



Unit Number:		Street Number:	
Street Name:			
Suburb:		State:	Postcode:

PAYMENT AND INVOICE DETAILS - CONTINUED

PAYMENT METHOD – Please select one of the methods below

CREDIT CARD

<input type="checkbox"/> VISA	<input type="checkbox"/> MasterCard
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Name of Cardholder:	
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Card Number:	
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Expiry Date:	/	CCV Number:	
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BANK TRANSFER

Financial Institution:	Westpac
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Branch:	Ashfield
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Account Holder Name:	NSW Family Day Care Association
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BSB Number:	032 272
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Account Number	162 368
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RETURN FORMS COMPLETED IN FULL TO THE BELOW;

POST	EMAIL
PEAK Training PO Box 386 Summer Hill NSW 2130	info@peaktraining.net.au

PRIVACY STATEMENT & STUDENT DECLARATION

Under the Data Provision Requirements 2012, Peak Training 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), may be used or disclosed by Peak Training for statistical, administrative, regulatory and research purposes. Peak Training may disclose your personal information for these purposes to:

Commonwealth and State or Territory government departments and authorised agencies; and NCVER.

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:

- pre-populating RTO student enrolment forms;
- facilitating statistics and research relating to education, including surveys and data linkage
- Administering VET, including program administration, regulation, monitoring and evaluation
- facilitating statistics and research relating to education, including surveys and data linkage
- populating authenticated VET transcripts
- Understanding how the VET market operates, for policy, workforce planning and consumer information.

You may receive a student survey, which may be administered by a government department or NCVER employee, agent or third party contractor or other authorised agencies. Please note 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 (C), the National VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

For more information about NCVER's Privacy Policy go to <https://www.ncver.edu.au/privacy>.

I understand that FPA Australia is required to submit data sourced from this enrolment form to the National Centre for Vocational Education Research Ltd (NCVER) as a regulatory reporting requirement. The information contained on my enrolment form may be used by FPA Australia or the following third parties for administrative, regulatory and/or research purposes:

- School – if I am a secondary student undertaking VET, including a school-based apprenticeship or traineeship
- Employer – if I am enrolled in training paid by my employer
- Government departments and authorised agencies
- NCVER
- Organisations conducting student surveys

(Note: NCVER will use, secure, disclose, and retain your data in accordance with the VET Data Protocol and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

- ❖ I have read, understood and accept the terms of conditions specified in the Peak Training Student Handbook located on the website.
- ❖ I have received and/or accessed the RTO's fee schedule and have read and understood the refund policy.
- ❖ I the individual /or in agreement my employer to pay all course fees and charges applicable to and arising from this enrolment.
- ❖ I acknowledge that the invoice must be paid in full prior to attending an Assessment Session or be issued with a Certificate or Statement of Attainment
- ❖ I was adequately informed of the requirements and expectations of the course prior to enrolment.
- ❖ I have been given sufficient information on the delivery and assessment arrangements for this course/qualification.
- ❖ I consent to having my personal information being used in accordance with the RTO's privacy policy.
- ❖ I understand that my current USI number, will be used to collect and report my VET related data.
- ❖ I declare that the information supplied on this form is correct and complete.

I declare that the information I have provided to the best of my knowledge is true and correct.

Student Name:			
Student Signature:		Date:	