



PERSONAL INF	ORMATION						
PLEASE SELECT YOUR	R PREFERRED TITLE						
Miss	Mrs	Ms	Mr	Oth	er		
					_		
Last name							
☐ I do not give	e permission for Ne.	xgen Institute of Austro	alia to contact m	ne by e-mail or SN	MS for marketing purposes		
Date of Birth:	Day	Month	Year		Current age		
Course studying:					Student ID number:		
CONTACT DETA	AILS						
		Home phone:		Mobile	e phone:		
Eman address.		rrome prione					
YOUR ADDRESS IN AU	JSTRALIA						
Street number:	Stree	t name:					
City:		State:		Postcode:	:		
ARE YOU IN HOMESTA	AY?						
□ YES □] ио						
If you ticked YES above	e:						
Homestay parents' na	mes:		1	Homestay parent	s' phone number:		
				. romostaj parom			
IN CASE OF EMERGEN	ICY						
Next of kin details: (NO legally responsible for					he event of an emergency. This person must b	e	
Full name:			Relatio	nship (e.g. mothe	er/father/sister/brother):		
Email address:	Email address:			N	Mobile phone:		
Home address:							
Street number:	Street name:						
City:		State:			e:		
USI							
From 1 January 2015, Nex	urse if you do not				ed VET qualification or statement of attainment when et obtained a USI, you can apply for it directly		
Do you have a USI numbe	er?	Yes	☐ No				
If yes, please provide your	USI number:					_	
-	-	stralia to apply for a USI o ts/privacy-notice-when-rte			to do so and declare that you have read the privacy		
_					4, for a USI on my behalf. I have read and I consent to ww.usi.gov.au/documents/privacy-	o the	
noticewhen-rto-applies-th	heir-behalf	☐ Yes	□No	City of birth:			





EDUCATIONAL BACKGROUND						
SECONDARY SCHOOL STUDIES						
What is your highest COMPLETED school level? (Tick ONE box only)						
Year 12 or equivalent Year 10 or equivalent						
Year 9 or equivalent Never attended school						
Year 11 or equivalent						
Year 8 or equivalent						
In which year did you complete that school level (if applicable)?						
Are you still attending secondary school?	Yes	□No				
OTHER STUDIES						
Have you successfully completed any of the following	Yes	□No				
qualifications?						
If YES, tick ANY applicable boxes:						
Bachelor degree or higher degree						
Advanced Diploma or associate degree						
Diploma (or associate Diploma)						
Certificate IV (or advanced certificate/technician)						
Certificate III (or trade certificate)						
Certificate II						
Certificate I						
Certificates other than the above						
If YES, in which year did you attain the highest qualification above?						
Do you wish to apply for Recognition of Prior Learning or Credit Transfer?						
(If yes, please attach a copy of your academic transcripts or other evidence of your studies or work experience and complete a copy of the						
Application for Recognition Form from our website (www.nexgen.edu.au). If any documents are not in English, please include a certified transition.						
EMPLOYMENT STATUS						
Of the following categories, which BEST describes your current employment status?						
Full-time employee						
Part-time employee						
Self employed - not employing others						
☐ Employer						
Employed - unpaid worker in a family business						
Unemployed - seeking full-time work						
☐ Unemployed - seeking part-time work ☐ Not employed - not seeking employment						
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STUDY REASON
Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship?
(Tick ONE box only)
☐ To get a job
☐ To develop my existing business
☐ To start my own business
☐ To try for a different career
To get a better job or promotion
☐ It was a requirement of my job I
wanted extra skills for my job
To get into another course of study
For personal interest or self-development
Uther reasons



HEALTH INFORMATION						
Do you have any special needs or require any adjust You may wish to discuss this confidentially with you		r course?	☐ Yes	No		
Do you suffer from any allergies or medical probler If yes, please provide further information below. The		Yes can accomn	□ No nodate you i	n the workplac	e and in your tra	ıining.
Do you have any pre-existing injury, disability, or ir	mpairment that will require special a	ssistance,	Yes	□ No		_
including literacy support? You may wish to discus	ss this confidentially with your lecture	r.				
CULTURE INFORMATION						
Do you come from a non-English speaking backgr	ound?	Yes	☐ No			
Do you speak a language other than English at ho	me?	Yes	☐ No			
If yes, which language other than English do you s	peak at home?					
Do you have any special cultural requirements?		Yes	No			
If yes, please specify below:						
DECLARATION						
Declare that the information provided by me on the individual. I accept that Nexgen Institute of Austra required. I accept that failure to attend the scheduled sessions may compromise my ability may be required if I donot meet the course required undertake this extra training is at the discretion of	lia makes decisions based on this info ty to satisfy some or all of the course i ements, that this training is at an add	ermation and equirements	may seek fu	orther informati	ion or clarification	
Name:	Signature:		Date:			
				Day Month	Year	
For students under 18 years of age, this form must	be signed by a parent or legal guard	dian.				
Guardian name:	Signature:		Date:		Year	
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STUDENT AGREEMENT

