



Allegiance Investigations and Security Services Pty. Ltd

Ph: (02) 9905 9193 | Fax: (02) 9905 9194 | E-mail: info@allegiancesecurity.com.au

Security: www.allegiancesecurity.com.au

Address: 10/84 Old Pittwater Rd Brookvale NSW 2100 | POST: PO Box 123 Dee Why NSW 2099

Master Licence: 405 359 898 | NTIS No.: 5579 | Security Training Approval: 08/007

First Name: _____

Last Name: _____

Unique Student Identifier:

Please write your **legal name** that you used when you applied for your Unique Student Identifier (USI), including any middle names. **If you do not yet have a USI and want Allegiance Training, please see a staff member.** A Unique Student Identifier (USI) is a reference number made up of numbers and letters, unique to each student. ... A USI Number will stay with the student for life, and must be recorded with any nationally recognised VET course they undertake.

OFFICE USE ONLY		
Enrolment processed by:		
AISS SID:		
Invoice Number:		
Provision	Tick or Fill In	Sign When Completed:
All information issued (Student Handbook read)	<input type="checkbox"/>	
ID Sighted (and attached)	<input type="checkbox"/>	
Deposit Taken	Amount:	
Full Payment Made	Amount:	

Record / Document Title	Date of Issue	Version No.	Amendment Date	Authorised By	Internal Distribution	External Distribution	Retention Period
EnrolmentFormAVETMISS	21/08/17	9	03/08/2022	MG	Staff	Clients	N/A



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ENROLMENT FORM (PLEASE PRINT)

PERSONAL DETAILS									
Family name (Surname)									
Given names									
Date Of Birth (day/month/year)			____/____/____		Gender (circle)	Male Female Other			
CONTACT INFORMATION									
Contact phone number/s									
Email address									
Usual Residential Address: Building/property name:									
Flat/unit details					Street number				
Street name				Suburb/Town					
State/territory				Postcode					
Postal address (if different from above): Building/property name:									
P.O.Box:									
Flat/unit details					Street number				
Street name				Suburb/Town					
State/territory				Postcode					
LANGUAGE AND CULTURAL DIVERSITY									
In which country were you born?									
<input type="checkbox"/> Australia	1101		Other	<input type="checkbox"/> (please specify)					
Do you speak a language other than English at home? If more than one language, indicate the one that is spoken most often									
<input type="checkbox"/> English only	1201		<input type="checkbox"/> yes other (please specify)						
How well do you speak English?									
<input type="checkbox"/> very well	<input type="checkbox"/> well			<input type="checkbox"/> not well		<input type="checkbox"/> not at all			
Are you of Aboriginal or Torres Strait Islander origin? (for people of both Aboriginal and Torres Strait Islander origin, mark both "yes" boxes									
<input type="checkbox"/> No	<input type="checkbox"/> Yes Aboriginal			<input type="checkbox"/> Yes Torres Strait Islander					
DISABILITY									
Do you consider yourself to have a disability, impairment or long-term condition? <input type="checkbox"/> Yes <input type="checkbox"/> No									
If yes, then please indicate the areas of disability, impairment or long-term condition (You may indicate more than one area)									
<input type="checkbox"/> hearing	<input type="checkbox"/> physical	<input type="checkbox"/> intellectual		<input type="checkbox"/> learning	<input type="checkbox"/> mental illness				
<input type="checkbox"/> acquired brain impairment	<input type="checkbox"/> vision			<input type="checkbox"/> medical condition					
<input type="checkbox"/> other	_____								

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SCHOOLING

What is your highest COMPLETED school level? (Tick ONE box only)

- Year 12 or equivalent Year 11 or equivalent Year 10 or equivalent
 Year 9 or equivalent Year 8 or below never attended school

In what year did you complete that school level? _____

Are you still attending secondary school? Yes No

PREVIOUS QUALIFICATIONS ACHIEVED

Have you SUCCESSFULLY completed any of the following qualifications? Yes No
If YES, then tick ANY applicable boxes.

- Bachelor degree or higher degree Advanced diploma or associate degree
 Diploma (or associate diploma) Certificate IV (or advanced certificate/technician)
 Certificate III (or trade certificate) Certificate II
 Certificate I Certificates other than mentioned

EMPLOYMENT

Name of employer – Company name

Postal Address

State

Postcode

Contact Name

Contact phone number

Do you agree to have training and assessment conducted in the workplace

- Yes No Not applicable

Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

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

STUDY REASON

Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship? (Tick ONE box only)

- To get a job To develop my existing business
 To start my own business To try for a different career
 To get a better job or promotion It was a requirement of my job
 I wanted extra skills for my job To get into another course of study
 For personal interest or self-development Other reasons

Please let the trainer know if you are applying for recognition of prior learning in any units
Details:

