



RTO Provider No: 52118 CRICOS Code: 03275D

16 the Terrace, Fremantle,  
WA 6160 Australia  
P +61 9228 1600  
e: admissions@eei.wa.edu.au  
w: www.eei.wa.edu.au

## Domestic Students Enrolment Application Form

<b>Please choose the campus:</b> <input type="checkbox"/> Mandurah facility 65/85 Mahogany Dr, Halls Head WA 6210 <input type="checkbox"/> Rockingham facility LOT 2 Warnbro Sound Ave, Port Kennedy WA 6172 <input type="checkbox"/> Fremantle campus 16-18 The Terrace, Fremantle WA 6160 <input type="checkbox"/> City facility 305 Lord Street, Highgate, WA 6003	<b>Documents required:</b> <input type="checkbox"/> Medicare card <input type="checkbox"/> Health care card <input type="checkbox"/> Photo ID <input type="checkbox"/> Referral email	<b>Funding type: office use only</b> <input type="checkbox"/> Equity funding <input type="checkbox"/> PIT funding
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### 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
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Are you eligible for concession? <input type="checkbox"/> No <input type="checkbox"/> Yes	Type of concession:	Concession number:
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Family Name:	Given Name:
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Date of Birth: DD / MM / YY	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex
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Address *
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Contact Number:	Email:
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\*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

Full Name:	E-mail:
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Contact Number:	Relationship:
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Address:
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### JOB PROVIDER or CLIENT REFERRAL

Contact Person (Case Manager)		Office Name:	
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Telephone / Mobile		E-mail:	
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### ACADEMIC RECORDS

Highest completed school level:	Year that level was achieved:
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Are you still attending school? <input type="checkbox"/> Yes	<input type="checkbox"/> No
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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)
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Do you wish to apply for Course Credit? <input type="checkbox"/> No	<input type="checkbox"/> Yes
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<b>COURSE SELECTION (PLEASE TICK)</b>	<b>INTAKE DATES (SELECT)</b>
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<input type="checkbox"/> SIT20416 Certificate II in Kitchen Operations <input type="checkbox"/> SIT30816 Certificate III in Commercial Cookery <input type="checkbox"/> SIT31016 Certificate III in Patisserie <input type="checkbox"/> SIT30616 Certificate III in Hospitality		Rockingham Facility <input type="checkbox"/> 16 <sup>th</sup> July 2018 <input type="checkbox"/> 24 <sup>th</sup> September 2018	Fremantle campus/Mandurah/City Facility <input type="checkbox"/> 2 <sup>nd</sup> July 2018 <input type="checkbox"/> 24 <sup>th</sup> September 2018
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<input type="checkbox"/> SITHFAB005 Prepare and serve espresso coffee and SITXFSA001 Use hygienic practice for food safety	<input type="checkbox"/> 11 <sup>th</sup> July 2018 (Mandurah only) <input type="checkbox"/> 18 <sup>th</sup> July 2018 (Mandurah only)
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### ADDITIONAL INFORMATION

Which country where you born?
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Do you mainly speak English at home? <input type="checkbox"/> Yes	<input type="checkbox"/> No
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Do you speak a language other than English at home? <input type="checkbox"/> No	<input type="checkbox"/> Yes (please specify):
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Are you Aboriginal or Torres 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"/> Physical	<input type="checkbox"/> Intellectual
	<input type="checkbox"/> Learning	<input type="checkbox"/> Mental Illness	<input type="checkbox"/> Acquired brain impairment
	<input type="checkbox"/> Vision	<input type="checkbox"/> Medical condition	<input type="checkbox"/> Other
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 in a family business)		<input type="checkbox"/> Unemployed (seeking for work)
	<input type="checkbox"/> Not employed (not seeking work)		
Of the following categories, which BEST describes your main reason for undertaking this course/traineeship?	<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/promotion		<input type="checkbox"/> Requirement of my job
	<input type="checkbox"/> I wanted extra skills for my job		<input type="checkbox"/> To get into another course of study

### TERMS AND CONDITIONS

- 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 2018\*

Funding program	Qualification	Duration	School age fee (under 18 years old)	Concession fee	Non - Concession fee	Inclusive
Participation Equity	SIT20316 Certificate II in Kitchen Operations	3 months	\$420	\$402.78	N/A	Chef white and apron. All ingredients and equipment associated with practical classes.
Participation Equity	SIT31016 Certificate III in Patisserie	1 year	\$420	\$608.18	N/A	Study resources, knife and utensil kit, chef white and apron. All ingredients associated with practical classes.
Participation Equity	SIT30616 Certificate III in Hospitality	6 months	\$420	\$676.20	N/A	Study resources, cost of all ingredients and consumable involved in practical demonstration.
Participation Equity and PIT	SIT30816 Certificate III in Commercial Cookery	1 year	\$420	\$808.01	\$2,707.25	Study resources, knife and utensil kit, chef white and apron. All ingredients associated with practical classes.

#### Accredited short course:

SITHFAB005 Prepare and serve espresso coffee and SITXFSA001 Use hygienic practices for food safety \$350 (no concession applies)

**\*\* The student tuition fees are indicative only and are subject to change given individual circumstances at enrolment. Additional fees may be applied such as student service and resource fees\*\***

### 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.

- 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.
- I have read the course brochure or EEI website and understand the requirements and content of the course for which I am applying.

Signature of Applicant:

Print full name:

Date: / /



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## Suitability Questionnaire

Please answer all questions:

1. Why do you want to do this course?
2. How will you get to the college each day?
3. Is there anything that may prevent you from attending all the required sessions?
4. Do you have access to internet at home?
5. Do you have a computer or device that enables you to access online content?
6. Are you able to do work from home or your living space?
7. If you get a job during the course will you continue to study?

**Student Literacy Sample** (Write a brief description of what are you hoping to do with the qualification)

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Office Use	Y / N	Date	Officer Name	Officer Signature
Short answers				
Literacy sample				

## Financial Hardship Application

This form is to be completed by prospective students who wish to apply for installment due to financial hardship. This application will be reviewed by the accountable officer based on individual circumstances and evidence of client's capacity to pay nominated fees for the duration of enrolment. All applications are subject to **Empyrean's Financial Arrangement** policy and procedure.

**Will your Job Provider cover the gap fee payment for your selected course?      Yes / No**

If yes, please fill in the details of your job provider and case officer:

<b>Job Provider details:</b>	<b>Phone:</b>
<b>Case officer Name:</b>	<b>Email:</b>

If no, please state the instalment option: \_\_\_\_\_ (monthly, fortnightly or by term)

<b>Reasons for Application Details:</b> (please explain the reasons for financial hardship)

**Student Signature** ..... **Print Full Name**..... **Date** .....

**Please note\* Case officers may be contacted to verify information provided.**

### OFFICE USE ONLY

Received by: \_\_\_\_\_ Signature: \_\_\_\_\_ Date received: \_\_\_\_\_

Approved  Yes  No      Signature: \_\_\_\_\_ Date approved: \_\_\_\_\_