

Last Name:

**Future College Pty Ltd.** Registered Training Organisation ABN. 67 131 678 521

Email: admin@fc.edu.au Tel: 02 8957 5857



## STUDENT INDUCTION CHECKLIST

## **Student Personal Information (Please fill up Using Block Capitals)**

First Name:				
Date of Birth				
(DD/MM/YY):				
Student ID:				
Course Information				
course informat	.1011			
Course 1:		Course Code:		
Course 2:		Course Code:		
1. Course/module information				
-	troduction to VET			
☐ Introduction to Competency Based Learning ☐ Introduction to Training Management, Admin and Support staff				
☐ Introduction to Training, Management, Admin and Support staff				
☐ Course Outline and Qualification Upon Completion				
☐ Learning and Assessment Strategies				
☐ Academic Schedule				
2. Policies and Procedures				
☐ Attendance/Course Progress				
	☐ Refund Policy			
□ Provision of Medical certificates				
	☐ Complaints & Appeals			
☐ Access to Records				
☐ IT and Internet				
$\square$ Printing				
☐ Deferment/Cancellation/Withdrawal				
□ Q	☐ Quality Assurance			
3. Student Facilities				
□ CI	lassrooms			
☐ Access to computers				
□ In	☐ Internet Access			
	□ Toilets			



**Future College Pty Ltd.** Registered Training Organisation ABN. 67 131 678 521

Email: admin@fc.edu.au Tel: 02 8957 5857



4. Ethics and St	andards of the College		
☐ Acces	s and Equity		
□ Code	of Conduct		
□ Duty	of care		
□ Plagia	rism		
□ Grieva	ance Resolution		
5. Occupational Health and Safety Procedures			
☐ Evacu	ation Procedures Explained and Demonstrated		
☐ Emer	gency Exists		
□ Desig	nated First Aid Person		
☐ Locat	ion/access to First Aid Kit		
☐ Emer	gency Contact Details		
I have clearly unders the induction session	stood and agree with all the policies and procedures mentioned during		
Student Name			
Staff Member Name	:		
Staff Member Signat	cure(Student Support):Date:		



**Future College Pty Ltd.** Registered Training Organisation ABN. 67 131 678 521

Email: admin@fc.edu.au Tel: 02 8957 5857



# Student Induction Attendance and Receipt of Orientation Booklet

# **Topics**

Student rights & responsibilities

### Initial each item

Attendance: I understand my obligation to attend my scheduled classes no less than 80% for the duration of my course enrolment according to HA policy and the requirements of Visa condition 8202
Course progress monitoring
Intention to report process:
Fee payments:
WHS:
Student attitude and behavior:
Student support services:
Student Name: Signature:



**Future College Pty Ltd.**Registered Training Organisation
ABN. 67 131 678 521

Email: admin@fc.edu.au Tel: 02 8957 5857



### **Privacy Statement & Student Declaration**

I declare that the information I have provided is true and correct. I am aware of the consequences that may arise from providing false, misleading or incomplete information, including the cancellation of my enrolment or the withdrawal of any offer made by Hannay Accreditation.

I understand that my RTO Hannay Accreditation 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 school based apprentice or trainee or VET in Schools student.
- Employer if I am enrolled in training paid by my employer.
- Government departments and agencies and authorised VET related bodies.
- VET regulators.

If you would like us Hannay Accreditation to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx. You must also provide some additional information as noted at the end of this form so that we can apply for a USI on your behalf.

I [NAME]		
authorise "Hannay Accreditation" to apply pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf.		
[STUDENTSIGNATURE]	_[DATE]	