



## REGISTRATION FORM

### This Section to be filled in by all Students

ARN (Aviation Ref Number)

ATSV Student Number (if known)

Surname (Family Name)

Title (Mr, Mrs, Ms, etc)  Given Name(s)

Date of Birth         Gender Female  Male

Number and Street

Suburb  State  Postcode

Country (if not Australia)  Home Phone

Mobile Phone  Email

Name of Employer

Contact Number  Email

Emergency contact name

Home/work Phone  Mobile Phone

### COURSE DETAILS

Course/Subject Title

Course Code  Session Code

Mode of Study (*please tick*) On Campus  Off Campus (Distance)

#### Indicate the main reason for studying this course

- |   |  |
|---|--|
| <input type="checkbox"/> To get a job                     | <input type="checkbox"/> To keep my licence's current              |
| <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> It was a requirement of my job            |
| <input type="checkbox"/> I want extra skills for my job   | <input type="checkbox"/> For personal interest or self-development |
| <input type="checkbox"/> Other Reasons                    |  |

**Students must complete all required sections/pages of this form**



## PERSONAL DETAILS

**What is your citizenship or residency status?** (you may be asked to provide supporting evidence)

- I am an Australian citizen    I hold a permanent visa    I am a NZ citizen Special Category Visa (sub-class 444)
- I am an East Timorese asylum seeker    I am the holder of a Temporary Protection Visa    None of these

### Student Declaration

- I hereby agree to pay all fees and charges applicable to and arising from my enrolment and to abide by the policies and procedures of **Aviation Training Services Victoria**.
- I hereby further agree to that in the event of my failure to make payment of any monies due to **Aviation Training Services Victoria** pursuant to this agreement I shall pay **Aviation Training Services Victoria** all collection costs, commissions, fees, charges and expenses, including legal costs on a solicitors and own client basis incurred by **Aviation Training Services Victoria** of and incidental to this agreement or any matter arising out of or incidental to this agreement or my performance of or failure to perform and of the terms of the agreement.
- I authorise **Aviation Training Services Victoria** to release information regarding my enrolment to my employer (apprentices and trainees only), to Government Departments (where it is legally or contractually obliged to do so).
- I have read and understood my rights and responsibilities relating to fees, concessions and refunds.
- I declare that the information contained on this form is true and correct and that the information I have provided regarding my citizenship or residency status can be supported by evidence if required

Student's Signature

Date


*Aviation Training Services Victoria complies with the Information Privacy Act 2000 and the Health Records Act 2001. Any information you provide to us will be used in accordance with the Information Privacy principles in these Acts. Provision of information on this form is a condition of enrolment with Aviation Training Services Victoria. Analysis of the data is undertaken by Aviation Training Services Victoria, the NCVER, Skills Victoria and other government departments.*