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Instructions to applicants

Please type or use BLOCK LETTERS when completing this form. Return the completed form to: Mars Institute - 5/200, Turner Street, Port Melbourne, VIC 3207. Telephone: +61 3 9645 2259 Email: info@mars.edu.au | Website: www.mars.edu.au

Section 1 – General Information

Which of the following best describes you?					
I am an agency representative applying on behalf of a client.					
O I am an individual applying directly to study at Mars Institute.					
If yes to agency representative, please complete the following:					
Agent Name:	Agency Name	2:			
Agent Email:	Agent Teleph	one/Mobile phone number: _			
Agency Address line 1:					
Agency Address line 2:		Suburb / City:			
State (if applicable):	Country:		Post Code:		
If yes to individual applying directly, please complete the following	g				
Did any Mars Institute representative help you with the application	n / your enrolment?				
No, no one helped me. Yes, a Mars Institute repres	sentative helped me.				

If yes, please write the representative's name:

Have you been previously enrolled at Mars Institute?

Yes No	
If yes, please complete the following.	
Student ID:	Student Email:

Course Preferences

Please note that you may select more than one option. Course availability is dependent on campus selection.

Select	Cricos Course Code	Course Name	Weeks	Intake Date
0	111075D	AUR30620 Certificate III in Light Vehicle Mechanical Technology	52	
0	111076A	AUR40216 Certificate IV in Automotive Mechanical Diagnosis	26	
0	111077M	AUR50216 Diploma of Automotive Technology	26	
0	114327G	AUR30320 Certificate III Automotive Electrical Technology	52	
0	114328F	BSB80120 Graduate Diploma of Management (Learning)	52	



Do you wish to apply for Credit Transfer (CT)?	O Yes	🔿 No
If yes, please also complete our <u>Credit Transfer Form</u> .		
Do you wish to apply for Recognition of Prior Learning (RPL)?	O Yes	🔿 No
If yes, kindly send your query to request@mars.edu.au.		

Section 2 – Personal Information

Personal Details

Title: Mr Mrs Ms Miss	Other, please specify:	Sex: C	Ом С	F Other, please specify:
Family Name (surname):	Middle Name:			Given Name:
Email Address:	Phone number (optional):			Date of Birth:
Country of Birth:	Citizenshi	ip (same asp	passport):	

Passport and Visa Details

Passport Number:	Passpo	rt Issued Country:	Passport Date of Expiry:	
Are you currently residing in Australia?	O Yes	O No		
Are you currently studying in Australia?	O Yes	O No		
If yes to currently residing in Australia, please complete the following:				
Visa Number:		Visa Type:	Visa Expiry Date:	
If yes to currently studying in Australia, please complete the following:				
Name of Education Organisation:				

Residence

* Overseas address of residence:				
Home Phone Number:	Mobile Phone Number:			
Address 1:				
Address 2:		Suburb / City:		
State (if applicable):	Country:	Post Code:		
* If yes to currently residing in Australia, please complete the following address of residence as well:				
Home Phone Number:	Mobile Phone Number:			
Address 1:				
Address 2:		Suburb / City:		



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Emergency Contact Details

O Local	O International				
Relationship:	First (and second) Name(s): Last Name(s):				
Email Address:	Home or Mobile Phone Number:				
Health Cover					
Do you have current O	verseas Student Health Cover (OSHC)? O Yes O No				
If yes to Overseas Stud	If yes to Overseas Student Health Cover, please complete the following:				
Name of Insurance Provider (Company):					
Membership Number:	OSHC Expiry Date:				
* If no to Overseas Student Health Cover, please complete the following:					
What type of OSHC will you require?					
O Single (Student on	ly) ODual Family (Student plus spouse or children) OMulti Family (Student plus spouse and children)				

Language and Cultural Diversity

1. Are you of Aboriginal or Torres Strait Islander origin?				
O Yes, Aboriginal O Yes, Torres Strait Islander O Yes, both Aboriginal and Torres Strait Islander origin	No			
2. Do you speak a language other than English at home? Ores ONo If Yes, please specify:				
3. How well do you speak English? 🚫 Very Well 🚫 Well 🚫 Not Well 🚫 Not at all				
4. Provide details and documentation confirming your English language level:				
O I have undertaken a recognised English language test in the last two years (<u>click here</u> to see which tests are reco	ognised).			
Name of Test: Overall score:	Date of Test:			
O I have successfully completed an English language course in Australia (certificates must be attached).				
O I have completed studies comprising of at least 2 years where English was the language of instruction.				
O English is my first language.				
O I have successfully completed Mars Institute English Placement Test.				
I have successfully completed Mars Institute English Placement Test.				

