



ENROLMENT FORM

CHC30113 Certificate III in Early Childhood Education and Care National Training Package

[FEE FOR SERVICE CORRESPONDENCE STUDENT FORM]

OFFICE USE ONLY

Please tick appropriate box/es:


Correspondence
RPL/Credit Transfer

PEAK student number: _____

Date: _____

Invoice number: _____

A. STUDENT DETAILS (Please print in block letters)

Title:		Surname:	
Given Names:		Other Names:	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Date of Birth:	
Home phone number : (02)		Mobile:	
 Compulsory USI (Unique student Identifier number): _____			
Please note: To obtain a USI number visit usi.gov.au and click on 'Create a USI'			
Email:			
Residential Address :			
City:	State:	Postcode:	
Postal Address :			
City:	State:	Postcode:	
Emergency Contact Name:		Emergency Contact Number:	



B. ETHNICITY/ INDIGENOUS STATUS

Country of birth: _____

- Neither Aboriginal nor Torres Strait Islander
- Aboriginal
- Torres Strait Islander
- Aboriginal and Torres Strait Islander
- Other (Please specify) _____

C. LANGUAGE

Do you speak a language/s other than English at home? Yes No
If so, what language/s do you speak? _____

D. EDUCATIONAL BACKGROUND

SECONDARY SCHOOL STATUS

- Still at school Yes No
- Year Completed: _____
- Where Completed: _____

HIGHEST SCHOOL LEVEL ACHIEVED

- Did not go to school
- Completed Year 8 or below
- Completed Year 9 or equivalent
- Completed Year 10
- Completed Year 11
- Completed Year 12

Since leaving school have you completed any further qualifications? Yes No

Please tick where applicable and state qualification:

- Certificate _____
- Associate Diploma _____
- Diploma Level _____
- Advanced Diploma or Degree Level _____
- Bachelor degree or Post Graduate
- Other [Please specify] _____



E. EMPLOYMENT DETAILS

- Part time Employee
- Full time Employee
- Employer
- Self-employed - not employing others (e.g. FDC Educator)
- Unemployed - seeking full time work
- Unemployed - seeking part time work
- Not employed - not seeking employment
- Unpaid worker in family business
- Unspecified

Family Day Care Training Group:


Family Day Care Scheme:

Position (please tick): Educator CDO Co-ordinator Other (please State):

Length of time as an Educator:

Please state birth date/s of all children currently in your care:

1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____
7. _____

Note:  Please provide and attach a letter from your Workplace Supervisor on the company's letterhead indicating your employment details including period of employment, days and hours, age range of children currently in your care and range of professional experience.

Please state current job position if you are NOT a Family Day Care Educator:

Are you planning to become a Family Day Care Educator? Yes No



F. ADDITIONAL NEED

Do you consider yourself to have a permanent and significant additional need? Yes No

- Acquired Brain Impairment
- Dyslexia
- Physical
- Vision

- Hearing / Deaf
- Medical Condition
- Mental Illness
- Other: _____

Please indicate how we can assist you:

PRIVACY STATEMENT

The information requested in this form will be used by PEAK TRAINING for research, statistical information for relevant government departments and internal management purposes. In supplying the requested information, the student is deemed to have consented to the use of the information for those purposes only. Please confirm by signing below.

- I have visited the FDC website www.nswfdc.org.au and downloaded and read the PEAK Student Handbook
- I have read, signed and am returning the attached learning contract with my enrolment.
- I give permission to NSW FDC to contact me with any relevant information.
**You may opt out of these communications at any time.

