

Contract of Employment

Name of Employee:

Checklist:

All documents must be fully executed and returned to **enable PAV to pay you**

- Employment Contract
- Training Contract
- Employee Personal Details Form
- Tax File Number Declaration
- Super Choice Form
- Induction Checklist
- OHS Induction Checklist
- PPE Form

Parties

Master Plumbers' and Mechanical Services Association of Australia trading as Plumbing Apprenticeships Victoria ("PAV")

AND

The person named in the Schedule (Employee)

Operative Clauses

1. Definitions

In this agreement:

Commencement Date means the commencement date of the Apprenticeship that is provided in the Training Contract;

Employment means the employment of the Employee by PAV under this agreement as an apprentice or trainee;

Host Employer means a client of PAV at which an Employee is placed to perform work;

Month means a calendar month;

PAV EBA means the Plumbing Apprenticeships Victoria and CEPU – Plumbing Division (Vic) Group Training Enterprise Agreement 2019;

Proficient means that you are demonstrating in the workplace a level of routine ability so as to no longer require employment under a supervised training arrangement. Proficiency has a corresponding meaning;

Registered Training Organisation means the organisation engaged by PAV to deliver the nationally accredited training and as initially described on the Training Contract which may be varied by PAV from time to time;

Training Contract Obligations means the obligations provided for in the Training Contract;

Training Plan means the document agreed between the Registered Training Organisation, the Employee and PAV and which details the training required to be undertaken by the Employee to give effect to the Training Contract;

State Training Authority means the Australian Government Department or Authority in the relevant State that is charged with the responsibility for regulating a Training Contract pursuant to the State Training Legislation;

State Training Legislation means the [Education and Training Reform Act Vic 2006](#);

Training Contract means the Apprenticeship Training Contract in the format as prescribed by the Australian Government from time to time and which contains details pertaining to an applicable traineeship or apprenticeship;

Workers Compensation Legislation means the legislation applicable to the Employee in the State in which the Training Contract is registered.

2. Appointment

PAV employs the Employee on the terms in this Agreement and the [PAV EBA](#).

3. Start

The Employment starts on the Commencement Date.

4. Probationary Period

The Employment is subject to a probationary period as prescribed in clause 15 of the PAV EBA.

5. Fixed Term

The Employment terminates on either of the following:

- a) If the apprenticeship is successfully completed. The successful completion of the apprenticeship is subject to:
 - i. PAV in conjunction with PAV's host employer(s) signing off on all elements of your training to ensure you are competent and proficient in performing work as a future registered plumber under the requirements of the [Building Act Vic 1993](#); and
 - ii. PAV and the Registered Training Organisation both signing off that the formal requirements of the apprenticeship training have been completed.

If there are separate dates provided, the latter of the dates is the date on which your apprenticeship is completed in accordance with the requirements of the Training Contract.

- b) If the apprenticeship is not successfully completed and the Employment is terminated by PAV-
 - i. with notice pursuant to clause 22 of the PAV EBA on the date that PAV has applied for a cancellation of the Training Contract or the date on which the State Training Authority has authorized the cancellation, whichever is earlier and is allowed by the State Training Legislation; or
 - ii. without notice if terminated in accordance with clause 22.5 of the PAV EBA.
- c) If the Employment is terminated by the Employee
 - i. on the date of the breach of your obligations under the Training Contract; or
 - ii. any other date set by PAV or the State Training Authority;

the Employee is not entitled to be paid for any period following the breach while the cancellation of the training contract is being processed.

6. Role

The Employee is employed for the period of their apprenticeship as described in the Training Contract or any amendment to that document as mutually agreed between the parties from time to time.

7. General duties

7.1 The Employee must:

- a) perform the duties as directed by PAV and the Host Employer, as consistent with the requirements of the Contract of Training;
- b) comply with the policies and procedures of PAV and the Host Employer;

- c) maintain a driver's licence and vehicle to enable transport to and from work;
- d) attend any meetings, interviews and placements as directed by PAV;
- e) diligently complete the training offered by the Registered Training Organisation; and
- f) provide disclosure to the PAV of any issue arising that may reasonably interfere with the ability to perform the duties to the satisfaction of PAV and the Host Employer. Examples include but are not limited to loss of license, criminal charges and injuries, failure to maintain a Working with Children Check or other issues that may impact upon the ability to perform the essential requirements of the role.

7.2 PAV must:

- a) comply with the Training Contract Obligations;
- b) discharge all its obligations in accordance with the law to the Employee;
- c) use its best efforts to source Host Employers for the Employee; and
- d) comply with its policies and procedures in relation to service standards, access and equity, code of conduct, grievance procedures and all other policies and procedures as publicly displayed on <https://plumber.com.au>

8. Directions

The Employee must comply with:

- a) all lawful directions of PAV and the Host Employer;
- b) the apprentice obligations contained in the PAV EBA;
- c) all procedural manuals and office manuals of PAV and the Host Employer as amended from time to time and published on our website plumber.com.au

9. Time and Attention

During the Employment, the Employee must devote to their duties all of their time and attention during work hours, except leave allowed by this agreement.

10. Hours of Work

The Employee must work the hours as directed by PAV and/or the Host Employer which may change from time to time and which are provided in the PAV EBA.

11. Attendance at Registered Training Organisation & Payment of Fees

- a) The Employee must attend and complete the formal training as directed by PAV and the Registered Training Organisation in accordance with the agreed Training Plan and must:
 - i. use best efforts to complete the requirements of the Registered Training Organisation within the time frames communicated from time to time;
 - ii. notify PAV and their trainer in the event of any absence or difficulty
- b) The Employee must pay all attendance and associated fees to the Registered Training Organisation. PAV will reimburse the Employee in the accordance with clause 19 of the PAV EBA.