COURSE DETAILS

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Certificate II in Security Operations (CPP20218)	
<i>Category 1A Licence - Static / Mobile Guard</i>	
Certificate III in Security Operations (CPP31318)	
Certificate III in Close Protection Operation (CPP31418)	
Certificate IV in Security Management (CPP40719)	
Certificate IV in Security Risk Analysis (CPP41519)	
Diploma in Security Risk Management (CPP50619)	
HLTAID011 Provide First Aid	
HLTAID001 Cardio Pulmonary Resuscitation	
Certificate III in Investigative Services (CPP30619)	
Security Licensing courses	
Security License course 1B Bodyguard	
Security License course 1C License Cash-in-Transit Guard	
Security License course 1Dog Handler	
Security License course 1F Armed Guard	
Revolver Accreditation Course	
Semi-Automatic Conversion	
Annual Re-Accreditation	
Other Unit of Competency:	

<p>Course cost only includes the course that you are enrolled in. There is an additional cost for any modules or extra tutorials that are required, following the trainer assessment. Please ask your trainer about these fees as the fees will depend on the relevant outstanding assessments. Tutorial/extra assessments can only be undertaken when the extra fees are paid.</p> <p>Applying the current course cost schedule, without consideration of outstanding modules/tutorials, the cost of the selected courses is:</p>	\$
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ENROLMENT INDUCTION CHECKLIST

I _____ (print) hereby certify that I have had the enrolment process explained to me, read the Allegiance Training *Student Handbook* (available online: <http://allegiancetraining.com.au/wp-content/uploads/2008/05/Student-Handbook-v10.pdf>) and I agree to all the policies and procedures outlined within. I understand I must attend all scheduled times as per timetable. If I don't attend as per scheduled time table, it may jeopardise my ability to receive my qualification or certificate.

Client signature		Date	
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Privacy Statement & Student Declaration

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

I understand that my RTO Allegiance Training is required to submit data sourced from this enrolment form to the national VET administrative collection as a regulatory reporting requirement. The information contained on my enrolment form may be used by my RTO or the following third parties for administrative, regulatory and/or research purposes:

- School – if I am a secondary student undertaking VET, including a school-based apprenticeship or traineeship.
- Employer – if I am enrolled in training paid by my employer.
- Government departments and authorised agencies.
- Researchers.

I understand that I may receive a National Centre for Vocational Education Research (NCVER) student survey.

[STUDENT SIGNATURE] [DATE]

Note: parental consent is required if student is under the age of 18.

AUTHORITY TO RELEASE INFORMATION (PRIVACY ACT 1998)

To provide you with the best training / recognition and assessment services, there are times when we may need to discuss your situation with auditors, your employers and other organisations with whom you may have worked.

We may require the verification of skills by your employer and work colleagues. We may also need to discuss evidence or practices with other clients undertaking the same program.

Discussions concerning your employment will only be at your request and in your presence unless give permission otherwise.

If witness testimonies are required:

- Your Agreement on the source will be sought
- You will be provided with a copy of the testimony

By signing this form you are giving permission for the above to occur. The results of these exchanges will be kept confidential.

I hereby give authority for the training representative assessors of Allegiance Investigations & Security Services to speak to, and to show educational information to auditors, colleagues, and employer and past employers. These discussions and education material are to be in relation to the assessment of the units or modules I have enrolled in, and in accordance with arrangements made known to me.

Learner Name:		Witnessed By:	
Signature:		Signature:	
Date		Date	

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Course Fee and Refund Policy

Allegiance Training Group offer professional training services to its clients and ensures the fees are charged on a fair basis and gives value for money.

- a. Prospective trainee will pay a maximum of \$1,000.00 before commencement of the course and balance is payable on the day of course.
- b. Prospective trainees are required to pay an amount of AU\$150.00 as non-refundable enrolment fees when they apply for the course. Upon successful enrolment in the course the trainees are required to pay the full fees which should be 7 working days or more prior to start of the course.
- c. A 10% surcharge is added as late-entry fees if the trainee pays in the last 7 working days prior to the course start date.
- d. If the trainee decides to cancel their course due to any reason and notify us:
 - ✓ In more than 7 working days prior to the start of the course, fees would be refunded in full (excluding non-refundable enrolment fees of \$150.00)
 - ✓ Less than 6 days or anytime after the course has started,
 - 50% of the total course fee (less non-refundable enrolment fees) is refunded or
 - 75% value of the course fees can be credited to the next course start date or any other course.
- e. In a situation where Allegiance Training Group has to cancel/postpone its course due to compelling or unforeseen circumstances the course fees will be refunded in full or credited to the next or another course at the trainee's discretion.
- f. Allegiance Training Group assures its trainees fair and reasonable practices; if a trainee disagrees with our above mentioned refund policy they are encouraged to discuss it with us at the first instance, otherwise to opt for Complaints and appeals procedure.
- g. The refund amount does not include the non-refundable enrolment fees.

Notes (Office use):

Replacement of Certificates	Cost (\$)
Statement of Attainment	15
Qualification Certificate	15
Attendance details	10
Financial Details	5
Other applicable record(s)	10

Signature:	
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