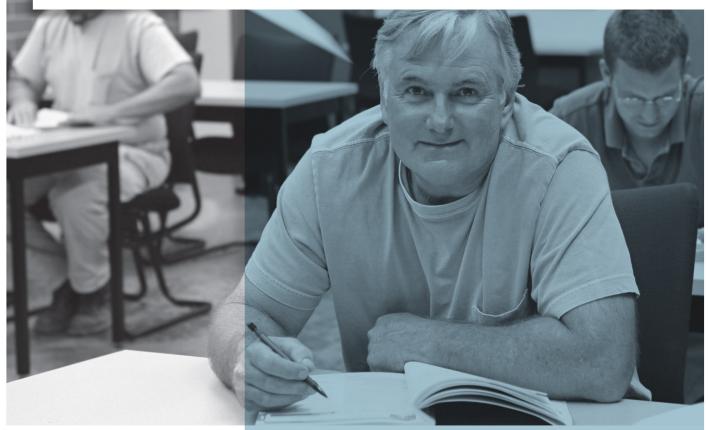
Enrolment Form





Training Courses and Experienced Recognition Programs for Routine Service of Water Based Fire Suppression Systems

TAKE PART IN TRAINING ALIGNED TO NATIONAL STANDARDS THAT CAN HELP ENHANCE YOUR CAREER, DEVELOP NEW SKILLS AND ACHIEVE INDUSTRY RECOGNITION.

Complete this form to enrol in an FPA Australia Training Course or Experienced Recognition Program for routine service of water based fire suppression systems.

Prior to completing this form ensure that you have carefully read the relevant training brochure and student handbook to ensure the selected training option is best suited to your particular needs.

Visit www.fpaa.com.au/training for further information on course selection or contact the Training and Education help line on (03) 8892 3182 to speak to one of our training specialists.

TRAINING OPTIONS

FPA Australia offers a range of training courses as well as a recognition program for experienced individuals

Our training courses are delivered via:

- Classroom based learning
- · Self-study; and
- Workplace based learning



WATER BASED TRAINING COURSES

Select the Training Course that you wish to enrol in from the list below. Indicate the start date for the selected course that you prefer. If you would like to enrol in an Experienced Recognition Program instead of a Training Course, please see details below.

For detailed information on course content, delivery methods, fees, schedule and availability please visit www.fpaa.com.au/training.

☐ Fundamentals of Testing Water Based Fire Systems	
Advanced Testing of Water Based Fire Systems	Details coming soon

WATER BASED EXPERIENCED RECOGNITION PROGRAM

These programs are structured for individuals working in the fire protection industry who have accumulated skills and knowledge through on-the-job training and other informal and formal learning activities over many years.

You must choose an Assessment Date for the program you have selected. The FPA Australia website lists Assessment Dates and their corresponding locations. If you would like to enrol in a Training Course instead of an Experienced Recognition Program, please see above.

For detailed information on program requirements, eligibility, fees, schedule and availability please visit www.fpaa.com.au/training.

Fundamentals of Testing Water Based Fire Systems	Details coming soon



Flat / Unit Details:

Suburb, Locality or Town:

Street Name:

PERSONAL INFORMATION Family Name: (surname) Given Names: (legal name) Preferred Name: (if different to legal given name) ☐ Male ☐ Female ☐ Other Date of Birth: Gender: Preferred email: Alternative email: Home phone: Work phone: Mobile: Town/City of Birth: Country of Birth: ☐ Yes ☐ No If born outside of Australia, are you an Australian Citizen? **RESIDENTIAL ADDRESS** (This is your usual place of residence) Building / Property Name: Flat / Unit Details: Street / Lot Number: Street Name: Postcode: Suburb, Locality or Town: State: **DELIVERY ADDRESS (This is where we will send training materials - Cannot be a PO Box)** Company: Building / Property Name:

Street / Lot Number:

State:

Postcode:

Proceed to next page



USI Number: (10 digits)

UNIQUE STUDENT IDENTIFIER (USI)

From 1 January 2015, FPA Australia can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI).

A USI gives students access to their individual online USI account and is made up of ten numbers and letters. It will look something like this: **3AW88YH9U5**.

If you have not yet obtained a USI you can apply for it directly at http://www.usi.gov.au/create-your-USI/.

PLEASE PROVIDE USI NUMBER or CHOOSE TO ALLOW US TO APPLY ON YOUR BEHALF

If you would like FPA Australia to apply for a USI on your behalf you must complete the Statement of Authority below and provide a copy of your proof of identity.

Apply for a USI on my behalf:		If Yes, complete Statement of Authority below. If No, you must apply for a USI and notify us for this enrolment to be valid.			
Uniq	ue Student Ide	ntifier Statement of Auth	ority		
section 9(2) of the Student Ide	entifiers Act 2014, for and disclosure of my	n Association Australia (FPA Australia) a USI on my behalf. I have read the p personal information pursuant to the rivacy notice 0.pdf	rivacy inforr	mation and I	
PLEASE PROVIDE DETAILS FO	R <u>ONE</u> OF THE FORMS	S OF IDENTITY BELOW			
Australian Driver's Licence	Licence Number:		State:		
Medicare card	Card Number:		Expiry:		
	Card Colour:	☐ Green ☐ Yellow ☐ Blue			
Australian Passport:	Passport Number:		_		
Non-Australian Passport:	Passport Number:		_		
	Country of Issue:		_		
Immicard:	Card Number:				
Citizenship Certificate:	Stock Number:		_		
	Acquisition date:		_		
Australian Birth Certificate:	A copy of the Certifi	icate must be provided with the enrol	ment form		
Signature		Print Name			
				Page	