12. Attendance at work with a Host Employer

The Employee must attend any reasonable placement offered by PAV with a Host Employer in order to receive on the job training in accordance with the Training Contract and must:

- a) use best efforts to complete the requirements of the work provided by the Host Employer;
- b) notify PAV and their Host Employer in the event of any absence or difficulty.

13. Change of Host Employers

- 13.1 At PAV's absolute discretion, the Employee may be directed to attend a work placement with one or more Host Employers. A change of Host Employer may result in the take home pay provided to the Employee being changed in accordance with the terms of the PAV EBA.
- 13.2 From time to time, PAV may request that the Employee assist PAV in finding a placement with a suitable Host Employer. The Employee agrees to use best efforts to assist PAV in securing a work placement when directed to do so.

14. Return from Host Employer to PAV

From time to time an Employee may be returned to PAV and cease working at a Host Employer. In these circumstances:

- 14.1 the return by the Host Employer does not constitute a termination of employment within the meaning of [Part 3-2](#) of the Fair Work Act 2009; and
- 14.2 PAV will investigate the reasons for the return and follow the provisions of clause 20.4 and 35 of the PAV EBA.

15. Outside Interests

During the Employment, the Employee must not directly or indirectly:

- a) engage in any outside activity (including employment, profession, trade, business);
- b) have an interest in any business or company;
- c) perform plumbing work outside the supervision of a Host Employer placement

which could, in PAV's reasonable opinion, conflict with or impede the ability to conduct the Employee's duties.

16. Indentured Employment

The Employee understands and accepts that the Employment is Indentured with PAV for the duration of the Training Contract, is legally binding in accordance with the Training Contract Obligations and the State Training Legislation. The Employee must not seek work as an apprentice or trainee with any employer who is unwilling to be a Host Employer with PAV. PAV reserves its right to refuse the cancellation of a Training Contract where an Employee seeks to leave the Employment during the Training Contract and refer any dispute to the State Training Authority.

17. Remuneration package

- 17.1 PAV must pay the Employee in accordance with the minimum rate of pay specified in Part C of the PAV EBA. A Wages and Conditions Infosheet is provided to all Employees at Employment and re-issued from time to time.
- 17.2 During the Employment, the Host Employer may change. Where this occurs, PAV must pay the Employee the minimum rate of pay applicable to the work undertaken by the Employee as applicable to the Host Employer, as provided in the PAV EBA, Parts C to F. The rates of pay are decided with reference to form of Agreement the Host Employer has made with its workers.

18. Agreement to Take Leave

- 18.2 Where the Host Employer shuts down the business, part of the business, or a site where the Employee works during all or part of a period in conjunction with the Easter, Christmas/New Year holidays, the Employee may be required to take leave without pay for the balance of the shutdown period for which leave is not accrued.

19. Safety and Care

PAV is the Employer pursuant to the Workers Compensation Legislation. In the event of any incident, injury or near miss, the Employee must notify PAV as soon as reasonably practicable and follow all procedures relating to OHS and Workers Compensation.

20. Amendment

This agreement may only be amended in writing signed by the parties.

21. No waiver

A party may only waive a breach of this agreement in writing signed by that party or its authorized representative.

A waiver is limited to the instance referred to in the written document (or if no instance is referred to in the written document, to past breaches).

22. Notice

Notice may be given to a person in writing, electronically or verbally and supported by the relevant forms required by the State Training Legislation

- a) personally;
- b) by transmitting electronically via email to the last known email address held on file and without bounce back occurring;
- c) by leaving it at the person's address last notified;
- d) by sending it to the person's address last notified.

Notice is deemed to be received by a person:

- a) when left at the person's address;
- b) if sent electronically, when the email has left the PAV servers and has not bounced back;
- c) if sent by mail, on the second Business Day after posting.

23. Hierarchy of Instruments

The Employment is conditional upon a Training Contract remaining on foot. As such, in the event of any dispute or inconsistency, the following shall be the order of precedence:

- 1) The Training Contract; and
- 2) This agreement.

24. Severability

If anything in this agreement is unenforceable, illegal or void then it is severed, and the rest of this agreement remains in force.

25. Governing Law

This agreement is governed by the State in which the Training Contract is registered.

Execution

Executed by PAV by its authorised representative

.....(signature)(name)

I acknowledge that I have received the following and accept this offer of employment:

- Wages and Conditions Information Sheet – PAV EBA
- Information as to where to find of all PAV Policies and Procedures on plumber.com.au and apprentice USB
- Fair Work Information Statement

Executed by the

Employee(signature)(name)

Executed by the parent/guardian (if the apprentice/trainee is under 18 years of age)

.....(signature)(name)

Plumbing Apprenticeships Victoria	Document Control Register: EE001 Employment Agreement Vic 200320
Issue Date : 20 March 2020	Scheduled Review Date : March 2021
Version : 2.1	Document Owner : GTS Manager

Employee Details Form

This form must be completed by:

- All persons commencing employment (new employees); and
- All employees notifying of change in personal information during employment.

NB: It is a condition of employment that employees notify the employer of any changes to information.

Personal Contact Information

Title: Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	
Family Name:	
Given Name(s):	
Preferred Name:	
Residential Address:	
Suburb/Town:	Postcode:
Mobile Telephone Number:	Home Telephone Number:
Email Address:	
Date of Birth: / /	Gender:

Emergency Contact Information

Primary Contact (Full) Name:	
Relationship:	
Mobile Telephone Number:	Home Telephone Number:
Residential Address:	
Suburb/Town:	Postcode:
Language Spoken:	

Secondary Contact (Full) Name:	
Relationship:	
Mobile Telephone Number:	Home Telephone Number:
Language Spoken:	

Bank Details

Account Name:	
Bank Name:	
Account Number:	BSB Number:

Industry Funds

Registered with Incolink:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Number:
Registered with Co-Invest:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Number:

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Tax file number declaration

Information you provide in this declaration will allow your payer to work out how much tax to withhold from payments made to you.

