

G&L

HEAVY VEHICLE



DRIVING CENTRE

4 HINES ROAD
WINGFIELD S.A 5013
Phone (08) 8359 0099

PO BOX 14
WELLAND S.A 5007
ABN 15794 402 123

ENROLMENT STATEMENT

THIS FORM MUST BE COMPLETED AND RETURNED AS SOON AS POSSIBLE TO CONFIRM YOUR BOOKING.

You must advise us at least 3 Business Days in advance if you do not wish to continue with your training.

For afterhours cancellations please call or text 0411 667 830

Please go to www.gnltruck.com.au to view a copy of the Client Handbook

IF YOU ARE IN AUSTRALIA STUDYING, BE AWARE THAT G&L HEAVY VEHICLE DRIVING CENTRE CANNOT DELIVER TRAINING TO PERSONS ON A STUDENT VISA. TO DO SO COULD RESULT IN LEGAL ACTION BY REGULATORS.

Please complete all of the following questions.

Name of course applied: _____ FORKLIFT _____

Course Date (s): Start: _____ Finish: _____

Name: _____ Date of Birth: _____

Address: _____ Postcode: _____

Postal Address: _____

Email: _____

Telephone Home: _____ Mobile: _____ Work: _____

Emergency contact Name: _____ **Phone:** _____

Address _____

Postcode _____ **Relationship** _____

USI* NUMBER: _____

***UNIQUE STUDENT IDENTIFIER (USI)**

G&L is required to collect and verify a USI for each student prior to issuing a qualification or Statement of Attainment and to include the USI in the returns to the National VET data collection.

The student is required to obtain the USI.

Log in to www.USI.gov.au to create/retrieve USI.

From 1 January 2015, we G&L Heavy Vehicle Driving Centre can be prevented from issuing you with a nationally recognised VET qualification or Statement of Attainment when you complete your course if you do not have a Unique Student Identifier (USI). If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-USI/>

Please tick ✓ any applicable boxes

Were you born in Australia? Yes ___ No ___

If No, in which country were you born? _____

Are you Aboriginal? Yes / No or Torres Strait Islander? Yes / No

Which language/s do mainly speak at home? _____

Do you consider yourself to have any permanent and significant disability YES / NO?

If yes, then place a tick ✓ in any of the applicable boxes.

HEARING/DEAF		ACQUIRED BRAIN IMPAIRMENT	
PHYSICAL		VISION	
INTELLECTUAL		MEDICAL CONDITION	
LEARNING		OTHER	
MENTAL ILLNESS			

What is your current occupation (job title): _____?

What kind of work do you do? _____

Earthmover, ceiling fixer etc.

Who is your current employer (Company Name)? _____

Employer's Address: _____

Post code: _____ Telephone: _____ Email: _____

Declaration:

I do solemnly and sincerely declare that the above information is a true and correct record.

Signed: _____

Print Name: _____

Date: _____

What is your highest COMPLETED school level? (Tick ✓ 1 box only)

Year 12 or equivalent		Year 9 or equivalent	
Year 11 or equivalent		Year 8 or below	
Year 10 or equivalent		Never attended school	

In which YEAR did you complete that school level? _____

Are you still attending Secondary School? (Please circle) YES / NO

Have you attempted or completed any of the following qualifications? Tick ✓ Attempt or Completed

Level of Qualification	Attempt	Completed
Bachelor Degree or Higher Degree		
Advanced Diploma or Associate Degree		
Diploma (or Associate Diploma)		
Certificate IV (or Advanced Certificate/Technician)		
Certificate III (or Trade School)		
Certificate II		
Certificate I		
Certificates Other than above		

Of the following categories, which BEST describes your current employment status? (Tick ✓ 1 Box)

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 Seeing Employment	

Your reason for Study? (Tick ✓ 1 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	

Privacy & disclosure:

I give my consent for the information that I have provided to G&L Heavy Vehicle Driving Centre to be used for the purposes of registration, preparing statistics, reporting programme administration, monitoring, and evaluation. The information contained herein may be provided to governmental agencies that fund and or accredit this course, non-government education authorities and contractors or agents of any of these organisations, departments and agencies, and may otherwise be disclosed without consent where authorised or required by law.