Academic Record and Previous Qualification Achieved

1.	Have you previously been enrolled at Mars Institute? 🔿 Yes 🔿 No If Yes, please provide student number:
2.	Are you currently enrolled in any course in Australia including Principal course for which you received your current student visa. O Yes
З.	Are you transferring from another education provider in Australia? 🔿 Yes 🔗 No
lf y	es, please provide the name of the education institute:
4.	Have you completed any prior education?
0	Not Stated (Client/student was asked, but no answer was provided).
0	No – No prior education achievements have been completed.
0	Yes – Prior education achievements have been completed.



5. If yes, please select which qualifications from the list below:	(Australian)	(Equivalent)	(International)		
Doctoral Degree	\bigcirc	\bigcirc	\bigcirc		
Master's Degree	\bigcirc	\bigcirc	\bigcirc		
Graduate Certificate or Graduate Diploma	\bigcirc	\bigcirc	\bigcirc		
Bachelor's degree	\bigcirc	0	0		
Advanced Diploma or Associate Degree	Ö	0	Ö		
	\bigcirc	\bigcirc	\bigcirc		
Diploma (or Associate Diploma)	\bigcirc	\bigcirc	\bigcirc		
Certificate IV (or Advanced Certificate/Technician)	\bigcirc	\bigcirc	\bigcirc		
Certificate III (or Trade Certificate)	\bigcirc	\bigcirc	0		
Certificate II	\bigcirc	\bigcirc	\bigcirc		
Certificate I	\bigcirc	\bigcirc	\bigcirc		
Other education (including certificates or overseas qualifications not listed above) If	\bigcirc	\bigcirc	\bigcirc		
other, please provide details:	\bigcirc	\bigcirc	\bigcirc		
6. What is the field of study of your qualifications:					
O Education and Training O Agriculture and Environmental Scier	nce 🔿 Medicine, N	ursing and Allied Health			
Business, Management and Commerce Engineering Other, please specify:	Information	Technology (IT)			
7. What is your highest COMPLETED secondary school level? (Tick one box only) If you are currently enrolled in secondary education, the Highest school level completed refers to the h undertaking. For example, if you are currently in Year 10 the Highest school level completed is Year 9.	ighest school level you hav	e actually completed and not the l	evel you are currently		
Year 12 or equivalent Year 9 or equivalent Year 11 or equivalent					
Year 8 or below O Year 10 or equivalent O Never attended school					
8. Which year did you complete secondary school? Year:					
Leave blank if you have not completed secondary school.					
9. Are you still enrolled in secondary or senior secondary education? O Yes	No				
10. Highest qualification completed (including year of completion):		Year of co	ompletion:		
Name of Education Institution: Please note: All Confirmation of Enrolment (CoE) and all documentation including certified copies of fu	Il academic transcripts mus	t be attached. Documents not in Ei	nglish must be accompanied by		

certified translations.

Section 3 – Employment and Learning Styles

Employment

1. Are you working in the industry which you are seeking training for? O Yes O No						
2. How long have you worked in this industry	Year:					
3. Which of the following categories BEST desc	3. Which of the following categories BEST describes your current employment status? (Tick one box only)					
O Full time employee	O Self-employed - not employing others	O Employed – unpaid worker in family business				
O Unemployed - seeking part time work	O Part time employee	O Employer				
O Unemployed – seeking full time work	O Not employed - not seeking employment					
4. Which of the following categories BEST describes your current occupation? (Tick one box only). If unemployed, please continue to the next question.						
O Managers	O Sales workers	O Professionals				
O Machinery operators & drivers	O Technicians & trade workers	O Laborers				
O Community & administrative workers	O Community & personal service workers	Other, please specify:				

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5. Which of the following categories BEST describes your current employment industry? (Tick one box only). If unemployed, please continue to the next question.				
	O Manufacturing			
O Construction	O Wholesale trade			
O Accommodation & Food Services	O Transport, Postal & Warehousing			
5 O Information Media & Telecommunications	O Administrative & Support Services			
O Education & Training	O Retail, Hiring & Real Estate Services			
O Health Care & Social Assistance Public administration & safety O Arts & recreation				
6. Will your employer support you in a placement training program to allow you to use workplace resources and allow your trainer/assessor to visit you in the workplace				
O N∕A				
7. What is the name of your employer (if applicable)?				
1	 Mining Construction Accommodation & Food Services Information Media & Telecommunications Education & Training ic administration & safety Arts & 			

