



Safecity Training Academy

Safecity Training Academy is a Division of Safecity Services Pty. Ltd.
ABN 11 055 464 581 NSW Master Licence #403546788 ACT Master Licence 17501508

Post Office Box 177 OBERON NSW 2787

PLEASE NOTE:

View our policies online at www.safecity.com.au/support.htm

1. Safecity will not sell or otherwise release your information to any third party.
2. Safecity will only use your information to identify any funding available, to satisfy government statistical submissions and for training and assessment purposes, obtaining feedback on our services, and continuous improvement auditing including third party auditing and compliance audit requirements as part of its business operations.
3. Safecity is required to obtain the answers to many of these questions to satisfy national Vocational Education and Training statistics. Your information is encoded so your privacy is maintained.

APPLICATION FORM PART A

Preferred First Name _____ Birth date _____ Sex []M []F

Full Name _____
Title First Name Middle Name(s) Last / Family Name

I am enrolling in the following courses

Course Name	Course Date	Location (City/Town)

Course Name	Course Date	Location (City/Town)

If you have completed a course with Safecity before, please only complete the Declaration and payment details on Page 3 unless your other details have changed. Everyone else must complete each question in the application. THANK YOU.

Address where you want mail to be sent _____

City _____ State _____ Post Code _____

Address where you live _____

Phone number () _____ hm/wk Phone number () _____ hm/wk

Fax number () _____ hm/wk Mobile number () _____ hm/wk

E-Mail Address _____

Where did you hear about Safecity or Safecity's Courses? Please be specific.

List at least ONE form of ID (eg Drivers Licence). The instructor will sight the ID at the course.		
ID Type	ID #	ID Sighted (Instructor to sign)
_____	_____	_____
Verified identification at previous courses (Instructor verified) _____		

Personal Information

1. Current employment information

Occupation _____ Trade _____

Employer _____ Ph: _____

Employment Status: (Please choose by placing an **x** in the boxes that apply to you):

- Employer Self Employed Full-Time Employee
 Part-Time Employee Unemployed (seeking) Not employed (not seeking)
 I have been unemployed for _____ months.

2. Do you suffer from any physical or mental disability that may affect your participation in this course?

_____ (Please indicate any below by placing a **x** in the box.)

- No Disability Visual Physical Hearing
 Intellectual Illness Other (specify) _____

3. a. Do you have any difficulty with literacy or numeracy? _____

b. Is English your first language? _____

c. What languages do you speak at home? _____

d. Do you need help with English? _____

e. Do you need any additional support? _____ (specify) _____

4. Citizenship Status: (Choose all that apply to you by placing an **x** in the box):

- Australian Born Born in another country (specify) _____
 Australian Citizen Aboriginal Torres Strait Islander
 Permanent Resident Temporary Visa
 Citizen of another country (specify) _____

5. a. What was the highest level of secondary school you completed?

- Year 9 or below Year 10 Year 11 Year 12

b. What year did you complete that level of secondary school? (e.g. 1998) _____

c. What high-school did you attend to reach that level? _____

c. Select any further education and qualifications you have from the list below:

Outcome

Type of Qualification

Attempted Completed

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | No other qualifications attempted or completed |
| <input type="checkbox"/> | <input type="checkbox"/> | Trade Certificate in (specify) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Technical Certificate in (specify) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Other Certificate in (specify) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Associate Diploma of (specify) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Undergraduate Diploma of (specify) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Degree in (specify) _____ |

To the Directors of Safecity Training Academy,

- a. I fully understand the meaning of points 1, 2, 3, 4, and 5 in this application form.
- b. I have answered all questions truthfully to the best of my knowledge.
- c. I understand that these details are confidential and are protected by relevant privacy laws.
- d. I give my consent to Safecity to release my name, date of birth, contact details and statistical information to the relevant State Government bodies for the purpose of auditing, regulation of training, obtaining feedback and as statistical information.
- e. Please consider me a candidate for the courses listed on page 1 of this form.

Signed at (place) _____

on (date) _____ Signature _____

PAYMENT DETAILS

I have enclosed my payment of \$_____

being payment in full for my course fees, or

being a deposit. I will pay the balance when I attend the course.

being a deposit. I wish to apply for the payment plan option. Please send me a repayment agreement form.

PLEASE NOTE - If you intend to pay by credit card, contact the instructor to arrange for credit card facilities.

I am paying by Money order Direct Deposit Cheque Credit Card

Please make cheques payable to Safecity Services Pty Ltd.

Please charge \$_____ to my credit card:

MasterCard Bankcard Visa Amex Diners

Card No. _____ Expiry _____

Card Verification Number (please contact Safecity if you are not sure): _____

Name on Card _____ Signature _____

Mail this form to: Safecity Training Academy

Post Office Box 177 OBERON NSW 2787

E-mail: academy@safecity.com.au

Thank you.

Phone: 02-6335 5216 Fax: 02-6335 5229

<http://www.safecity.com.au>

Course Concession Eligibility

Only for courses advertised as Government Funded

You **may** be eligible for a concession on the required tuition fee if:

You are on NEWSTART Allowance

You are on YOUTH Allowance

You are on either AUSTUDY or ABSTUDY

You are on a Pension (you hold a Pensioner Concession Card)

You obtain an allowance from the Department of Veterans Affairs

Please check with Safecity before asking for a Concession on the Tuition Fee.

Proof must be supplied to obtain a Concession on fees.