



11. Recognition of Prior Learning (RPL) or Credit Transfer (CT)

Are you applying for CT for the units successfully completed at another provider? Yes No

If yes, please submit the supporting documents such as official transcript or statement of attainment or other evidences to the Administration Staff.

Are you applying for RPL? Yes No

Please contact VIMT Administration Staff for further information.

12. Study Reason

Of the following categories, which best describes your main reason for undertaking this course (*Please tick the relevant box/s*):

- | | | |
|--|---|---|
| <input type="checkbox"/> To get a job | <input type="checkbox"/> To try for a different career | <input type="checkbox"/> I wanted extra skills for my job |
| <input type="checkbox"/> To develop my existing business | <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> To get into another course of study |
| <input type="checkbox"/> To start my own business | <input type="checkbox"/> It was a requirement of my job | <input type="checkbox"/> For personal interest or self- development |

13. Transfer from Another Provider (if Applicable)

Are you transferring from another education provider in Australia? Yes No

If Yes, Have you completed the first 6 months of your principal course? Yes No

Name of Institute:

If No, you must provide the release letter from your Provider.

Please refer to VIMT Transfer between Registered Providers Policy and Procedure or contact Administration Staff for further information.

14. Disability

Do you consider yourself to have a disability, impairment or long-term medical condition?

Yes No

If you indicated the presence of disability, impairment or long-term medical condition, please select the area(s) in the following list:

(you may indicate more than one area if applicable)

- | | | |
|---|---|--|
| Hearing/deaf <input type="checkbox"/> | Intellectual <input type="checkbox"/> | Physical <input type="checkbox"/> |
| Learning <input type="checkbox"/> | Mental illness <input type="checkbox"/> | Acquired brain impairment <input type="checkbox"/> |
| Vision Medical condition <input type="checkbox"/> | | |
| Other <input type="checkbox"/> (Please specify if others: | | |

15. Additional Support Required

Do you require any additional support or anything that might prevent you from progressing through the training and assessment program?

Yes No

If Yes, Please Specify:

16. Unique Student Identifier (USI)

From 1st January 2015 all students undertaking nationally recognized training delivered by a registered training organization will need to have a USI. The Unique Student Identifier or USI is a reference number made up of 10 numbers and letters that:

- creates a secure online record of your recognized training and qualifications gained in Australia, even from different training organization
- will give you access to your training records and transcripts
- can be accessed online, anytime and anywhere
- is free and easy to create

Please enter your USI (If known)

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No, I don't have a USI number. I consent VIMT to apply on my behalf.

No I don't have a USI number. I will create it myself. Go to www.usi.gov.au.



17. How did you know about VIMT?

- | | |
|--|--|
| <input type="checkbox"/> VIMT's Website | <input type="checkbox"/> Facebook |
| <input type="checkbox"/> Friends/ Family | <input type="checkbox"/> Recommended by an Education agent |
| <input type="checkbox"/> Other, please specify | |

18. Education Agent Details (if Applicable)

Name of the Agent/ Business:

Address: Suburb/Town:

State/Territory: Post Code:

Telephone/Mobile: Email:

19. Document Checklist

Certified copies of the following supporting documents must be included when you submit your application. Applications that are submitted without necessary supporting documents will be delayed in processing. Please select all relevant.

- | | |
|---|---|
| <input type="checkbox"/> Certified copies of passport | <input type="checkbox"/> Copy of Australian Visa and CoE (if applicable) |
| <input type="checkbox"/> Certified academic transcripts | <input type="checkbox"/> Evidence of OSHC (if applicable) |
| <input type="checkbox"/> Certified copies of qualification certificates | <input type="checkbox"/> Certified English translation of documents (if not in English) |
| <input type="checkbox"/> Evidence of English language proficiency | |

20. Student Declaration

I (Name)..... understand and acknowledge the following:

- I have read and understood the information in VIMT's Student Prospectus (also available on website <https://www.vimt.edu.au>) which details the information about VIMT's course requirements, fees payments, refund policy, ESOS framework, and VIMT policy and procedures before making the decision to submit this enrolment application.
- I have been provided the opportunity to clarify any item relating to my enrolment at VIMT prior to submitting this enrolment application form.
- I am required to pay course fees on accepting an enrolment offer and prior to the commencement of the term that the fees relate to.
- My right to access complaints and appeals processes. (This does not remove the right of the students to take action under Australia's Consumer Protection Laws).
- I am not required to pay more than 50% of the tuition fee before the start of the course. However, I have a choice to pay more than 50% of the tuition or the full course fees if I wish.
- I authorize VIMT to disclose information relevant to my application and enrolment to VIMT's preferred OSHC provider and other third parties for the purposes of arranging my OSHC, processing my application and enrolment, and administering my course.
- I give VIMT permission to check my visa status using the Department of Home Affairs (DHA) Visa Electronic Verification Online (VEVO) system.
- My personal information (including the personal information contained on this enrolment form), may be used or disclosed by VIMT for statistical, administrative, regulatory and research purposes. VIMT may disclose my personal information for these purposes to Commonwealth and State or Territory government departments and authorised agencies and NCVER.
- Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:
- populating authenticated VET transcripts
 - facilitating statistics and research relating to education, including surveys and data linkage
 - pre-populating RTO student enrolment forms
 - understanding how the VET market operates, for policy, workforce planning and consumer information and
 - Administering VET, including program administration, regulation, monitoring and evaluation.
- I may receive a student survey which may be administered by a government department or NCVER employee, agent or third party contractor or other authorised agencies. I am aware that I may opt out of the survey at the time of being contacted.