— This is not a TFN application form.
To apply for a TFN, go to ato.gov.au/tfn

! Terms we use

When we say:

- **payer**, we mean the business or individual making payments under the pay as you go (PAYG) withholding system
- **payee**, we mean the individual being paid.

Who should complete this form?

You should complete this form before you start to receive payments from a new payer – for example:

- payments for work and services as an employee, company director or office holder
- payments under return-to-work schemes, labour hire arrangements or other specified payments
- benefit and compensation payments
- superannuation benefits.

! You need to provide all information requested on this form. Providing the wrong information may lead to incorrect amounts of tax being withheld from payments made to you.

- ! You don't need to complete this form if you:
- are a beneficiary wanting to provide your tax file number (TFN) to the trustee of a closely held trust. For more information, visit ato.gov.au/trustsandtfnwithholding
 - are receiving superannuation benefits from a super fund and have been taken to have quoted your TFN to the trustee of the super fund
 - want to claim the seniors and pensioners tax offset by reducing the amount withheld from payments made to you. You should complete a withholding declaration form (NAT 3093)
 - want to claim a zone, overseas forces or invalid and invalid carer tax offset by reducing the amount withheld from payments made to you. You should complete a withholding declaration form (NAT 3093).

> For more information about your entitlement, visit ato.gov.au/taxoffsets



Section A: To be completed by the payee

Question 1

What is your tax file number (TFN)?

You should give your TFN to your employer only after you start work for them. Never give your TFN in a job application or over the internet.

- We and your payer are authorised by the *Taxation Administration Act 1953* to request your TFN. It's not an offence not to quote your TFN. However, quoting your TFN reduces the risk of administrative errors and having extra tax withheld. Your payer is required to withhold the top rate of tax from all payments made to you if you do not provide your TFN or claim an exemption from quoting your TFN.

How do you find your TFN?

You can find your TFN on any of the following:

- your income tax notice of assessment
- correspondence we send you
- a payment summary your payer issues to you.

If you have a tax agent, they may also be able to tell you.

If you still can't find your TFN, you can:

- phone us on **13 28 61** between 8.00am and 6.00pm, Monday to Friday.

If you phone or visit us, we need to know we are talking to the correct person before discussing your tax affairs. We will ask you for details only you, or your authorised representative, would know.

You don't have a TFN

If you don't have a TFN and want to provide a TFN to your payer, you will need to apply for one.

For more information about applying for a TFN, visit ato.gov.au/tfn

You may be able to claim an exemption from quoting your TFN.

Print X in the appropriate box if you:

- have lodged a TFN application form or made an enquiry to obtain your TFN. You now have 28 days to provide your TFN to your payer, who must withhold at the standard rate during this time. After 28 days, if you haven't given your TFN to your payer, they will withhold the top rate of tax from future payments
- are claiming an exemption from quoting a TFN because you are under 18 years of age and do not earn enough to pay tax, or you are an applicant or recipient of certain pensions, benefits or allowances from the:
 - Department of Human Services – however, you will need to quote your TFN if you receive a Newstart, Youth or sickness allowance, or an Austudy or parenting payment
 - Department of Veterans' Affairs – a service pension under the *Veterans' Entitlement Act 1986*
 - Military Rehabilitation and Compensation Commission.

Providing your TFN to your super fund

Your payer must give your TFN to the super fund they pay your contributions to. If your super fund doesn't have your TFN, you can provide it to them separately. This ensures:

- your super fund can accept all types of contributions to your accounts
- additional tax will not be imposed on contributions as a result of failing to provide your TFN
- you can trace different super accounts in your name.

- For more information about providing your TFN to your super fund, visit ato.gov.au/superelegibility

Question 2–6

Complete with your personal information.

Question 7

On what basis are you paid?

Check with your payer if you're not sure.

Question 8

Are you an Australian resident for tax purposes or a working holiday maker?

Generally, we consider you to be an Australian resident for tax purposes if you:

- have always lived in Australia or you have come to Australia and now live here permanently
- are an overseas student doing a course that takes more than six months to complete
- migrate to Australia and intend to reside here permanently.

If you go overseas temporarily and don't set up a permanent home in another country, you may continue to be treated as an Australian resident for tax purposes.

If you are in Australia on a working holiday visa (subclass 417) or a work and holiday visa (subclass 462) you must place an X in the working holiday maker box. Special rates of tax apply for working holiday makers.

- For more information about working holiday makers, visit ato.gov.au/whm

If you're not an Australian resident for tax purposes or a working holiday maker, place an X in the foreign resident box, unless you are in receipt of an Australian Government pension or allowance.

Temporary residents can claim super when leaving Australia, if all requirements are met. For more information, visit ato.gov.au/departaustralia

— Foreign resident tax rates are different

A higher rate of tax applies to a foreign resident's taxable income and foreign residents are not entitled to a tax-free threshold nor can they claim tax offsets to reduce withholding, unless you are in receipt of an Australian Government pension or allowance.

- To check your Australian residency status for tax purposes or for more information, visit ato.gov.au/residency

Question 9

Do you want to claim the tax-free threshold from this payer?

The tax-free threshold is the amount of income you can earn each financial year that is not taxed. By claiming the threshold, you reduce the amount of tax that is withheld from your pay during the year.

Answer **yes** if you want to claim the tax-free threshold, you are an Australian resident for tax purposes, and one of the following applies:

- you are not currently claiming the tax-free threshold from another payer
- you are currently claiming the tax-free threshold from another payer and your total income from all sources will be less than the tax-free threshold.