Name: _____ Signature: _____ Date: _____



LANGUAGE, LITERACY AND NUMERACY EVALUATION FORM

Reading/Writing (Please circle or write answers):				
What level English did you achieve at school? Please write year (e.g. Year 10)				
Have you recently completed a form requiring sentence answers?		Yes	No	
Do you send emails or letters to friends?		Yes	No	
Do you enjoy reading novels/printed literature?		Yes	No	
Literacy: Please write in 25-30 words why you would like to study the Certificate III in Early Childhood Education and Care.				
Numeracy				
What level of Maths did you achieve at school? Please write year (e.g. Year 10)				
Can you undertake simple mathematical tasks, such as addition, subtraction, multiplication and division?		Yes	No	
Can you measure medicines and volumes for recipes etc.?		Yes	No	
You will need to buy 3 new uniforms for work. Each uniform will cost \$42.00 How much will all 3 uniforms cost? (calculator or manual computation can be used)				
Tom caught the 9.25am bus. He arrived at Jones Street bus stop at 10:00am. How long was the bus ride? (please circle the answer)				
45 minutes	50 minutes	35 minutes	20 minutes	
One kilo of apples costs \$2.40. Anna bought 4 kilos, how much will they cost? (calculator or manual computation can be used)				
Oral communication				
What language do you mainly speak at home?				
If not English, please rate your fluency in English	Not at all	Not well	Well	Very well
Do you watch and understand TV and movies presented in English?			Yes	No
Have you successfully studied by correspondence before?			Yes	No

I hereby testify that I have completed this evaluation by myself without any support.

Name: _____ Signature: _____ Date: _____

ADDITIONAL INFORMATION

A. CHC30113 CERTIFICATE III IN EARLY CHILDHOOD EDUCATION AND CARE

Please note: In order to complete the Certificate III in Early Childhood Education and Care you must first obtain a First Aid Certificate from a certified training provider. The currently recognised First Aid course (as at Jan 2015) is HLTAID004: 'Provide an emergency first aid response in an education and care setting'.



Attach a Justice of the Peace (JP) certified photocopy of the First Aid Certificate above. Please contact the PEAK office for further clarification about first aid courses and to obtain the necessary form for credit transfer.

B. PAYMENT:

The following payment plan exists over the 12 month delivery of course:

3 Instalment Payment Plan (Full fee: \$2,590)	
1. 1 st Cluster	\$1,000 (including \$200 enrolment fee)
2. 3 rd Cluster	\$800
3. 5 th Cluster	\$790

OR

Individualised Payment Plan (Full fee: \$2,590)
\$200 enrolment fee + Fortnight payment plan

** Please note:

- *Enrolment fee is non-refundable*
- *If an extension is required, students will need to negotiate this directly with Student Support staff at PEAK Training. An extension can be negotiated on a month by month basis, for up to 6 months at a cost of \$30.00 per month.*



C. PAYMENT DETAILS:

Please tick payment option selected:

- BANK TRANSFER - BSB# 032 272 / Acct # 162 368
 ** Important Note: Please put your Full Name and Type of Payment on bank transfer description and send your transfer receipt to accounts@nswfdc.org.au

- CREDIT CARD –

(Please circle) Visa Bankcard MasterCard

Name: _____
 Card Number: _____
 Expiry date: _____
 Amount: _____

- CHEQUE – made out to NSW Family Day Care Association & PEAK Training

D. CREDIT TRANSFER

For credit transfer, the student needs to provide a Justice of the Peace (JP) certified copies of their Certificate or Statement of Attainment or Transcript of subjects from a nationally recognised course. They must meet the requirements of the new National Training Package CHC30113.

E. PROOF OF IDENTIFICATION (100 POINTS)

The point score of documents produced must total at least 100 points, and for applicants 18 years or over, the client must include at least one form of photo ID.



Please attach JP certified copy of your documents.

ITEM Please note: Only one of each option may be submitted within each section	POINT SCORE
Primary Documents: <ul style="list-style-type: none"> • Birth Certificate • Birth Card issued by the New South Wales Registry of Births, Deaths and Marriages • Citizenship Certificate • Current Passport 	70



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<p>The following documents must have a PHOTOGRAPH and NAME:</p> <ul style="list-style-type: none"> • Driver Licence issued by an Australian State or Territory • Licence or permit issued under a law of the Commonwealth, a State or Territory Government (e.g. a boat licence) • Identification card issued to a public employee • An identification card issued by the Commonwealth, a State or Territory as evidence of the applicant's entitlement to a financial benefit • An identification card issued to a student at a tertiary education institution • A Proof of Age Card or NSW Photo Card issued by the NSW Roads and Traffic Authority (Note RTA Proof of Age Card will be valid until 13 December 2008) 	40
<p>The following documents must show NAME and ADDRESS:</p> <ul style="list-style-type: none"> • A document held by a cash dealer giving security over the applicant's property • A mortgage or other instrument of security held by a financial body • Council rates notice • Document from the applicant's current or former employer within the past 2 years • Document from the Credit Reference Association of Australia • Land Titles Office record 	35
<p>The following documents must show NAME and SIGNATURE – points from the same source may only be counted once (i.e. a Mastercard and EFTPOS card issued by the same financial institution):</p> <ul style="list-style-type: none"> • Marriage Certificate (for maiden name only) • Credit Card • Foreign Drivers Licence • Medicare Card (signature not required) • Membership to a registered club • NRMA Membership • EFTPOS Card 	35



