



FEE for SERVICE (FFS) COURSE ENROLMENT FORM

I would like to enrol into the following course (please tick)

- | | | |
|--|---|---|
| <input type="checkbox"/> Cert II in Retail (SIR20207) | <input type="checkbox"/> Cert III in Retail (SIR30207) | <input type="checkbox"/> Cert IV in Frontline Management (BSB40807) |
| <input type="checkbox"/> Cert II in Hospitality (SIT20207) | <input type="checkbox"/> Cert III in Hospitality (SIT30707) | <input type="checkbox"/> Cert III in Children's Services (CHC30708) |
| | <input type="checkbox"/> Cert III in Business (BSB30110) | <input type="checkbox"/> Diploma of Children's Services (CHC50908) |
| <input type="checkbox"/> Other (units of competency) | | |

1. PERSONAL DETAILS

(Please print clearly in BLOCK LETTERS Note: if names are spelt incorrectly a fee will be charged for a replacement certificate)

Surname		Given name	
Employer		Position	
Title	Gender	Date of Birth	
Home Phone		Mobile Phone	
Email Address			
Emergency contact person		Phone	
Residential address			
Suburb /City /Town		State	Postcode
Are you an Australian citizen?	<input type="checkbox"/>	Are you a permanent Australian resident? (if no, a copy of visa is required)	<input type="checkbox"/>
Are you a New Zealand passport holder (in Australia for more than 6 months)?		<input type="checkbox"/>	
Are you Aboriginal or Torres Strait Islander origin?		If yes, visit www.karbentraining.edu.au and complete the NSW Fee Exemption/Concession Application within 14 days of enrolment .	
Please tick which origin		Aboriginal Torres Strait Islander Aboriginal AND Torres Strait Islander	
Are you currently receiving any Government benefits?		If yes, visit www.karbentraining.edu.au and complete the NSW Fee Exemption/Concession Application within 14 days of enrolment .	
Country of Birth		Are you still attending school?	
Indicate your highest completed level of secondary school		What YEAR did you complete the level of school?	
Name of school you attended your highest level			
My current employment status		Full time Part time Casual Self Employed	
Not employed (not seeking employment)		Unemployed seeking full time work Unemployed seeking part time work	

Language spoken at home if other than 'English'

Do you consider yourself to have a permanent or significant disability?

Please describe any learning difficulties which could affect your learning or additional support you would like made available to you

I have attached or provided a copy of my photo ID with my enrolment form as verification of the personal details provided

2. QUALIFICATIONS

Have you COMPLETED any previous qualifications or received any statement of attainments?

If YES, please state the name of the qualifications and the year you commenced it.

Do you have any current or previous industry experience relevant to the qualification you are enrolling in?

If YES, please explain your industry experience (please attach copies of any details of your learning, experience, certificates etc)

3. RECOGNITION OF PRIOR LEARNING (RPL)

I wish to apply for recognition of prior learning (RPL)

If yes, please tick the following: I have a current and valid certification for the course I am enrolling in (re-accreditation)

Provide Details *(if applicable please attach copies of any details of your learning, experience, certificates, with your enrolment)*

(A KTS staff member will be in contact to discuss your application for RPL)

4. ENROLMENT FEES

Who will be responsible for paying the enrolment fee for the course you are enrolling into?

Participant

Employer (please refer to KTS Fees & charges policy, additional forms will be required to be completed)

I agree to pay all applicable fees relating to the enrolment and completion of this qualification for each year of enrolment

Note: No qualification / certificate will be awarded until all enrolment fees have been paid in full

Cost of Qualification (determined by level of qualification you are enrolling in)

Certificate II \$1,600

Certificate III \$1,800

Certificate IV \$2,000

Diploma \$3,900

Unit of Competency (UOC)
\$ 200 per unit

Payment options

<p>Option 1 (All Qualifications EXCEPT Diploma level)</p> <p>Payment 1: 50% of course fee payable upon enrolment</p> <p>Payment 2: 50% of remaining fee payable at 3 months from enrolment</p>	<p>Option 2 (Diploma Qualifications only)</p> <p>Payment 1: 25% of course fee payable upon enrolment</p> <p>Payment 2: 50% of course fee remaining payable at 3 months from enrolment</p> <p>Payment 3: Remainder of course fee payable at 6 months from enrolment</p>
<p>Option 3 (other payment plan options available)</p> <p>(please complete the Payment Plan request form or contact our office to discuss an arrangement)</p>	<p>Option 4 (RPL payment option)</p> <p>RPL fee is 75% of the applicable qualification (FFS) enrolment fee (Not applicable for Cert IV in TAE40110 qualifications)</p>

Payment methods

IN PERSON	PHONE	MAIL	Electronic Funds Transfer (Direct Deposit)
Payment may be made using your debit or credit card, cash or cheque	Please call our office 02 4353 7188 to pay with your credit card	Mail your cheque to KARBEN Training Solutions PO Box 3380 Tuggerah NSW 2259	You can pay your enrolment fees using your online banking system Account Name: KARBEN Training Solutions Bank: Newcastle Permanent Building Society BSB: 650300 Account #: 971913304

I require a tax invoice

Yes

No

& prefer it to be

Emailed

Mailed

Faxed

Information of employer only required when employer is paying the enrolment fee

Employer Name		Legal Name	
ABN		Phone	
Fax		Contact Person	
Email Address			
Business address			
Suburb /City /Town		State	
		Postcode	

How did you come across our course or organisation?