Answer **yes** if you are a foreign resident in receipt of an Australian Government pension or allowance.

Answer **no** if none of the above applies or you are a working holiday maker.

- ! If you receive any taxable government payments or allowances, such as Newstart, Youth Allowance or Austudy payment, you are likely to be already claiming the tax-free threshold from that payment.
- > For more information about the current tax-free threshold, which payer you should claim it from, or how to vary your withholding rate, visit ato.gov.au/taxfreethreshold

Question 10

Do you have a Higher Education Loan Program (HELP), VET Student Loan (VSL), Financial Supplement (FS), Student Start-up Loan (SSL) or Trade Support Loan (TSL) debt?

Answer **yes** if you have a HELP, VSL, FS, SSL or TSL debt.

Answer **no** if you do not have a HELP, VSL, FS, SSL or TSL debt, or you have repaid your debt in full.

- ! You have a HELP debt if either:
 - the Australian Government lent you money under HECS-HELP, FEE-HELP, OS-HELP, VET FEE-HELP, VET Student loans prior to 1 July 2019 or SA-HELP.
 - you have a debt from the previous Higher Education Contribution Scheme (HECS).
- You have a SSL debt if you have an ABSTUDY SSL debt.
- You have a separate VSL debt that is not part of your HELP debt if you incurred it from 1 July 2019.
- > For information about repaying your HELP, VSL, FS, SSL or TSL debt, visit ato.gov.au/getloaninfo

Have you repaid your HELP, VSL, FS, SSL or TSL debt?

When you have repaid your HELP, VSL, FS, SSL or TSL debt, you need to complete a *Withholding declaration* (NAT 3093) notifying your payer of the change in your circumstances.

! Sign and date the declaration

Make sure you have answered all the questions in section A, then sign and date the declaration. Give your completed declaration to your payer to complete section B.

Section B: To be completed by the payer

- ! Important information for payers – see the reverse side of the form.

> Lodge online

Payers can lodge TFN declaration reports online if you have software that complies with our specifications.

For more information about lodging the TFN declaration report online, visit ato.gov.au/lodgetfndeclaration

More information

Internet

- For general information about TFNs, tax and super in Australia, including how to deal with us online, visit our website at ato.gov.au
- For information about applying for a TFN on the web, visit our website at ato.gov.au/tfn
- For information about your super, visit our website at ato.gov.au/checkyoursuper

Useful products

In addition to this TFN declaration, you may also need to complete and give your payer the following forms which you can download from our website at ato.gov.au:

- *Medicare levy variation declaration* (NAT 0929), if you qualify for a reduced rate of Medicare levy or are liable for the Medicare levy surcharge. You can vary the amount your payer withholds from your payments.
- *Standard choice form* (NAT 13080) to choose a super fund for your employer to pay super contributions to. You can find information about your current super accounts and transfer any unnecessary super accounts through myGov after you have linked to the ATO. Temporary residents should visit ato.gov.au/departaustralia for more information about super.

Other forms and publications are also available from our website at ato.gov.au/onlineordering or by phoning **1300 720 092**.

Phone

- Payee – for more information, phone **13 28 61** between 8.00am and 6.00pm, Monday to Friday. If you want to vary your rate of withholding, phone **1300 360 221** between 8.00am and 6.00pm, Monday to Friday.
- Payer – for more information, phone **13 28 66** between 8.00am and 6.00pm, Monday to Friday.

If you phone, we need to know we're talking to the right person before we can discuss your tax affairs. We'll ask for details only you, or someone you've authorised, would know. An authorised contact is someone you've previously told us can act on your behalf.

If you do not speak English well and need help from the ATO, phone the Translating and Interpreting Service on **13 14 50**.

If you are deaf, or have a hearing or speech impairment, phone the ATO through the National Relay Service (NRS) on the numbers listed below:

- TTY users – phone **13 36 77** and ask for the ATO number you need (if you are calling from overseas, phone **+61 7 3815 7799**)
- Speak and Listen (speech-to-speech relay) users – phone **1300 555 727** and ask for the ATO number you need (if you are calling from overseas, phone **+61 7 3815 8000**)
- Internet relay users – connect to the NRS on relayservice.gov.au and ask for the ATO number you need.

If you would like further information about the National Relay Service, phone **1800 555 660** or email helpdesk@relayservice.com.au

Privacy of information

Taxation law authorises the ATO to collect information and to disclose it to other government agencies. For information about your privacy, go to ato.gov.au/privacy

Our commitment to you

We are committed to providing you with accurate, consistent and clear information to help you understand your rights and entitlements and meet your obligations.

If you follow our information in this publication and it turns out to be incorrect, or it is misleading and you make a mistake as a result, we must still apply the law correctly. If that means you owe us money, we must ask you to pay it but we will not charge you a penalty. Also, if you acted reasonably and in good faith we will not charge you interest.

If you make an honest mistake in trying to follow our information in this publication and you owe us money as a result, we will not charge you a penalty. However, we will ask you to pay the money, and we may also charge you interest. If correcting the mistake means we owe you money, we will pay it to you. We will also pay you any interest you are entitled to.

If you feel that this publication does not fully cover your circumstances, or you are unsure how it applies to you, you can seek further assistance from us.

We regularly revise our publications to take account of any changes to the law, so make sure that you have the latest information. If you are unsure, you can check for more recent information on our website at ato.gov.au or contact us.

This publication was current at **June 2019**.

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Canberra
June 2019

DE-6078



Tax file number declaration

This declaration is NOT an application for a tax file number.

- Use a black or blue pen and print clearly in BLOCK LETTERS.
- Print X in the appropriate boxes.
- Read all the instructions including the privacy statement before you complete this declaration.

