

DOMESTIC APPLICATION FORM 2025

1 STUDENT PERSONAL DETAILS

Title: Mrs Mr Ms Miss Dr Other

Given Name/s:

Family Name:

Have you been known by any other name/s?:

Date of Birth: (dd/mm/yy)

Country of Birth:

Job Seeker ID (if applicable):

Sex: Male Female Other

Are you a citizen or permanent resident of Australia?

Yes

No

Are you of Aboriginal or Torres Strait Islander Origin?

Yes, Aboriginal

Yes, Torres Strait Islander

No

Do you speak a language other than English at home?

No

Yes, which one?

If yes, how well do you speak English?

Very Well

Well

Not Well

Not at all

2 STUDENT CONTACT DETAILS

Ph (mobile):

Ph (home):

Email:

2.1 STUDENT ADDRESS

Address:

Suburb:

State:

Postcode:

2.2 STUDENT POSTAL ADDRESS (if different to above)

Address:

Suburb:

State:

Postcode

3 PARENT/GUARDIAN DETAILS/EMERGENCY CONTACT (MUST be completed if student is under 18yrs)

Name of Parent/Guardian/Contact:

Relationship:

Phone:

Email:

4 EDUCATION HISTORY

Are you still at school? Yes No

If "Yes", school name:

LUI Number (if known):

What is your highest COMPLETED school level?

Year 12

Year 11

Year 10

Year 9 or lower

Year completed:

Have you completed any tertiary qualifications?

Yes

No

If YES, please indicate:

Cert I

Cert II

Cert III

Cert IV

Diploma

Adv Diploma or Associate Degree

Bachelor Degree or Higher

Other (Please specify):

5 PROGRAM

I wish to apply for enrolment in the following program(s):

1.

Start Date:

(dd/mm/yy)

Delivery Mode:

*Classroom

Online

*Not all programs are available in classroom. Please check website for available delivery modes.

Do you have access to a computer and the internet?

Yes

No

Do you have the Microsoft Office Suite?

Yes

No

If so, what version?

I use Microsoft Office on Apple Mac

6 PAYMENT OPTIONS

Unsure, can Sarina Russo Institute please contact me to discuss this

VET Student Loan Assistance*

Self-funded

Employer sponsored (provide information in Sponsor Details)

*For more information on VET Student Loans visit: www.studyassist.gov.au

DOMESTIC APPLICATION FORM 2025

7 SPONSOR DETAILS (if applicable)

Company Name:

Billing Contact:

Approving Manager (if applicable):

Postal Address:

Postcode:

Suburb:

State:

Phone:

Purchase Order (if applicable):

Email:

8 CREDIT TRANSFER (CT) / RECOGNITION OF PRIOR LEARNING (RPL)

If you hold previous qualifications or industry experience in the area you are studying, you have the right to apply for credit transfers on units already undertaken or recognition of your prior learning on the job.

Do you wish to apply for credit transfer or RPL? Yes No Unsure, can Sarina Russo Institute please contact me to discuss this

If yes, please attach any certificates of previous study that might apply and Sarina Russo Institute will contact you to discuss your options.

9 EMPLOYMENT STATUS

Are you currently employed?

Full-time employee Part-time employee Employer Unemployed - seeking part-time work Unemployed - seeking full-time work
Not employed - not seeking employment Employed - unpaid in family business Self-employed - not employing others

10 STUDY REASON

Of the following, which describes your main reason for undertaking studies at Sarina Russo Institute? (Please select one)

For personal interest or self-development To get a job To gain credit into further study To train towards a different career
As a requirement of my job To gain extra skills for my job To get a better job or promotion To start my own business
To develop my existing business To get skills for community/voluntary work Other reasons:

11 MEDICAL CONDITIONS / DISABILITY

Do you have any medical, physical restrictions, disabilities, addictions, impairments or long term conditions that we may need to be aware of?

Yes No

If yes, then tick ANY applicable boxes:

Physical Intellectual Medical Condition Hearing Impairment/Deaf Mental Illness Allergies
Acquired Brain Impairment Vision Learning Other (Please provide details):

12 HOW DID YOU FIND OUT ABOUT SARINA RUSSO INSTITUTE?

Website Social Media Radio Expo School / College Friend / Relative jobactive Provider Employer

Agent (Please specify):

Other (Please specify):

13 UNIQUE STUDENT IDENTIFIERS (USI)

From 1 January 2015, we Sarina Russo Institute (SRI) 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). In addition, we are required to include your USI in the data we submit to National Centre for Vocational Education Research Ltd (NCVER). If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-USI/> on computer or mobile device. Please note that if you would like to specify your gender as 'other' you will need to contact the USI Office for assistance.

1. Enter your Unique Student Identifier (USI) (if you already have one): _____

DOMESTIC APPLICATION FORM 2025

14 USI APPLICATION THROUGH YOUR RTO (IF YOU DO NOT ALREADY HAVE ONE)

If you would like Sarina Russo Institute to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>. You must also provide some additional information as noted at the end of this form so that we can apply for a USI on your behalf.

I [NAME] authorise Sarina Russo Institute to apply pursuant to section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf.