Dlease re	ad the fol	lowing ru	les carefully	and sign	at the hottom	to show that y	you agree to follow them.
Please le	au the ioi	10vvii ig i u	ies cai ei uliv	and Sidn	at the bottom	to show that	vou agree to rollow trierri.

- 1. I will follow the college rules at all times.
- 2. I understand that Nexgen Institute of Australia is an English Only college. I must speak only English at all times. If I speak another language in class, my teacher will ask me to leave the room.
- 3. I must ensure I maintain course progress under the requirements of the DHA (Department OF Home Affairs) Course Progress Policy and Procedures for CRICOS Providers of VET Courses.
- 4. I understand that if I want a holiday outside of course allocated holidays, I must apply by filling in a Holiday Application Form/Temporary Suspension of Studies form from the NIA website and discuss this with my Trainer. I must apply AT LEAST 2 weeks before my holiday/suspension, or it may be refused.
- 5. I must follow the rules of behaviour and conduct (in the student handbook). I must not hit or upset other students, damage property or disrespect my teacher. I understand that if I break these rules I may be asked to leave the college.
- 6. If I have a complaint against Nexgen Institute of Australia that remains unsolved after going through the Grievance Procedure then I can contact ACPET or the Dispute Resolution Centre in Queensland for help if I wish. Nexgen Institute of Australia will assist me in contacting these people. This information is contained in the student handbook Student Handbook under the heading "Nexgen Institute of Australia Student Complaints and Appeals Policy".
- 7. I understand that Nexgen Institute of Australia is a non-smoking campus and smoking is prohibited on the campus grounds.
- 8. I will make every effort to provide original work and will refrain from copying the work of others. I will avoid plagiarism by using accurate referencing.
- 9. If I am living with a host family arranged by Nexgen Institute of Australia, I will give four weeks' notice should I wish to leave that home before my Homestay period ends. If I wish to extend my Homestay period, I will do so through the Homestay Coordinator and will not enter into a personal arrangement directly with the Homestay family.
- 10. I accept that I am responsible for any personal property while on excursions. If my property is damaged, lost or stolen, Nexgen Institute of Australia is not liable for replacement or repairs. If I become sick or injured on any excursion, I give permission for a representative of Nexgen Institute of Australia to give or arrange suitable medical treatment. I understand that all actions taken on school excursions are my own and I will accept the result of my actions. This applies to all excursions for the duration of my enrolment.
- 11. I understand that Overseas Student Health Cover (OSHC) is a requirement of my STUDENT VISA and I am responsible for maintaining my health cover while studying at Nexgen Institute of Australia.
- 12. I have read the Terms and Conditions of Enrolment at Nexgen Institute of Australia and agree to abide by those Terms and Conditions.

I have read and understand the rules above. I agree to follow these rules.

Signed:

Date:

Day Month Year

Photographic Images
I give permission for Nexgen Institute of Australia to publish or store photographic images (still or video) of me in any publication or other medium (e.g. internet) that the college deems appropriate.

Signed:

Date:

Day Month Year





INDUCTION CHECKLIST

Induction Information provided	Student Signature
Orientation Powerpoint viewed	
Unique Student Identifier (USI) created and/or provided	
College / Website and Social Media details	
Link to VET Student Handbook provided for details which includes but is not limited to; Code of Practice Legislation Course Expectations Vocational Placement Certification Credit Transfers/ Recognition Refund Policy Complaints and Appeals Department of Home Affairs (DHA) Course Progress Policy & Procedure Counselling Services	
Health Insurance Cover (OSHC) - OSHC activation / Card collection	
Mail collection location	
Transport options	
Student ID card procedure/Computer login	
Attendance / Study Progress / punctuality & Conduct	
Student Holidays / Suspension of Studies	
Housekeeping: no smoking/ no mobiles in class/ no food & drink in classrooms (water isaccepted) / Lunch Room	
Contact details kept up to date	
Facilities available discussed (computer use, counselling service)	
Fire and Emergency Evacuation /First Aid procedures	
Payment of Fees / Refund Policy	
Sun Safety	
Student feedback:	