit number | | | |
|  | | | Street number | | | |
|  | | | Street name | | | |
|  | | | Suburb/town | | | |
|  | | | State | | | |
|  | | | Post code | | | |
| Prior education achievement  Certificate I  Certificate II  Certificate III  Certificate IV  Diploma  Advanced diploma or associated Degree  Bachelor Degree or higher  Miscellaneous | | Main Language spoken at home  Proficiency in English  Very well  Well  Not well  Not at all | | | Do you identify with a disability  Yes  No  If so Type  Acquired Brain  Hearing /Deaf  Intellectual  Learning  Mental Illness  Not specified  Other  Physical  Vision | | | | Indigenous status  No neither Aboriginal or Torres Strait Islander  Yes Aboriginal  Yes Torres Strait Islander  Yes Aboriginal and Torres Strait Islander | |
| Next of Kin Relationship  First Name  Last Name  Phone number       Email | | | | | | | | Highest Dance Education or technical exam passed with ATOD Ltd or other organisation | | Date Passed or anticipating passing ATOD Elementary/Level 10 or equivalent |

**Privacy Notice**

Under the Data Provision Requirements 2012, **Australian Teachers of Dancing Limited RTO31624** is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by **Australian Teachers of Dancing Limited** for statistical, regulatory and research purposes. **Australian Teachers of Dancing Limited** may disclose your personal information for these purposes to third parties, including:

* School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
* Employer – if you are enrolled in training paid by your employer;
* Commonwealth and State or Territory government departments and authorised agencies;
* NCVER;
* Organisations conducting student surveys; and
* Researchers.
* Personal information disclosed to NCVER may be used or disclosed for the following purposes:
* Issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts;
* facilitating statistics and research relating to education, including surveys;
* understanding how the VET market operates, for policy, workforce planning and consumer information; and
* administering VET, including program administration, regulation, monitoring and evaluation.

You may receive an NCVER student survey, which may be administered by an NCVER employee, agent or third party contractor. You may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the Privacy Act 1988 (Cth), the VET Data Policy and all NCVER policies and protocols (including those published on NCVER’s website at [www.ncver.edu.au](http://www.ncver.edu.au/)).

**Responsibilities**

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| The students’ responsibilities include, but are not limited to:   * Undertaking all training and assessment as identified in the training plan * Working with ATOD and the studio to achieve competence in required skills * Adhering to student handbook requirements/procedures   The studio’s responsibilities include, but are not limited to:   * Providing skill development by providing tasks that relate to the units of competency within the qualification * Providing training and assessment in accordance with a Training Plan * Working with the RTO and student to support the achievement of competence in required skills * Notifying the RTO and student regarding any issues that may affect successful completion of the student * Explaining and offering Recognition of Prior Learning (RPL) and credit transfer to the student where appropriate * Updating ATOD with the competencies gained by the student as per the agreement |
| ATOD’s responsibilities include, but are not limited to:   * Notifying the student, studio and the state training authority regarding any issues that may affect successful completion of the student * Providing the studio and the student with details of how they access ATOD’s training and assessment dispute mechanism * Updating the policies and procedures required of students and studios and providing ongoing support in the use and understanding of these * Updating the student management system with competencies achieved and uploading to the State Training Authorities as required * Maintaining records of student assessments throughout the student’s enrolment and outcomes as required by legislation. * Developing and maintaining units and undertaking validation of qualifications |

Course fees include all relevant study materials and two assessment attempts . Additional attempts incur a fee identified on the student portal.

Students are expected to progress through training with ½ the units being completed within the first year. Where a student does not progress through ½ of the units by the end of 12 months they are deemed as having attempted half the assessments and not achieving competency.

Specialist Workshops may have additional fees.

Students are required to hold a current first aid certificate at the time of completion of the Certificate III or Certificate IV . Students are required to obtain that qualification separately to ATOD studies at the student’s cost and provide a copy of statements to ATOD. First aid only remains current when CPR is current.

A student cancelling or withdrawing from the course will receive a refund less an administrative fee of $500.

I have read and understood the fees and refund policy, the appeals policy and the student handbook found on atod.net.au I agree to abide by the policies and procedures within those handbooks including those ramifications should they not be followed. I understand these change and the most recent will be available on my portal.

I understand that terms and conditions change from time to time, I will be notified via email and via my portal. Continuing my training seven days past deliver of the email and upload to the portal will be deemed as accepting the change to the terms and conditions

I understand that should I not complete the course of study within 2 years of my initial enrolment, I may request one (1) extension of 6 months free of charge but any further extension requested by a student will be $250 per 6-month extension to cover administration costs associated with movement to another course offer. Further more I understand that any extension made may also increase the assessment work I am required to complete due to changes in unit requirements made by industry. These changes may also attract additional fees due to those unit changes but will be capped at the current unit charge for the course at the time of the student request for extension

I declare that the information I have provided to the best of my knowledge is true and correct. I am aware of the consequences that may arise from providing false, misleading or incomplete information, including the cancellation of my enrolment or the withdrawal of any offer made.

I understand I am enrolling in an accredited course and my qualifications and/or statement of attainment will be issued by Australian Teachers of Dancing (ATOD) RTO number 31624

I consent to the collection, use and disclosure of my personal information in accordance with the attached Privacy Notice

I agree to discussions being held regarding my competencies between the studio/school, ATOD and vet related bodies and as per the privacy notice attached

I understand my image will not be used by ATOD unless a specific release is obtained. Any use by the studio is an agreement between the studio and the student/guardian.

I understand I am required to source my own first aid certificate and it must be in date with a valid CPR at the time I complete my studies

I understand I am required to have completed the prerequisite requirements of satisfactorily completing an appropriate level dance exam

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| --- | --- |
| Signature  Note: parental consent required if student is under the age of 18. | Date |

**Required only for students undertaking distance delivery**

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| Student of (MENTOR’S NAME & STUDIO ):  Email:  Contact number: |

For the mentor studio trainer to sign

* Providing skill development and practice by providing tasks that relate to the units of competency within the qualification and access to students, syllabi and resources to train
* Providing opportunity to work with students in a teacher/trainer capacity under the guidance of a qualified teacher and where necessary video that work
* Providing access to business related aspects, dealing with difficult customers, parts of your business plan, accepting and dealing with tuition fees, enrolment of students, withdrawal of students,
* Working with the RTO and student to support the achievement of competence in required skills
* Notifying the RTO and student regarding any issues that may affect successful completion of the student
* Complete a survey regarding the student’s training

I have read and understood my responsibilities in this students training and agree to

|  |  |
| --- | --- |
| Signature | Date |

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| --- |
| **Office use only:**  **USI/LUI confirmed**  **T&C signed by over 18**  **Payment**  **Location**  **Units added**  **LA active** |