



16 The Terrace, Fremantle,
WA 6160 Australia
p: +61 8 9228 1600
f: +61 8 9228 1428
e: admissions@eei.wa.edu.au
w: eei.wa.edu.au

Enrolment Application Form Domestic Students

APPLICANT PERSONAL DETAILS			
Unique Student Identifier (USI)		If you do not have a USI, do you give authorisation to EEI to apply on your behalf?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you eligible for concession?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type of concession: (Please state) Concession number:	
Do you wish to apply for fee waiver?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Family Name		Given Name	
Date of Birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex
Address *			
Contact Number		Email	
*Students MUST always inform EEI of a change of address or contact details within 7 days, by completing a Change of Contact Details form available at EEI.			
EMERGENCY CONTACT			
Contact Number		Email	
Full Name		Relationship	
Address			
JOB PROVIDER or CLIENT REFERRAL			
Client stream	<input type="checkbox"/> Job seeker <input type="checkbox"/> CALD (Culturally and Linguistically Diverse)		
Job Provider office name &			
Telephone / Mobile			
Email:			
Contact Person (Case Manager)			
ACADEMIC RECORDS			
Highest completed school level		Year that level was achieved	
Are you still attending school?	<input type="checkbox"/> Yes <input type="checkbox"/> No		



Have you successfully completed any of the following qualification? (Please tick)	<input type="checkbox"/> Diploma (or Associate Diploma) <input type="checkbox"/> Cert IV (or Advanced Cert / Technical) <input type="checkbox"/> Certificate III (or Trade Certificate) <input type="checkbox"/> Certificate I/II <input type="checkbox"/> Certificates other than the above (Please specify)
Do you wish to apply for Course Credit?	<input type="checkbox"/> No <input type="checkbox"/> Yes
COURSE SELECTION (PLEASE TICK)	
<input type="checkbox"/> SIT20312 Certificate II in Kitchen Operations <input type="checkbox"/>	Jan 18/1/17, April 12/1/17, July 5/7/17, Sept 27/9/17
<input type="checkbox"/> CERTIFICATE III in Commercial Cookery <input type="checkbox"/>	Jan 21/1/17, April 15/4/17, July 8/7/17, Sept 30/9/17
<input type="checkbox"/> SIT20136 Certificate II in Hospitality <input type="checkbox"/>	Jan, 16/1/17, April 10/4/17, July 3/7/17, Sept 25/9/17
<input type="checkbox"/> SIT30616 Certificate III in Hospitality <input type="checkbox"/>	Jan 16/1/17, April 10/4/17, July 03/07/17, Sept 25/9/17
INTAKE DATE	
Preferred intake date: (Please state)	
ADDITIONAL INFORMATION	
Which country where you born?	
Do you mainly speak English at home?	<input type="checkbox"/> Yes <input type="checkbox"/> Well or <input type="checkbox"/> No <input type="checkbox"/> Not well
Do you speak a language other than English at home?	<input type="checkbox"/> No <input type="checkbox"/> Yes (please specify)
Are you Aboriginal or Torre Strait Islander origin?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you consider yourself to have a disability?	<input type="checkbox"/> No <input type="checkbox"/> Yes
If YES please indicate the disability impairment or long term condition.	<input type="checkbox"/> Hearing <input type="checkbox"/> Acquired brain impairment <input type="checkbox"/> Physical <input type="checkbox"/> Vision <input type="checkbox"/> Intellectual <input type="checkbox"/> Medical condition <input type="checkbox"/> Learning <input type="checkbox"/> Other <input type="checkbox"/> Mental Illness
Of the following categories, which best describes your current employment status?	<input type="checkbox"/> Full – Time employee <input type="checkbox"/> Employed (unpaid in a family business) <input type="checkbox"/> Part-time employee <input type="checkbox"/> Unemployed (seeking full-time work) <input type="checkbox"/> Self-employed (not employing others) <input type="checkbox"/> Employer <input type="checkbox"/> Unemployed (seeking part-time work) <input type="checkbox"/> Not employed (not seeking work)
Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship?	<input type="checkbox"/> To get a job <input type="checkbox"/> To get a better job/promotion <input type="checkbox"/> To develop my existing business <input type="checkbox"/> Requirement of my job <input type="checkbox"/> To start my own business <input type="checkbox"/> I wanted extra skills for my job <input type="checkbox"/> To try for a different career <input type="checkbox"/> To get into another course of study
TERMS AND CONDITIONS	



USI

- A unique student identifier (USI) is required of students who enrol or re-enrol in training from 1 January 2015. This includes continuing students who has already started a course in the previous year (and not yet completed it) and will continue studying after 1 Jan 2015.
- On admissions, EEI will provide all students with a copy of the 'Student Information for the Unique Student Identifier' information sheet issued by the Australian Government, Department of Industry.
- Empyrean Education Institute can apply for a USI on behalf of a student, but they must obtain the student's permission. Students can authorise EEI to apply on their behalf (consent from a parent or legal guardian is not required).
- When the student authorises the Institute to apply for a USI, the student will be required to supply information from a form of Identification (ID). The Document Verification Service used by the USI system accepts any one of the following valid Australian forms of ID: Driver's license, Medicare card, Australian passport, visa (with non-Australian passport), birth certificate (Australian), Certificate of Registration by descent or Citizenship Certificate
- In instances where a student does not have access to one of the above forms of ID or where information from that ID document is not accepted by the Document Verification Service, they are required to contact the Institute who will then contact the USI Registrar.
- EEI is obliged under the legislation to obtain the student's permission and will not be able to access the USI system without declaring that it has the permission of the student.

FEES : All fees and charges are subject to the VET Fees and charges policy 2017*

- *Fees may be subject to change according to published fees and charges policy.
- SIT20312 Certificate II in Kitchen Operations: \$480 per student** (Inclusive: study resources, knife and utensil kit, Chef Whites and apron. All ingredients associated with practical classes.)
- SIT20136 Certificate II in Hospitality: \$520.00 per student** (Inclusive: study resources, apron, bar blade, waiter's friend, cost of all ingredients and consumables involved in practical demonstrations.)
- SIT30616 Certificate III in Hospitality: \$880.00 per student** (Inclusive: study resources, basic bar kit plus apron and cost of all ingredients and consumables involved in practical demonstrations.)
- SIT20312 Certificate III in Commercial Cookery: \$820 per student** (Inclusive: study resources, knife and utensil kit, Chef Whites and apron. All ingredients associated with practical classes.)
- Payment terms and options available.
- **Fee waiver available for eligible students. Documentation must be provided.**

PERSONAL INFORMATION

- Personal information provided by the student will be kept private and not shared with any organisation unless legally required to do so.

DECLARATION

The terms and conditions stated do not remove the right of the student to undertake action under Australia's consumer protection laws.

1. I declare that the information provided in this Application form for Enrolment form to be true and correct and that I understand and agree to comply with the terms and conditions set out in this Application for Enrolment form.
2. I have read the course brochure or EEI website and understand the requirements and content of the course for which I am applying.



16 The Terrace, Fremantle,
WA 6160 Australia
p: +61 8 9228 1600
f: +61 8 9228 1428
e: admissions@eei.wa.edu.au
w: eei.wa.edu.au

Signature of Applicant: _____

Print full name: _____

Date: ___ / ___ / ___

Office Use Only

Date Form Received:	
EEI Staff Member Name:	EEI Staff Member Signature:
Notes/Comments:	