I have read and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed at: <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>

Town/City of Birth (please write the name of the Australian or overseas town or city where you were born):

14.1 IDENTITY VERIFICATION

We will also need to verify your identity to create your USI. Please provide details for one of the forms of identity below. The name written in 'Personal Details' section of this form must match exactly with the name as written in the document you provide below.

14.2 SELECT ONE FORM OF IDENTITY

Australian Driver's Licence	State:	Licence Number:		
Australian Birth Certificate	State/Territory issued:	Registration No.:	Date printed/issued:	(dd/mm/yy)
Medicare Card	Medicare card number:		Individual reference number (next to your name on Medicare card):	
	Card colour: (select which applies)	Green Expiry date: (mm/yy)	Yellow Expiry date: (dd/mm/yy)	Blue Expiry date: (dd/mm/yy)
Australian Passport	Passport number:			
Non-Australian Passport (with Australian Visa)	Passport number:		Country of issue:	
Immicard	Immicard Number:			
Citizenship Certificate	Stock number:	Acquisition date:	(dd/mm/yy)	
Certificate of Registration by Descent	Acquisition date:	(dd/mm/yy)		

In accordance with section 11 of the Student Identifiers Act 2014, Sarina Russo Institute will securely destroy personal information which we collect from individuals solely for the purpose of applying for a USI on their behalf as soon as practicable after we have made the application or the information is no longer needed for that purpose.

15 STUDENT DECLARATION (Please visit sri.edu.au for full Terms & Conditions of Enrolment)

15.1 PRIVACY NOTICE & CONFIDENTIALITY

Privacy Notice

Why we collect your personal information

As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us. SRI may not be able to enrol you if you do not provide some or all of Your Information.

How we use your personal information

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

How we disclose your personal information

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

Your Information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by SRI as outlined below and otherwise as detailed under the SRI Privacy Policy. Without limiting the SRI Privacy Policy, SRI may disclose your personal information for these purposes to third parties, including:

- Commonwealth and State or Territory government departments and authorised agencies;
- employers and other training providers whereby the disclosure is relevant to the process of providing educational services to you;

15 STUDENT DECLARATION (Please visit sri.edu.au for full Terms & Conditions of Enrolment)

15.1 PRIVACY NOTICE & CONFIDENTIALITY

- your employment service provider/s (current and previous, where relevant), this includes attendance and enrolment details;
- our contractors and suppliers – e.g. our IT contractors and database designers
- School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Organisations conducting student surveys;
- Researchers; and
- Other students where it is reasonably required to facilitate group projects or assessments; and
- any person, entity or authority with a lawful entitlement to obtain the information.

How the NCVER and other bodies handle your personal information

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the Privacy Act 1988 (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.

The NCVER is authorised to disclose information to the Australian Government Department of Employment and Workplace Relations, Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation
- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at www.ncver.edu.au/privacy.

If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below.

The Department of Employment and Workplace Relations is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how the department will handle your personal information, please refer to the VET Data Privacy Notice at <https://www.dewr.gov.au/national-vet-data/vet-privacy-notice>.

Surveys

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

Contact information

At any time, you may contact Sarina Russo Institute to:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

Further Information

Further details regarding Your Information and your ability to correct or raise concerns regarding the handling of Your Information are located in our Privacy Policy. Students must notify SRI in writing in relation to changes in personal details.

Sarina Russo Institute's privacy policy: <https://www.sri.edu.au/privacy-policy>

Sarina Russo Institute's Consent Notice: <https://www.sarinarusso.com/privacy-policy/#SRIConsent>

DOMESTIC APPLICATION FORM 2025

15.2 DECLARATION & CONSENT

I declare that the information I have provided to the best of my knowledge is true and correct.

I declare that I have read and understand the total tuition fees payable for my nominated course as stated on the Sarina Russo Institute website: www.sri.edu.au

I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

I have read and understood the Conditions of Enrolment as stated on the Sarina Russo Institute website: www.sri.edu.au

I give permission for Sarina Russo Institute to search for my USI or if I don't have a USI, to apply on my behalf if appropriate identification has been supplied.

I have read the "Student handbook" located on www.sri.edu.au to understand the requirements of being a student with Sarina Russo Institute.

15.3 SIGNATURE

Applicant's Signature:

Date: (dd/mm/yy)

For students under the age of 18, a parent/guardian signature is required.

Parent / Guardian Signature:

Date: (dd/mm/yy)

16 PAYMENT DETAILS

If your application is successful, payments should be made to Sarina Russo Institute by bank draft, credit card or bank transfer to the following account:

Account Name: Sarina Russo Institute

Bank: The National Australia Bank

Bank Address: 223 Queen Street, Brisbane, QLD 4000

Branch Number: 084-009

Account Number: 52540-0103

Direct Deposit / Online Transfer

If paying by bank direct deposit or online transfer, please quote your FULL NAME as the Payment Reference.

Credit Card: Mastercard Visa

Card Number:

Card Holder Name:

Expiry Date: (mm/yy)

Credit Card Security Code:

Amount: AU\$

Signature of Card Holder:

OR Please invoice as per company details provided on this application.

Otherwise, please contact Sarina Russo Institute to make alternative payment arrangements.