**Short Course Enrolment Form White Card**

**CPCWHS1001 Prepare to work safely in the construction industry**

**Student Details:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname:** | | **Given Name/s:** | |
| **Home phone:** | **Mobile:** | | **Date of Birth:** |
| **Email Address:** | | | |
| **Residential Address:** | | | |
| **Postal Address:** | | | |

**Data Collection:**

|  |  |
| --- | --- |
| **Gender (please circle):** Male | Female | Other | **Country of Birth:** |
| **Australian Citizenship (please circle):** Yes | No | **Indigenous Status (please circle):**  Aboriginal | Torres Strait Islander | Neither |
| **Employment Status (please tick one box):**   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  | Full time employee |  | Employer |  | Unemployed – seeking part time work | | |  | Part time employee |  | Employed – unpaid worker in a family business |  | Not employed – not seeking employment | | |  | Self-employed – not employing others |  | Unemployed – seeking fulltime work |  | | | |
| **Language Spoken at Home:** | **English Assistance Required (please circle):** Yes | No |
| **Do you have a learning challenge or condition that may affect your ability to complete course requirements:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | None |  | Intellectual |  | Vision | |  | Hearing / Deaf |  | Learning |  | Medical Condition | |  | Physical |  | Mental Illness |  | Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

**Education Data:**

|  |  |
| --- | --- |
| **Highest COMPLETED school level:** | **Year (Date) Completed:** |
| **Prior Education Completed:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | Bachelor Degree or Higher |  | Certificate IV |  | Certificate I | |  | Advanced Diploma or Associate Degree Level |  | Certificate III |  | Miscellaneous Education | |  | Diploma Level |  | Certificate II |  |  | | |

**Course Enrolment:**

|  |  |
| --- | --- |
| **Unique Student Identifier:** | **Are you an owner-builder (please circle)?** Yes | No |
| **Reason for Study (please tick one box):**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | To get a job |  | To try for a different career |  | I wanted extra skills for my job | |  | To develop my existing business |  | To get a better job or promotion |  | To get into another course of study | |  | To start my own business |  | It was a requirement of my job |  | For personal interest or self-development | | |

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| **Student Signature:** | **Student Name:** | **Course Code: CPCWHS1001** | **Date:** |