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<p>The following documents must show NAME and ADDRESS:</p> <ul style="list-style-type: none"> • The electoral roll compiled by the Australian Electoral Commission and available for public scrutiny • A recent signed reference of recommendation from an acceptable referee (e.g. Doctor, Teacher, Clergy, Banker, Police etc.) • Lease/rental agreement • Rent receipt from a licensed real estate agent • Records of a public utility (e.g. Phone, water, gas or electricity bill) • Records of a financial institution • A record held under law other than a law relating to land titles 	25
<p>The following documents must show NAME and DATE OF BIRTH:</p> <ul style="list-style-type: none"> • The records of a primary, secondary, or tertiary institution attended by the applicant within the past 10 years • The records of a professional or trade association of which the applicant is a member 	25

Record of identifying documents: (For Official Use Only)

Please record relevant details in the table below:

Description of document	Date of Issue	Place/ Office of issue/ issuing organisation	Expiry date	Ref. or doc.	Points
Total points					



TERMS AND CONDITIONS OF ENROLMENT

1. Enrolment:
 - a/ Enrolment is for a period of 12 months for Certificate III in Early Childhood Education and Care from the 1st session date or based on the correspondence timetable.
 - b/ The enrolment cannot be transferred to another person.
 - c/ Immediate notice of change of name/address/cancellation must be given to PEAK as a matter of urgency and the respective forms completed.
 - d/ Student Handbook & Student Contract have been agreed to and signed prior to enrolment.
 - e/ The student commits to the payment of the qualification fee in 3 instalments once the enrolment form has been signed and processed.
2. Refund:
 - a/ There is no refund of the fees or administration levy fee once the course has commenced.
 - b/ No exceptions will be made irrespective of the reason for the student's decision to terminate, whether it is due to moving interstate/overseas, health, redundancy, financial or any other occurrence.
 - c/ If a student terminates their enrolment or is dismissed by PEAK, the student is still financially obligated to pay the full fees including any outstanding amounts.
3. PEAK reserves the right to dismiss any student whose performance, attitude or conduct is unacceptable to the RTO or who is negatively impacting the learning experience of any other student. Fees will not be refunded under any circumstance.
4. Deferral or Suspension of course:
 - a/ Applications for deferral/suspension are accepted at the discretion of PEAK Training. Deferral/suspension of the entire course or individual units is dependent on vacancies in future courses or subjects.
 - b/ Deferral/suspension is only possible for a maximum of 6 months.
5. Extensions to the course can be negotiated with Student Support Staff at PEAK Training on a month by month basis for up to 6 months at a cost of \$30 per month.
6. Failure to pay amounts outstanding, including meeting the due date of payment plan instalments, will result in the student being unable to complete the qualification. Fees may be paid by cash, credit card or cheque.
7. While the information was prepared on the basis of the best information available at the time, PEAK may at any time change information required on this form including amendments in policies and procedures of the course. Notice of such changes will be given when possible and will be available on the website or Moodle.



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8. In signing the PEAK Enrolment Form, you agree that:

- a/ You have read, understood and agreed to the Terms and Conditions of Enrolment.
- b/ You agree to abide by the rules and regulations of the RTO as outlined in the Student Handbook downloaded from the website.
- c/ You have the financial capacity to pay the tuition fees and agree to pay the fees as they become due.
- d/ You agree that PEAK has permission to pass any relevant information concerning academic results, course progress to relevant Government Bodies and other RTOs.
- e/ You agree that the information provided in the PEAK Enrolment Form and accompanying documents is correct.
- f/ You agree to abide by all State and Federal Government Anti-Discrimination Legislation.
- g/ You understand that PEAK is obliged by statute to keep confidential student records on file for administrative purposes only.

Please note that there are no exemptions to these policies.