Section A: To be completed by the PAYEE

1 What is your tax file number (TFN)?

For more information, see question 1 on page 2 of the instructions.

OR I have made a separate application/enquiry to the ATO for a new or existing TFN.

OR I am claiming an exemption because I am under 18 years of age and do not earn enough to pay tax.

OR I am claiming an exemption because I am in receipt of a pension, benefit or allowance.

2 What is your name? Title: Mr Mrs Miss Ms

Surname or family name

First given name

Other given names

3 What is your home address in Australia?

Suburb/town/locality

State/territory Postcode

4 If you have changed your name since you last dealt with the ATO, provide your previous family name.

5 What is your primary e-mail address?

6 What is your date of birth? / /

7 On what basis are you paid? (select only one)
Full-time employment Part-time employment Labour hire Superannuation or annuity income stream Casual employment

8 Are you: (select only one)
An Australian resident for tax purposes A foreign resident for tax purposes OR A working holiday maker

9 Do you want to claim the tax-free threshold from this payer?
Only claim the tax-free threshold from one payer at a time, unless your total income from all sources for the financial year will be less than the tax-free threshold.
Yes No Answer no here if you are a foreign resident or working holiday maker, except if you are a foreign resident in receipt of an Australian Government pension or allowance.

10 Do you have a Higher Education Loan Program (HELP), VET Student Loan (VSL), Financial Supplement (FS), Student Start-up Loan (SSL) or Trade Support Loan (TSL) debt?
Yes Your payer will withhold additional amounts to cover any compulsory repayment that may be raised on your notice of assessment. No

DECLARATION by payee: I declare that the information I have given is true and correct.

Signature Date / /

There are penalties for deliberately making a false or misleading statement.

Once section A is completed and signed, give it to your payer to complete section B.

Section B: To be completed by the PAYER (if you are not lodging online)

1 What is your Australian business number (ABN) or withholding payer number?

Branch number (if applicable)

2 If you don't have an ABN or withholding payer number, have you applied for one? Yes No

3 What is your legal name or registered business name (or your individual name if not in business)?

4 What is your business address?

Suburb/town/locality

State/territory Postcode

5 What is your primary e-mail address?

6 Who is your contact person?

Business phone number

7 If you no longer make payments to this payee, print X in this box.

DECLARATION by payer: I declare that the information I have given is true and correct.

Signature of payer Date / /

There are penalties for deliberately making a false or misleading statement.

Return the completed original ATO copy to:
Australian Taxation Office
PO Box 9004
PENRITH NSW 2740

IMPORTANT
See next page for:
■ payer obligations
■ lodging online.



30920619

Payer information

The following information will help you comply with your pay as you go (PAYG) withholding obligations.

— Is your employee entitled to work in Australia?

It is a criminal offence to knowingly or recklessly allow someone to work, or to refer someone for work, where that person is from overseas and is either in Australia illegally or is working in breach of their visa conditions.

People or companies convicted of these offences may face fines and/or imprisonment. To avoid penalties, ensure your prospective employee has a valid visa to work in Australia before you employ them. For more information and to check a visa holder's status online, visit the Department of Home Affairs website at homeaffairs.gov.au

Is your payee working under a working holiday visa (subclass 417) or a work and holiday visa (subclass 462)?

Employers of workers under these two types of visa need to register with the ATO, see ato.gov.au/whmreg

For the tax table "working holiday maker" visit our website at ato.gov.au/taxtables

Payer obligations

If you withhold amounts from payments, or are likely to withhold amounts, the payee may give you this form with section A completed. A TFN declaration applies to payments made after the declaration is provided to you. The information provided on this form is used to determine the amount of tax to be withheld from payments based on the PAYG withholding tax tables we publish. If the payee gives you another declaration, it overrides any previous declarations.

Has your payee advised you that they have applied for a TFN, or enquired about their existing TFN?

Where the payee indicates at question 1 on this form that they have applied for an individual TFN, or enquired about their existing TFN, they have 28 days to give you their TFN. **You must withhold tax for 28 days at the standard rate according to the PAYG withholding tax tables.** After 28 days, if the payee has not given you their TFN, you must then withhold the top rate of tax from future payments, unless we tell you not to.

If your payee has not given you a completed form you must:

- notify us within 14 days of the start of the withholding obligation by completing as much of the payee section of the form as you can. Print 'PAYER' in the payee declaration and lodge the form – see 'Lodging the form'.
- withhold the top rate of tax from any payment to that payee.

➤ For a full list of tax tables, visit our website at ato.gov.au/taxtables

Lodging the form

You need to lodge TFN declarations with us within 14 days after the form is either signed by the payee or completed by you (if not provided by the payee). **You need to retain a copy of the form for your records.** For information about storage and disposal, see below.

You may lodge the information:

- **online** – lodge your TFN declaration reports using software that complies with our specifications. There is no need to complete section B of each form as the payer information is supplied by your software.
- **by paper** – complete section B and send the original to us within 14 days.

➤ For more information about lodging your TFN declaration report online, visit our website at ato.gov.au/lodgetfndeclaration

Provision of payee's TFN to the payee's super fund

If you make a super contribution for your payee, you need to give your payee's TFN to their super fund on the day of contribution, or if the payee has not yet quoted their TFN, within 14 days of receiving this form from your payee.

Storing and disposing of TFN declarations

The TFN Rule issued under the *Privacy Act 1988* requires a TFN recipient to use secure methods when storing and disposing of TFN information. You may store a paper copy of the signed form or electronic files of scanned forms. Scanned forms must be clear and not altered in any way.

If a payee:

- submits a new *TFN declaration* (NAT 3092), you must retain a copy of the earlier form for the current and following financial year.
- has not received payments from you for 12 months, you must retain a copy of the last completed form for the current and following financial year.