Disability and Mental Health

In order to provide appropriate support services, we invite you to give us information about any disability or mental health issue you may have.						
1. Do you consider yourself to have a disability, impairment or long-term condition? O Yes O No						
2. If yes, then please indicate the area of disability, impairment or long-term condition: (you may select more than one) Please note: Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.						
🔵 Hearing / deaf	CLearning	Vision	O Intellectual	O Medica	al condition	O Acquired brain impairment
O Medical illness	less O Physical O ther, please specify:					
Defer to the Disphility Complement for an evaluation of the above list						

Refer to the Disability Supplement for an explanation of the above list

LLN (Language, Literacy and Numeracy)

Mars Institute is committed to providing language, literacy and numeracy to support its learners.			
Do you consider that you may require language, literacy or numeracy support?	○ Yes ○ No		
If no, please go to the next section (Reason for Study) OYes ONO			
If yes, please provide details:			
*Your response and any additional assistance provided will remain confidential.			
_earning preferences			
How do you prefer to learn? (please tick one or more of the following)			
OParticipating in classes face-to-face with a teacher and other students	O Through group work with other students / discussion with other students		
Online completion of some units	O Self-paced, flexible learning through books and other such resources		
O Continuous and regular communication with my teacher	O Self-directed tasks and activities		
Hands-on tasks, role-plays and activities	On-the-job training, or workplace learning and assessment		



Reason for study

Of the following categories, which	BEST describes your ma	in reason for undertakin	g this Course. (Tick one box only)	
🔵 Togetajob	O To develop my existing business		O To start my own business	O To try for a different career
O For Personal Interest / self-dev	velopment	O To get skills for community/voluntary work		O To get a better job/promotion
O It was a requirement of my job)	O I wanted extra skills for my job		O To get into another course of study
Other (please specify):				
What are your reasons for enrolling in the course, including your expectations and objectives withinthe industry which you are applying to study? Include your interests and outline your strengths and weaknesses towards studying. Answer below:				
What do you hope to achieve from gaining this qualification? Answer below:				

Digital Literacy

Do you regularly have access to any of the	nese digital tech	nnologies?	Select	t your level of capabil	ity for each digital technol	.ogy.
	Yes	No	No capacity	Limited	Capable	Advanced
Desktop or notebook computer	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Tablet or smart phone	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Internet	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Microsoft Word	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Microsoft Excel	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Microsoft Power Point	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Email	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Do you fool you faco any challonges or h	orriors to physi	cal accoss of digital tashs	ology that will affect			

Do you feel you face any challenges or barriers to physical access of digital technology that will affectyour learning? 💛 Yes 👘 🚺 No

Section 4 - Fees, USI and survey

Fee payment options

Note: Under the ESOS Legislation, Providers cannot require Students to pay more than 50% of their tuition fees before they start the course. However, Students, or the person responsible for paying the tuition fees, may choose to pay more than 50 per cent of their tuition fees before they start their course. For further information please contact us at accounts@mars.edu.au.

OPTION A - I would like to pay more than 50% of my total tuition fees upfront.

Total Tuition fees (more than 50%) I wish to pay (please insert amount here) \$-

You will be able to pay amount inserted above via bank transfer in the bank account mentioned in an "International Student: Letter of Offer, Student Agreement and Acceptance of Offer Form". If you have any balance of the tuition fees left after paying desired amount mentioned above, you will be set up on a Mandatory scheduled monthly payment plan for the balance of the amount. If you do not have any balance remaining, you will not be required to do anything further and your Tuition Fees will be paid in Full.



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OPTION B – Monthly Payment Plan

If you wish to pay your fees on the Monthly Payment Plan, you will be required to pay Initial Deposit mentioned in the "International Student: Letter of Offer, Student Agreement and Acceptance of Offer Form" under the subheading "Initial payment required – Deposit" via bank transfer and for the balance of the fees, you will be set up on a Mandatory scheduled monthly payment plan.

Note: We will send you an "International Student: Letter of offer, Student Agreement and Acceptance of Offer Form" as per the Payment Option selected by you. More details about payment methods including Bank Details will be mentioned in an "International Student: Letter of Offer, Student Agreement and Acceptance of Offer Form".

Victorian Student Number (VSN) *to be completed by all students 24 years old or younger

1. Do you have a Victorian Student Number? 🚫 Yes 🚫 No 🚫 Not sure If yes, please enter your Victorian Student Number:		
2. Have you attended any Victorian school since 2009 or had any training with a Vocational Education and Training (VET) registered training organization provider or an Adult and Community Education provider in Victoria since 2011?		
O Yes - I have attended a Victorian school since 2009		
If yes, please list most recent Victorian school attended	and/or	
	-	
O Yes - I have participated in training at a TAFE or other training organization since the beginning of 2011		

Unique Student Identifier (USI)

You may already have a USI if you have done any nationally recognised training, which could include training at work, completing a first aid course or RSA (Responsible Service of Alcohol) course, getting a white card, or studying at a TAFE or training organisation. It is important that you try to find out whether you already have a USI before attempting to create a new one. You should not have more than one USI. To check if you already have a USI, use the 'Forgotten USI' link on the USI website at https://www.usi.gov.au/faqs/i-have-forgotten-my-usi/.