I have read, fully understand, agree and accept the Terms and Conditions of Enrolment detailed on this form.

Name: _____
 Mr/Mrs/Ms First Name Surname

Signature: _____ Date: _____



Student Contract

Please read through the Student Handbook and the following contract carefully before signing and submitting with your enrolment information. Please note that enrolments will not be processed until a signed Student Contract is received.

Please tick appropriate qualification:

CHC30113 Certificate III in Early Childhood Education and Care – 12 months

- I am aware that my enrolment period for the qualification is based on the correspondence timetable / is from the first class session date.
- I am aware that an enrolment cannot be transferred to another person.
- I am aware that I may incur extra expense in the provision of materials and equipment that may be required to complete assessments and other expenses relating to course completion.
- I am aware that it is my responsibility to ensure that sufficient funds are maintained in my account to meet instalment payments for direct debit payment options. I understand that credentials will not be issued until payment is received in full by PEAK for the qualification I have enrolled in, regardless of the fact that I may have completed all aspects of the course.
- I am aware that PEAK reserves the right to withhold issuing of materials and workbooks should I fail to meet the financial requirements on or before the due date for payments.
- I am aware of obligations in fulfilling my commitment to payment of the enrolled course as set out in the terms and conditions of the 'Enrolment and Refund policy' located in the PEAK Student Handbook.
- I am aware that PEAK has the right to withdraw me from the course at the end of course period, following a failure to communicate or submit any assessments for a period of time. Fees will not be refunded under any circumstances.
- I am aware of obligations in fulfilling my commitment in relation to the 'Suspension Policy' located in the PEAK Student Handbook.
- I am aware of my responsibilities in relation to copyright of materials provided by PEAK.
- I am aware of my rights and responsibilities in relation to requesting extensions and the conditions that relate to PEAK granting extended time to complete the course.



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- I understand that it is my responsibility to notify PEAK in the event of the following situations:
 1. Change of address;
 2. Change of name [evidence must be provided]; and/or
 3. Cancellation of enrolment.
- I am aware that it is my responsibility to maintain contact with PEAK should I have concerns or questions regarding my enrolment or participation in the course and that if for any reason PEAK cannot contact me at the conclusion of the enrolment period, my enrolment will be deemed no longer active. A Statement of Attainment will be issued for units that have been successfully completed and paid for. Furthermore I understand that re-enrolment and full course fees will be required for me to continue my studies.
- I confirm that I have been advised of training and assessment options.
- I have prepared access to a computer with a reliable internet connection and the latest ADOBE software to access the PEAK Moodle online study platform.
- I have been advised of RPL and Credit Transfer opportunities.
- I have read and understood my responsibilities as stated in PEAK Student Handbook.
- I am aware that I may request to see all of PEAK Policies if necessary.
- I declare that the information I have provided is true and correct.
- I will return this page only to be placed in my student record file and to be held at the office of PEAK Training.

Name: _____
Mr/Ms First Name Surname

Signature: _____ Date: _____

Check List for submission of enrolment form

- I have clearly filled in my contact details
- I have obtained a student USI number and notified PEAK of the number on the enrolment form
- I have understood the course outline
- I have signed and dated the Privacy Statement
- I have completed the Literacy, Language and Numeracy form
- I have clearly indicated my form of payment options
- I have clearly completed my payment details
- I have included a JP certified copy of my First Aid Certificate HLTAID004
- I have included JP certified copies of my transcripts for RPL (or Recognition of Prior Learning) if applicable
- I have attached a letter from my employer on the organisation's official letterhead
- I have attached a JP certified copy of my 100 points of proof of identification documents
- I have read and signed the Terms and Conditions of enrolment (page 9)
- I have downloaded a copy of the PEAK Student Handbook from the FDC website www.nswfdc.org.au
- I have completed and signed the Student Contract attached to this enrolment form

If you have any questions or would like to talk to Peak Training Staff regarding your enrolment, please do not hesitate to contact us on (02) 9779 9999 or email info@peaktraining.net.au



Please return the completed and signed enrolment form with accompanying documents

by mail to:

PEAK Training Enrolment
PO Box 386
Summer Hill
NSW 2130

or scan and email to:

admin@peaktraining.net.au

Thank you for completing this form and choosing to study with PEAK Training.