

2019 APPLICATION FOR ENROLMENT													
PLEASE SELECT THE COURSE YOU WISH TO ENROL IN													
AVI50215 Diploma of Aviation (Commercial Pilot Licence - Aeroplane) – <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time													
Select Full-time Course Start Date: <input type="checkbox"/> 15 January 2019 <input type="checkbox"/> 9 April 2019 <input type="checkbox"/> 16 July 2019 <input type="checkbox"/> 15 October 2019													
AVI50415 Diploma of Aviation (Instrument Rating) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time													
Select Full-time Course Start Date: <input type="checkbox"/> 11 March 2019 <input type="checkbox"/> 27 May 2019 <input type="checkbox"/> 26 August 2019 <input type="checkbox"/> 18 November 2019													
Full-time courses without IREX: <input type="checkbox"/> 21 January 2019 <input type="checkbox"/> 8 April 2019 <input type="checkbox"/> 8 July 2019 <input type="checkbox"/> 30 September 2019													
AVI50516 Diploma of Aviation (Flight Instructor) – Full-time only													
Select Full-time Course Start Date: <input type="checkbox"/> 12 February 2019 <input type="checkbox"/> 13 August 2019													
PERSONAL INFORMATION (please to complete in BLOCK CAPITALS)													
TITLE	GIVEN NAMES				FAMILY NAME								
RESIDENTIAL ADDRESS				TOWN/SUBURB									
STATE	POSTCODE			COUNTRY									
HOME PHONE				MOBILE PHONE									
DATE OF BIRTH				GENDER (Tick ONE box only)				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other					
EMAIL ADDRESS													
POSTAL ADDRESS, if different from residential													
EMERGENCY CONTACT DETAILS													
NAME													
RELATIONSHIP TO YOU				CONTACT PHONE									
DEMOGRAPHIC and EDUCATIONAL INFORMATION													
Citizenship	Are you an Australian Citizen?				<input type="checkbox"/> Yes <input type="checkbox"/> No								
	Please provide evidence of citizenship with enrolment e.g. Passport, Certificate												
	Country of Birth: <input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify):												
Language	Do you speak a language other than English at home?				<input type="checkbox"/> No, English only <input type="checkbox"/> Yes other -				Please specify:				
Culture	Are you of Aboriginal or Torres Strait Islander origin?				<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								
	<input type="checkbox"/> Hearing/Deaf				<input type="checkbox"/> Acquired Brain Injury								
	<input type="checkbox"/> Physical				<input type="checkbox"/> Vision								
	<input type="checkbox"/> Mental Illness				<input type="checkbox"/> Medical Condition								
	<input type="checkbox"/> Learning				<input type="checkbox"/> Other								
EDUCATION													
What is your highest completed school level?		<input type="checkbox"/> Year 12 or equivalent		<input type="checkbox"/> Year 11 or equivalent		<input type="checkbox"/> Year 10 or equivalent		<input type="checkbox"/> Year 9 or equivalent		<input type="checkbox"/> Year 8 or below		<input type="checkbox"/> never attended school	
In what year did you complete that school level? (E.g. 2008) _____				Are you still enrolled in secondary education? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Have you successfully completed any of these qualifications?		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Bachelor Degree or Higher				<input type="checkbox"/> Certificate III					
				<input type="checkbox"/> Advanced Diploma or Associate Degree				<input type="checkbox"/> Certificate II					
				<input type="checkbox"/> Diploma (or associate Diploma)				<input type="checkbox"/> Certificate I					
				<input type="checkbox"/> Certificate IV or Advanced Certificate/Technician				<input type="checkbox"/> Other					

Prior Education/Training	
Have you done any flying training before? Yes <input type="checkbox"/> No <input type="checkbox"/> (If no please go to next section)	
If Yes please list prior training provider and contact details to obtain training records:	
ARN:	ASIC EXP:
Medical (please circle): Class 1 Class 2 Expiry:	
Medical Date:	Doctor Name:

EMPLOYMENT		
Of the following categories, which BEST describes your current employment status. Tick ONE box only		
<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Employed – unpaid worker in a family business	
<input type="checkbox"/> Part-time or casual employee	<input type="checkbox"/> Unemployed – seeking full-time work	
<input type="checkbox"/> Self-employed – not employing others	<input type="checkbox"/> Unemployed – seeking part-time work	
<input type="checkbox"/> Employer	<input type="checkbox"/> Not employed – not seeking employment	
STUDY FOR REASON		
Of the following categories, which BEST describes your main reason for undertaking this course?		
<input type="checkbox"/> To get a job	<input type="checkbox"/> To try for a different career	<input type="checkbox"/> I wanted extra skills for my job
<input type="checkbox"/> To develop my existing business	<input type="checkbox"/> To get a better job or promotion	<input type="checkbox"/> To get into another course of study
<input type="checkbox"/> To start my own business	<input type="checkbox"/> It was a requirement of my job	<input type="checkbox"/> For personal interest or self development
Other reasons:		

Unique Student Identifier (USI)	
Your USI (in CAPS):	
If you do not have a USI please go to www.usi.gov.au for more information and to register	

VET STUDENT LOANS (not available for part-time training)	
I would like to enrol using VET Student Loans if eligible YES <input type="checkbox"/> NO <input type="checkbox"/>	
1. I have read and understood the Air Gold Coast Career Pilot Guide for VET Student Loans courses and conditions outlined <input type="checkbox"/>	
2. I have read and understood the VET Student Loans terms and conditions outlined on www.studyassist.gov.au and https://docs.education.gov.au/system/files/doc/other/vet_student_loan_student_information_booklet_2017.pdf <input type="checkbox"/>	
3. I meet the VET Student Loans entry requirements <input type="checkbox"/> - Please attach proof of citizenship (passport, birth certificate) and High School completion certificate showing grades with this enrolment form.	
Once all documents are received and reviewed applicants will be contacted by Air Gold Coast to arrange an appointment for an entrance interview and to discuss their pilot career goals. Successful applicants will then be issued a VET Student Loan Letter of Offer.	

AUTHORISATION	
CONTACT and INFORMATION SHARING - I give permission for Air Gold Coast to:	
a) make contact with me via electronic mail and SMS messages	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) obtain additional education records (enrolment, assessment, certification) from third parties, if required	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) use photographs and information about me in print, broadcast and electronic media including the Internet	<input type="checkbox"/> Yes <input type="checkbox"/> No

STUDENT DECLARATION (please read and tick)–	
<ul style="list-style-type: none"> I have read and understood the Career Pilot Guide and Student Handbook and accept my obligations as a student: <input type="checkbox"/> I agree to abide by Air Gold Coast rules, regulations and policies and acknowledge that facilities made available for my use will be used only in accordance with proper use and relevant rules. <input type="checkbox"/> I confirm the accuracy of the information contained within this form and where necessary identification documents provided <input type="checkbox"/> 	
STUDENT SIGNATURE:	DATE:
PARENT/GUARDIAN SIGNATURE (If student is Under 18 years of age):	