— Penalties

You may incur a penalty if you do not:

- lodge TFN declarations with us
- keep a copy of completed TFN declarations for your records
- provide the payee's TFN to their super fund where the payee quoted their TFN to you.

Superannuation (super) standard choice form

WHEN TO USE THE FORM

Employers

Use this form to offer eligible employees their choice of super fund. You must fill in the details of your nominated super fund, also known as your default fund, before giving the form to employees.

Give this form to an employee when:

- you hire a new employee who is eligible to choose a super fund
- an existing eligible employee asks you for it
- you can no longer contribute to an employee's nominated super fund or it is no longer a complying fund
- you change your employer-nominated super fund and need to advise employees affected by this change.

Employees

Use this form to advise an employer of your choice of super fund.

You must provide the required information so your employer can make contributions to your nominated super fund.

ABOUT THE FORM

The *Standard choice form* has three sections:

- section A, which the employee completes by providing details of their choice of super fund, together with supporting documents.
- section B, which the employer completes by providing details of their nominated super fund (before they give the form to an employee).
- section C, which the employer completes to document the choice process for an employee.

Employers must retain the returned form as their record of the choice process. Completed forms must be retained for five years.

! Superannuation reform changes – SuperStream

SuperStream is a new standard for the way employers pay contributions and send information to super funds. This form collects information that employers will need when using SuperStream.

SECTION A: EMPLOYEE TO COMPLETE

If you choose your own super fund you will need to obtain current information from your fund to complete items 3 or 4.

Item 3

Nominating your APRA fund or RSA

Complete this item if you are nominating your own APRA fund (fund regulated by the Australian Prudential Regulation Authority) or a retirement savings account (RSA).

You must include the unique superannuation identifier (USI) provided by your fund.

You must attach a letter from the fund trustee or RSA provider confirming that the fund or RSA:

- is a complying fund or RSA, and
- will accept payments from your employer.

This letter may contain other information to help your employer make super contributions using the SuperStream standard.

Item 4

Nominating your self-managed super fund (SMSF)

Complete this item if you are nominating a self-managed super fund (SMSF).

You must include your SMSF's ABN, bank account details and electronic service address (ESA) (so the fund can receive electronic messages and payments from your employer using SuperStream).

FIND OUT MORE

ato.gov.au/SMSFSuperStream – for information about how SuperStream applies to SMSFs

If you are using an SMSF message service provider they will provide you with an electronic service address alias to include as the ESA on the form.

You must attach copies of the following documents to support your SMSF choice:

- a document confirming that the fund is regulated – this can be printed from superfundlookup.gov.au
- a letter from the trustee of the SMSF confirming that the fund will accept payments from your employer – if you are the trustee, or a director of the corporate trustee, you can confirm acceptance by placing an 'X' in the relevant box on the form.

Things you should know

- Your employer is not liable for the performance of the super fund you or they nominate
- You should not seek financial advice from your employer unless they are licensed to provide it
- Your employer is only required to accept one choice of fund from you in a 12-month period; however, they may accept more
- Your employer has two months after you return this form to them to action your request
- Any money you have in existing funds will remain there unless you arrange to transfer it (roll it over) to another fund – check the impact of any exit fees you will incur or benefits you may lose before leaving the fund (your employer cannot do this for you)
- If you quote your TFN to your employer for super purposes, they must provide it to the super fund

You may have lost super

- It is important to keep track of your super – if you've ever changed your name, address or job, you may have lost track of some of your super
- Having several super accounts could mean that fees and charges are reducing your overall super investment
- You can register for our online services and use SuperSeeker to check all your super accounts, find any lost or ATO-held super and transfer your super into one account using a simple online form

FIND OUT MORE

- ato.gov.au/superseeker
- ato.gov.au/super – for information about super or choosing a super fund
- moneysmart.gov.au (on the Australian Securities & Investment Commission [ASIC] website) – search for 'choose super fund' for tips on how to choose a fund

SECTIONS B & C: EMPLOYER TO COMPLETE

If an employee nominates their own super fund, they will provide information at section A that will assist you to prepare for, and make contributions to super funds using SuperStream.

FIND OUT MORE

ato.gov.au/simplifyingSuperStream – for more information on SuperStream.

Section B

Complete section B before giving this form to your employee. The super fund you nominate must be authorised to offer a MySuper product. If you need to confirm your MySuper arrangements contact your default super fund.

Sign and date this section on the day you give the form to your employee.

Section C

Complete section C after your employee returns this form to you. Record the date you accept your employee's choice of fund and the date that you act on the choice. Retain the form with your records. Do not send the form to the ATO or to super funds.

FIND OUT MORE

- ato.gov.au/employersuper – for more information on super, offering an employee a choice of fund or paying super contributions
- apra.gov.au/RSE – to find a super fund authorised to offer a MySuper product

Things you should know

- The quarterly* due dates for super contributions are:
 - 28 October
 - 28 January
 - 28 April
 - 28 July
- If you have not received an employee's completed form and a super contribution is due, you must make the payment to your nominated fund by the due date
- In the two months after you receive an employee's completed form, you can pay their super contributions to either the fund you have nominated or the fund they have nominated
- After the two-month period, you must make contribution payments to the fund the employee has nominated
- You do not have to action an employee's fund nomination if they have nominated a fund in the previous 12 months; however, you may choose to action their request

FIND OUT MORE

- phone **13 10 20** between 8am and 6pm, Monday to Friday, to speak to a tax officer
- phone our publications ordering service on **1300 720 092** for copies of our publications
- write to us at
Australian Tax Office
PO Box 3578
Albury NSW 2640

HELP

- If you do not speak English well and want to talk to a tax officer, phone the Translating and Interpreting Service on **13 14 50** for help with your call.
- If you have a hearing or speech impairment and have access to appropriate TTY or modem equipment, phone **13 36 77**. If you do not have access to TTY or modem equipment, phone the Speech to Speech Relay Service on **1300 555 727**.