Trainee: _____ Signature: _____ Date: _____

PAYMENT & REFUND POLICY

PLEASE READ CAREFULLY

As a client of the G&L Heavy Vehicle Driving Centre, you will be required to pay **full course fee**. **The fees must be received by Monday two (2) weeks prior to the course commences**, unless prior arrangements with G&L Heavy Vehicle Driving Centre have been made. If we have not received any confirmation or enrolment forms on course bookings, at least two (2) weeks prior to course commencement the course may and will be cancelled, after appropriate measures have been endorsed in contacting clients by nominated contact details, via email, phone & or text.

A non-refundable administration fee of \$60.00 applies to all courses.

If you cancel a course with 3 clear Business days’ clear notice, your refund will be returned to you **minus the administration fee** into your nominated account . If the trainee decides to withdraw from a course - does not complete the course - or breaches Fatigue, Alcohol and Drug Laws the course fees will be retained by G&L, no refund will be given. If payment is paid and course is rescheduled by your request, payment will hold for 6 months from payment date, if course is not booked and completed in this time, payment will not be refunded, unless prior arrangements with G&L Heavy Vehicle Driving Centre have been made. If G&L Heavy Vehicle Driving Centre has to cancel your course, a full refund (if funds have been paid) will be paid back to into your nominated account or course will be rescheduled to a mutually convenient time.

In this instance, every effort will be made to reschedule training lessons to a mutually convenient time to both G&L Heavy Vehicle Driving Centre and you, the Client.

Our organisation has measures to ensure that trainees and clients receive a refund of fees for services not provided, including services not provided as a result of the financial failure of the organisation.

I (print full name) _____ agree to the above terms and conditions and the initial payment of \$ _____ for my training.

SIGNED _____ **DATE:** _____

Please return this completed form to Reception

CLIENT/ WHS SIGN OFF SHEET

Please go to www.gnltruck.com.au to view the Client and WHS handbooks before signing this form. Please note it is your responsibility to read and understand the Handbooks supplied via G&Ls' web site.

Induction sign-off

Name: _____

Course enrolled in: _____

Date: _____

- I confirm that I have read and understood all of the policies and procedures outlined in this Client Handbook.
- I confirm that I have been given the opportunity to ask questions regarding all of the information contained in this Client Handbook.

Permission to use photographs and testimonials

In relation to the use of photographs and testimonials:

- I give my consent for G&L Heavy Driving Centre to use photographs and testimonials of myself, for promotional purposes that is taken/collected during my course of instruction.
- I acknowledge that G&L Heavy Driving Centre may alter photographs in the design Process and that I will not receive any payment or royalties for their use.
- I agree to waive all my rights in respect of intellectual property.
- By signing this document I release G&L Heavy Driving Centre from any claims, costs, actions or demands arising from the use of any photographs and testimonials.

Signature: _____ Date _____

PAYMENT OPTIONS

I enclose a **cheque** for \$_____.

OR

Credit card details: -We do not accept Diners or American Express.

Card Holders Name _____ Card No. ____ / ____ / ____ / ____
Expiry Date ____ / ____ . CVV. _____ Amount \$_____ Signature: _____.

OR

Invoice to: _____ P/ O Number: _____

OR

Internet Banking:-

Account Name :- G&L Heavy Vehicle Driving Centre **BSB :-** 035 033 **Account Number:-** 19 23 52

Please state name of person attending , Company Name or Invoice N° in description

Employment Agency Clients

Employment Company: _____ Case Managers Name: _____

Contact Number: _____

Any re-issue of Certificate of Competency , Statement of Attainments or Retrieval of Client information will be charged an Administration fee