Newspaper advertisement Marketing Flyer Word of mouth (referred by)

 website Online search Other (please provide details)

DECLARATION

- 1.1 How to apply for RCC/RPL. All recognition applications are individually assessed- submissions must be received within their entirety within the agreed timeframe as negotiated with the Training Manager.
- 1.2 It is my responsibility to read and complete my workbook prior to assessment.
- 1.3 I agree to notify the RTO of any special requirements I have in relation to participation in the course in which I am enrolling for prior to my course commencing. Throughout my course, should circumstances present themselves that make it difficult for me to successfully complete my course, I will contact KARBEN Training Solutions as soon as practical to discuss what assistance may be required.
- 1.4 I must read the student handbook provided to me or visit www.karbentraining.edu.au to review the on-line version of the student handbook so that I am aware of my rights and responsibilities before undertaking the qualification I am enrolling in.
- 1.5 I understand the outline of the course I am enrolling in and agree that the content is as per my learning / job role requirements.
- 1.6 I must submit all work by the required due date and as outlined in my workbook / qualification schedule.
- 1.7 I understand that if I do not complete my qualification by the scheduled completion date I may be responsible for another enrolment fee (First Aid does not apply)
- 1.8 I must look after my course resources and bring them to each assessment session.
- 1.9 I am responsible for any replacement costs of my resources should they be misplaced.
- 2.0 I must notify KARBEN Training Solutions a minimum of **3 hours in advance** should I not be able to attend a scheduled session / visit.
- 2.1 No qualification will be issued until all fees are paid in full by the participant and/or employer as nominated on this form.
- 2.2 I understand and agree that by signing this document that the nominated party (as indicated on this form) will be liable for all Course Fees including those associated with participating in a Government Funded Program.
- 2.3 I must behave in an ethical, professional and responsible manner throughout the duration of my course and practicum experience (if applicable) or I may be removed from the course without refund.
- 2.4 For courses that require a practical work experience component, I agree to complete these hours as outlined within my training schedule. I understand that I must act in a professional, reliable and well-presented manner or I may be removed from the worksite. Should removal from a practical work experience block result in unsuccessful completion of the units requirements, you will not be awarded competency for the unit(s) for which the practicum component relates. No refund will apply in such circumstances.
- 2.5 To ensure optimum learning experience is experienced by all participants, KARBEN Training Solutions reserves the right to cancel any scheduled theory or classroom sessions if insufficient attendees are available for the session. Participants will be provided with as much notice as possible at which time an alternative session will be scheduled.
- 2.6 I understand that information supplied within this enrolment will be used by KARBEN Training Solutions, The Department of Education and The NSW Food Authority for the purpose of issuing Food Safety Supervisor Certificates. This enrolment form, which must declare the participants residency status, must be issued and kept by the Registered Training Organisation and made available to such bodies if requested.
- 2.7 If my course includes coming in contact with children under the age of 18 years of age I will be required to complete a 'Working with Children's Check' prior to the course commencement.
- 2.8 For courses that require a valid First Aid Certificate, I must complete this training prior to the completion of my course or provide a certified copy of such training with a minimum of 12 months validity remaining or my certificate will not be awarded until evidence of such is provided.
- 2.9 Any pictures taken, work samples submitted or testimonials completed participants throughout their qualification may be used by KARBEN Training Solutions for marketing and advertising purposes. I authorise the use of these for such purposes.
- 3.0 (Classroom sessions only) That I am required to attend a minimum of 80% of the scheduled classroom sessions or non-attendance will be recorded.
- 3.1 (Classroom sessions only) Non-attendance due to ill-health requires a Doctor's Certificate.
- 3.2 Non-attendance or no prior notification of absence from a session will result in a zero (0) refund and fees will still apply.
- 3.3 I declare that the information contained within this form has been completed by myself and to the best of my knowledge and belief the information contained on this form to be complete and correct.

Participants signature

Date

(Employer paid qualifications are required to sign below)

Employer contact

Contact signature

Date

OFFICE USE ONLY

Office coordinator

Date enrolment received Enrolment received via Phone Email Mail Fax Face to Face

Student ID Class date attending Class # Trainers name

Enrolment entered into BCM

Enrolment entered into Student Record System

Employer paid enrolment

Participant paid enrolment

Enrolment fee amount to be charged

Payment Plan Request Form completed & approved

Yes

No

N/A

Confirmation letter of Enrolment sent (date)

Letter sent via

Email

Mail

Fax

Notes

Accounts / Office coordinator

Invoice date

Invoice #

Payment Date