* You can pay contributions more regularly than quarterly. For example, some employers pay fortnightly or monthly based on employee workplace agreements or arrangements with super funds.

OUR COMMITMENT TO YOU

We are committed to providing you with accurate, consistent and clear information to help you understand your rights and entitlements and meet your obligations.

If you follow our information in this publication and it turns out to be incorrect, or it is misleading and you make a mistake as a result, we must still apply the law correctly. If that means you owe us money, we must ask you to pay it but we will not charge you a penalty. Also, if you acted reasonably and in good faith we will not charge you interest.

If you make an honest mistake in trying to follow our information in this publication and you owe us money as a result, we will not charge you a penalty. However, we will ask you to pay the money, and we may also charge you interest. If correcting the mistake means we owe you money, we will pay it to you. We will also pay you any interest you are entitled to.

If you feel that this publication does not fully cover your circumstances, or you are unsure how it applies to you, you can seek further assistance from us.

We regularly revise our publications to take account of any changes to the law, so make sure that you have the latest information. If you are unsure, you can check for more recent information on our website at ato.gov.au or contact us.

This publication was current at **August 2014**.

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COMMONWEALTH OF AUSTRALIA, 2014**

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PUBLISHED BY

Australian Taxation Office
Canberra
August 2014

JS 31287



For use by employers when offering employees a choice of fund and by employees to advise their employer of their chosen fund.

Section A: Employee to complete

1 Choice of superannuation (super) fund

I request that all my future super contributions be paid to: (place an in one of the boxes below)

The APRA fund or retirement savings account (RSA) I nominate Complete items 2, 3 and 5

The self-managed super fund (SMSF) I nominate Complete items 2, 4 and 5

The super fund nominated by my employer (in section B) Complete items 2 and 5

2 Your details

Name

Employee identification number (if applicable)

Tax file number (TFN)

! You do not have to quote your TFN but if you do not provide it, your contributions may be taxed at a higher rate. Your TFN also helps you keep track of your super and allows you to make personal contributions to your fund.

3 Nominating your APRA fund or RSA

You will need current details from your APRA regulated fund or RSA to complete this item.

Fund ABN

Fund name

Fund address

Suburb/town State/territory Postcode

Fund phone

Unique superannuation identifier (USI)

Your account name (if applicable)

Your member number (if applicable)

Required documentation

You need to attach a letter from your fund stating that they are a complying fund and that they will accept contributions from your employer. Correct information about your super fund is needed for your employer to pay super contributions.

4 Nominating your self-managed super fund (SMSF)

You will need current details from your SMSF trustee to complete this item.

Fund ABN

Fund name

Fund address

Suburb/town

State/territory

Postcode

Fund phone

Fund electronic service address (ESA)

Fund bank account

BSB code (please include all six numbers)

Account number

Required documentation

You need to attach a document confirming the SMSF is an ATO regulated super fund. You can locate and print a copy of the compliance status for your SMSF by searching using the ABN or fund name in the Super Fund Lookup service at <http://superfundlookup.gov.au/>

If you are the trustee, or a director of the corporate trustee you can confirm that your SMSF will accept contributions from your employer by making the following declaration (place an 'X' in the box below):

I am the trustee, or a director of the corporate trustee of the SMSF and I declare that the SMSF will accept contributions from my employer.

If you are not the trustee, or a director of the corporate trustee of the SMSF, then you must attach a letter from the trustee confirming that the fund will accept contributions from your employer.

5 Signature and date

If you have nominated your own fund in Item 3 or 4, check that you have attached the required documentation and then place an 'X' in the box below.

I have attached the relevant documentation.

Signature

Date

Day

Month

Year

 / /

Return the completed form to your employer as soon as possible.

Section B: Employer to complete

You must complete this section before giving the form to an employee who is eligible to choose the super fund into which you pay their super contributions.

! Sign and date the form when you give it to your employee.

6 Your details

Business name

ABN

Signature

Date

Day / Month / Year
 / /

7 Your nominated super fund

If the employee does not choose their own super fund, you are required to pay super contributions on their behalf to the fund that you have nominated below:

Super fund name

Unique superannuation identifier (USI)

Phone (for the product disclosure statement for this fund)

Super fund website address

Section C: Employer to complete

! Complete this section when your employee returns the form to you with section A completed.

8 Record of choice acceptance

In the two months after you receive the form from your employee you can make super contributions to either the fund you nominated or the fund the employee nominated. After the two-month period you must make payments to the fund chosen by the employee.

! If you don't meet your obligations, including paying your employee superannuation contributions to the correct fund, you may face penalties.

Date employee's choice is received / /

Date you act on your employee's choice / /

! Employers must keep the completed form for their own record for five years. **Do not send it to the Australian Taxation Office, the employer's nominated fund or the employee's nominated fund.**

PRIVACY STATEMENT

The ATO does not collect this information; we provide this form as a means for employees to identify and provide necessary information to their employer. An employer is authorised to collect an employee's TFN under the *Superannuation Industry (Supervision) Act 1993*. It is not an offence for an employee not to quote their TFN. However, quoting a TFN reduces the risk of administrative errors and if the employee does not quote their TFN their contributions may be taxed at a higher rate. An employee can get more details regarding their privacy rights by contacting their superannuation fund.

Authority to Disclose Information

To: _____ (Registered Training Organisation)

From: _____ (Apprentice Name)

of: _____ (Apprentice Address)

Please accept this letter as authorisation for you (the Registered Training Organisation) to provide any information regarding my enrolment, fees, payments, arrears, results, progression, or any other matters relating to my enrolment with your Registered Training Organisation to my employer, the Master Plumbers and Mechanical Services Association of Australia trading as Plumbing Apprenticeships Victoria, or to any of its staff.

