

Student Enrolment Form – CPR/Basic Life Support/First Aid

Applicant Details:

Title:		First Name:		Surname:	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female		Birth Date:		
Phone Number:			Email:		
Home address:					
Postal address:					

Unique Student Identifier

USI Number:	
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Course details:

Course Code:	
Location of training:	
Date of Training:	

Have you trained with IOET before?	<input type="checkbox"/> Yes – Only update details below this point that have changed and sign declaration <input type="checkbox"/> No / Not sure – Complete all sections and sign declaration
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Personal details:

In which country and town were you born?	<input type="checkbox"/> Australia Town:	
	<input type="checkbox"/> Other Country (Please specify):	
Do you speak a language other than English at home? (If more than one language is spoken at home, indicate the one that is most spoken)	<input type="checkbox"/> No, English only	<input type="checkbox"/> Yes (please specify):
Are you of Aboriginal or Torres Strait Islander origin? (tick one)		
<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal		
<input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> Yes, Both Aboriginal & Torres Strait Islander		
Do you identify yourself as having a disability? (Please tick)		
<input type="checkbox"/> No <input type="checkbox"/> Yes, Hearing/Deaf		
<input type="checkbox"/> Yes, Intellectual <input type="checkbox"/> Yes, Vision		
<input type="checkbox"/> Yes, Learning <input type="checkbox"/> Yes, Physical		
<input type="checkbox"/> Yes, Medical <input type="checkbox"/> Other		
Please specify:		

What is your highest COMPLETED school level? (Tick ONE box only.)					
<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent			<input type="checkbox"/> Year 9 or equivalent <input type="checkbox"/> Year 8 or below <input type="checkbox"/> Never attended school		
In which YEAR did you complete school?					
Have you successfully completed any of the following qualifications? If yes, in what country was this completed?					
<input type="checkbox"/> No <input type="checkbox"/> Yes - Diploma (or Associate Diploma) <input type="checkbox"/> Yes - Bachelor Degree or Higher Degree <input type="checkbox"/> Yes - Advanced Diploma <input type="checkbox"/> Yes - Certificate IV (or equivalent)	Aust	Other	<input type="checkbox"/> Yes - Certificate III (or Trade Certificate) <input type="checkbox"/> Yes - Certificate II <input type="checkbox"/> Yes - Certificate I <input type="checkbox"/> Yes - Certificates other than the above	Aust	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Of the following categories, which best describes your current employment status?					
<input type="checkbox"/> Full-time employee <input type="checkbox"/> Part-time employee <input type="checkbox"/> Self-employed - not employing others <input type="checkbox"/> Employer			<input type="checkbox"/> Employed - unpaid worker in a family business <input type="checkbox"/> Unemployed - seeking full-time work <input type="checkbox"/> Unemployed - seeking part-time work <input type="checkbox"/> Not employed - not seeking employment		
Of the following categories, which best describes your main reason for undertaking this course / traineeship / apprenticeship? (Tick ONE box only.)					
<input type="checkbox"/> To get a job <input type="checkbox"/> To develop my existing business <input type="checkbox"/> To start my own business <input type="checkbox"/> To try for a different career <input type="checkbox"/> To get a better job or promotion			<input type="checkbox"/> It was a requirement of my job <input type="checkbox"/> I wanted extra skills for my job <input type="checkbox"/> To get into another course of study <input type="checkbox"/> For personal interest or self-development <input type="checkbox"/> Other reasons		

Your Personal Statement:

Do you consider that you have adequate literacy and numeracy skills to undertake the course:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
Do you have a Student Visa?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any individual needs you have that we should be aware of:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure

If yes, please provide us a little more information:

Enrolling Student Declaration

By signing this form, I certify that the information provided is true and correct. I also confirm that I have been provided a copy of, or been informed on how to access the following information which is available from www.ioet.com.au:

- Unit of competency to be completed and the training and assessment services to be undertaken
- Schedule of Fees and Payments which includes information about the refund policy.
- Student Handbook that outlines my rights and obligations.

Sign: _____ Date: ____ / ____ / ____

Please Note: The Institute of Education and Training may require you to provide proof of identification. ☐