From 1 January 2015, Mars Institute 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). In addition, we are required to include your USI in the data we submit to NCVER. If you have not yet obtained a USI you can apply for it directly at <u>https://www.usi.gov.au/students/create-your-usi</u> on computer or mobile device.

Yes - I already have a USI. Enter here:

🔵 No – I do not have a USI

Go to the next section (Recognition of Prior Learning and Credit Transfer)

If you would like Mars Institute to apply for a USI on your behalf you must authorise us to do so. In such case, please complete the Unique Student Identifier (USI) Supplement and attach it to this form.

Survey

1. Why did you choice to study at Mars Institute		
Campus Location	Scope of Courses	O Campus Facilities
O Qualification Resources	O Trainers / Teachers	Other, please specify:
2. How did you hear or learn about Mars Institute?		
O Australian Embassy / Australian Education Centre	O Internet / Media / Newspaper Advertising	O Education Representative
O Education Exhibition	O Education Exhibition	Other, please specify:

Accommodation & Airport Pick up

Would you like us to organise Airport Pick up?	O Yes	O No	
If yes, please fill out Airport pickup request form available	on <u>https://w</u>	/ww.mars.edu.au/form-and-policies/	
Would you like us to organise Accommodation for you?	O Yes	O No	
If yes, one of our friendly staff will be in touch for further information.			

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Application Checklist

Have you completed all sections of this appli	cation	
O Certified Students Passport	O Evidence of English Proficiency	Certified Year 11 or 12 including Academic History
Certified Aust Qualification Cert IV or Abo	ve Others, please specify:	

Privacy Statement & Student Declaration

Privacy Statement

Information is collected through this Enrolment Form and during your enrolment with Mars Institute in order to meet our obligations under the ESOS Framework including the ESOS Act 2000 as amended and the National Code 2018; to ensure Student compliance with the conditions of their Visas and their obligations under Australian immigration laws generally.

The authority to collect this information is contained in the Education Services for Overseas Students Act 2000 as amended, the Education Services for Overseas Students Regulations 2001 as amended and the National Code of Practice for Providers of Education and Training to Overseas Students 2018.

Mars Institute recognises students' right to privacy. Mars Institute's <u>Privacy Policy</u> identifies how we handle information about you as a Student. We collect and store your enrolment details and your progress reports and adhere to the Privacy Act 1988 (as amended) and the Information Privacy Act 2000. It also meets the requirements of the Privacy Act and the 13 Australian Privacy Principals it contains.

Mars Institute is committed to protecting students' right to privacy. Where relevant, information is collected and disclosed to appropriate bodies to determine and verify Students eligibility for enrolment, previous qualifications; individual welfare needs, plus report any details of Student enrolment. When using Social Media, you should be aware of who you are sharing your personal information with. Check your privacy settings regularly and ensure only people that you want to share your information with can see it. This might include things such as where you live, your email address, photos, birthday and other contact information.

Mars Institute is committed to the Australian Privacy Legislation in the way it collects, uses, secures and discloses personal information.

Information collected about you on this form and during your enrolment can be provided, in certain circumstances, to the Australian Government and designated authorities and, if relevant, the Tuition Protection Scheme (TPS) and Tuition Protection Scheme Administrators. In other instances, information collected on this form or during your enrolment can be disclosed without your consent where authorised or required by law

Information provided will be in accordance with the Privacy Act of 1988

A description of the ESOS framework that Australian Education Provider s must abide by is available electronically from Department of Education Website – refer to the links below for further information:

https://www.dese.gov.au/esos-framework/resources/international-students-factsheet

https://www.studyinaustralia.gov.au/english/australian-education/education-system/esos-act

http://www.studyinaustralia.gov.au/global/live-in-australia/support-services/support-services-for-Students

The right to make of Complaints and seek Appeals of decisions and action under various processes, does not affect the rights of the student to take action under the Australian Consumer Law if the Australian Consumer Law applies.