AVETMISS Data Collection

As a Registered Training Organisation	n we are requir	ed to collect t	he informa	ation belov	v for each enrolment
Have you supplied FPA Australia with this	data in the last	12 months?	☐ Yes		o Payment Details Section swer all questions below
LANGUAGE AND CULTURAL DIVERSITY					
Do you speak a language other than ENG Are you of Aboriginal or Torres Strait Isla		□ No □ Ye □ No □ Yes, Abor	es (specify) riginal	☐ Yes	, both , Torres Strait Islander
DISABILITY					
Do you consider yourself to have a disabi	ity, impairment	or long term o	condition?	☐ YES	□ NO
If YES, please "tick" the area of disability,	impairment or l	ong-term cond	dition <i>(seled</i>	ct all appli	cable choices):
☐ Hearing/Deaf ☐ Physical	☐ Intellectual		Learning		☐ Mental illness
☐ Acquired brain impairment	☐ Vision		Medical o	condition	☐ Other
SCHOOLING					
What is your highest COMPLETED school	level?	Year 12 or equ Year 10 or equ Year 8 or belo	uivalent w	☐ Yea	or 11 or equivalent or 9 or equivalent over attended school
Are you still enrolled in secondary or seni	or secondary ed	ucation?] YES □	NO	
PREVIOUS QUALIFICATIONS ATTAINED					
Have you SUCCESSFULLY completed any o	of the following	qualifications?	YES	□ NO	If Yes, select qualification
□ Bachelor Degree or Higher Degree□ Advanced Diploma or Associate Degree□ Diploma or Associate Diploma	e	te IV or Advan te III or Trade ducation (not li	Certificate	cate	☐ Certificate II ☐ Certificate I
EMPLOYMENT					
Which best describes your current emplo	yment status? (select only ON	IE)		
☐ Employed – unpaid ☐ Une	time employee mployed – seeki ime work	ng emp	employed loying othe mployed – -time work	ers seeking	□ Self employed - employing others□ Not employed - not seeking employment
STUDY REASON					
Which BEST describes your main reason f	or undertaking t	his study? (<i>sel</i>	lect only OI	VE)	
\Box To try for a different career \Box	To develop my o To get a better j To get into anot	job or promoti	ion \square	Requirem	ny own business ent of my job nal interest or self ent



PAYMENT AND INVOICE DETAILS

PAYMENT AMOUNT

FPA Australia will determine the total amount payable for this enrolment taking into consideration all available discounts and any additional fees that may apply. Payment of the invoice can be made using any of the Payment Options listed below.

PAYMENT OPTIONS

FPA Australia offers several payment options. These options include the ability to pay the specified amount upfront (see below) and then pay off the remaining balance via EFT from a bank account or credit card over several months.

Overall Fee per student less than \$1500

If the total fee per student is less than \$1500, there are two payment options:

- 1. The total amount owing can be paid in full at time of enrolment; or
- 2. A deposit of \$500 per student is paid at enrolment, with the remaining balance paid over 3 months or prior to completion of the course, whichever occurs first.

Overall Fee per student is \$1500 or greater

If the total fee per student is \$1500 or greater, a deposit of \$1000 per student must be paid at enrolment, with the remaining balance paid over 3 months or prior to completion of the course, whichever occurs first.

Select Payment So	Pay invoice in full (must be less than \$1500 per student)						
		Pay deposit and	d remaining baland	ce in inst	alments ov	er 3 months	
Select Payment Me	ethod	☐ EFT from Bank	Account				
		□ VISA / Masterca	ard				
		☐ American Expre	ess				
INVOICE DETAILS							
☐ Invoice raised in the Company's name (complete details below) ☐ Invoice raised in the student's name				ent's name			
Company:							
FPA Membership:	☐ Yes	□ No	Membership Nu	mber: (<i>if</i>	known)		
Address Line 1:							
Address Line 2:							
Suburb/Town:				State:		Postcode:	
Email:							



$\sf PRIVACY$ STATEMENT & STUDENT DECLARATION – for your enrolment to be valid please tick and sign the following:

	I have read, understood and accept the terms of conditions specified in the FPA Australia Student Handbook located on the FPA Australia website.					
	I have read the applicable training course and/or experienced recognition program brochures located on the FPA Australia website relevant to this enrolment. I confirm that I comply with any prior experience or training provisions and any restrictions applicable to the course or program selected.					
	I was adequately informed of the requirements and expectations of the course prior to enrolment.					
	I the individual / employer (circle one) agree to pay all fees and charges applicable to and arising from this enrolment.					
	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. Researchers. 					
	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 acknowledge that the invoice must be fully paid prior to the enrolled student being eligible to attend an Assessment Session or be issued with a qualification (certificate) or statement of attainment.					
	I declare that the information I have provided to the best of my knowledge is true and correct.					
	Student Name:					
	Student Signature: Date:					
RETU	IRN COMPLETED FORM					

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Australia Post

FPA Australia Training and Education PO Box 1049 Box Hill VIC 3128 **Email**

training@fpaa.com.au

Fax

03 8892 3132