Mars Institute is required to provide the Victorian Government, through the Department, with student and training activity data which may include information I provide in this enrolment form. Information is required to be provided in accordance with the Victorian VET Student Statistical Collection Guidelines (which are available at: <u>http://www.education.vic.gov.au/training/providers/rto/Pages/</u> <u>datacollection.aspx?Redirect=1)</u>

The Department may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, and reporting and/or research activities. For these and other lawful purposes, the Department may also disclose information to its consultants, advisers, other government agencies, professional bodies and/or other organization. I have been advised by the training organization that I may be contacted and requested to participate in a National Centre for Vocational Education Research survey or a Department–endorsed project or audit or review.

The Education and Training Reform Act 2006 requires Mars Institute to collect and disclose my personal information for a number of purposes including the allocation to me of a Victorian Student Number and updating my personal information on the Victorian Student Register.

Mars Institute and Department of Education will not otherwise disclose the information without my consent unless required or authorised by law.

For more information in relation to how student information may be used or disclosed, please contact Student Services on +613 9645 2259

Privacy Notice

Why we collect your personal information

As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us.

* If we do not receive your details in this form, we will not be able to proceed with your enrolment.

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

How we disclose your personal information

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the <u>National Centre for Vocational Education</u> <u>Research Ltd</u> (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

How the NCVER and other bodies handle your personal information

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the Privacy Act 1988 (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.



The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (DESE), Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation
- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf. The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at <u>www</u>. <u>ncver.edu.au/privacy</u>. If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below.

DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how the DESE will handle your personal information, please refer to the DESE VET Privacy Notice at https://www.dese.gov.au/national-vet-data/vet-privacy-notice.

Surveys

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

Contact information

At any time, you may contact Mars Institute Insitute to:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

or more information, please get in touch with us at info@mars.edu.au. You can also find more information about our Privacy policy here.

Student Declaration

In signing or emailing this form I acknowledge and declare that:

1 I have read and understood and consent to the privacy notice and have completed all questions and details on the enrolment and eligibility forms.

2. The information herein provided is to the best of my knowledge true, correct and complete at the time of my enrolment.

3. I am eligible to study in Australia as either an Australian citizen, or a resident on a visa that allows me to study with a provider who is NOT CRICOS approved. For more information on visas and studying in Australia, visit Home Affair's website.

4. Arrangements have been made to pay the fees and charges for this qualification (either by myself or my employer) as per the payment



schedule/plan provided.

5. I have read and understand the Student Handbook.

6. I will inform Mars Institute of any changes in my contact details, including my email address, via info@Mars Institute.edu.au

7. My participation in this course is subject to the right to cancel or amalgamate courses or classes. I agree to abide by the rules and regulations of Mars Institute.

8. I confirm that I have been informed about the training, assessment and support services to be provided and about my rights and obligations as a student at Mars Institute.

9. I authorise Mars Institute or its agent, in the event of illness or accident during any Mars Institute activity, and where emergency contact or next of kin cannot be contacted within reasonable time, to seek ambulance, medical or surgical treatment at my cost.

10. I have access to the internet and a printer, complying with Mars Institute's policies.

11. I agree to comply with all the Terms and Conditions included in this Enrolment Form.

Student signature [or electronic acknowledgement]:

Signature:

Date Processed:



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Disability Supplement

Introduction

The purpose of the Disability supplement is to provide additional information to assist with answering the disability question.

If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

Please note: Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.

<u>'Hearing/deaf'</u>

Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

<u>'Physical'</u>

A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

<u>'Intellectual'</u>

In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

<u>'Learning'</u>

A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the lifespan. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

<u>'Mental illness'</u>

Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.

'Acquired brain impairment'

Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

<u>'Vision'</u>

This covers a partial loss of sight causing dif culties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

'Medical condition'

Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identiable, yet may be mildly or severely debilitating and result in uctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic brosis, asthma or diabetes.



Unique Student Identifier (USI) Supplement – Authorisation form

Please complete the authorisation form (supplement) below if you have agreed Mars Institute to apply for a Unique Student Identifier on your behalf. Please ensure to attach this supplement to the main Enrolment Form.

For more information on the Student Identifiers Registrar's Privacy Policy please refer to: <u>http://usi.gov.au/Documents/Student-Identifiers-Registrar-privacy-policy-v11.docx</u>

This site contains information about how you may

- Access and seek correction of the personal information held; and
- Complain about a breach of privacy and how such complaints will be dealt with.

I declare that I have read the privacy information at https://www.usi.gov.au/about-us/privacy.

I understand and consent that I must also provide some additional information as noted in this form so that Mars Institute can apply for a USI on my behalf.

I, _____ (your name) , authorise Mars Institute to apply pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf.

O I have read and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed at https://www.usi.gov.au/about-us/privacy