Signed _____

Date: _____

Authority to Disclose Information

To: _____ **CEPUTEC** _____ (Registered Training Organisation)

From: _____ (Apprentice Name)

of: _____ (Apprentice Address)

Please accept this letter as authorisation for you (the Registered Training Organisation) to provide any information regarding my enrolment, fees, payments, arrears, results, progression, or any other matters relating to my enrolment with your Registered Training Organisation to my employer, the Master Plumbers and Mechanical Services Association of Australia trading as Plumbing Apprenticeships Victoria, or to any of its staff.

Signed _____

Date: _____

Plumbing Apprenticeships Victoria	Document Control Register EE010 – RTO Authority to Disclose Information_Vic 31082020
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Version : 2.1	Document Owner : GTS Manager

Enrolment Form - Vic

RTO 4612 / ABN 21 078 869 673 / www.ceputec.edu.au

Enrolment course / qualification / unit	
Course dates	

Surname/ Last name		Given / First names	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Date of birth (DD/MM/YYYY)	

Unique Student Identifier (USI):

From 1 January 2015, Ceputec 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/>.

There are USI computers available for your use in the PICAC student lunch room. Please ask your trainer for more information.

Unique Student Identifier (USI) For example: 3AW88YH9U5 (10 letters and numbers)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Employer details (if applicable)

Employer/Company name			
Address			
Contact name		Phone	

Contact Details

Mobile		Work Phone	
Home phone	()	Preferred contact method	<input type="checkbox"/> Email <input type="checkbox"/> Mobile <input type="checkbox"/> Mail/post
Email			

Emergency details

Emergency contact name and relationship		Emergency contact number	
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Address details

What is the physical address of your usual residence? (mandatory)

(Please provide the physical address (street number and name - not post office box) where you usually reside rather than any temporary address at which you reside for training, work or other purposes before returning to your home.

If you are from a rural area use the address from your state's or territory's 'rural property addressing' or 'numbering' system as your residential street address.

Building/property name		Flat/unit No		Street / lot No	
Street name			Suburb, locality or town		
State/territory			Postcode		

Postal address (if different from above)

Building/property name		Flat/ unit No		Street / lot No	
Street name			Suburb, locality or town		
State/territory			Postcode		

Enrolment Form - Vic

RTO 4612 / ABN 21 078 869 673 / www.ceputec.edu.au

Cultural diversity

1. Are you of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> No	<input type="checkbox"/> Yes, Aboriginal
	<input type="checkbox"/> Yes, both	<input type="checkbox"/> Yes, Torres Strait Islander
2. In which country were you born?	<input type="checkbox"/> Australia	
	<input type="checkbox"/> Other, please specify:	

Schooling and employment status

3. Are you still attending secondary school or senior secondary education?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. What is your highest COMPLETED school level?	<input type="checkbox"/> Year 12 or equivalent	<input type="checkbox"/> Year 9 or equivalent
	<input type="checkbox"/> Year 11 or equivalent	<input type="checkbox"/> Year 8 or below
	<input type="checkbox"/> Year 10 or equivalent	<input type="checkbox"/> Never attended school
5. Of the following categories, which BEST describes your current employment status? (Tick ONE box only)	<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Unemployed – seeking full-time work
	<input type="checkbox"/> Part-time employee	<input type="checkbox"/> Unemployed – seeking part-time work
	<input type="checkbox"/> Self-employed – employing others	<input type="checkbox"/> Not employed – not seeking work
	<input type="checkbox"/> Self-employed – not employing others	
	<input type="checkbox"/> Employed – unpaid worker in a family business	

Language and Disability

6. Do you speak a language other than English at home? (If more than one language please indicate the language that is spoken most often)	<input type="checkbox"/> No, English only (Go to question 7)	<input type="checkbox"/> Yes, please specify _____
7. Do you consider yourself to have a disability, Impairment or long-term condition?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No (go to question 9)
8. If yes, please indicate the area/s of disability, impairment or long-term condition (you may indicate more than one area)	<input type="checkbox"/> Acquired Brain Impairment	<input type="checkbox"/> Mental illness
	<input type="checkbox"/> Hearing/Deaf	<input type="checkbox"/> Physical
	<input type="checkbox"/> Intellectual	<input type="checkbox"/> Vision
	<input type="checkbox"/> Learning	<input type="checkbox"/> Other
	<input type="checkbox"/> Medical Condition	_____

Qualifications achieved and purpose of study

9. Have you SUCCESSFULLY completed any of the following qualifications?	<input type="checkbox"/> Yes	<input type="checkbox"/> No (go to question 10)
If yes, please tick ANY of the applicable boxes	<input type="checkbox"/> Bachelor Degree or Higher	<input type="checkbox"/>
	<input type="checkbox"/> Advanced Diploma or Associate Degree	<input type="checkbox"/>
	<input type="checkbox"/> Diploma (or Associate Diploma)	<input type="checkbox"/>
	<input type="checkbox"/> Certificate IV (Advanced Certificate/Technician)	<input type="checkbox"/>
	<input type="checkbox"/> Certificate III (or Trade Certificate)	<input type="checkbox"/>
	<input type="checkbox"/> Certificate II	<input type="checkbox"/>
	<input type="checkbox"/> Certificate I	<input type="checkbox"/>
	<input type="checkbox"/> Certificate/s other than above	<input type="checkbox"/>

Enrolment Form - Vic

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<p>10. Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship? (Tick ONE box only)</p>	<input type="checkbox"/> To get a job <input type="checkbox"/> To develop my existing business <input type="checkbox"/> To start my own business <input type="checkbox"/> To try for a different career <input type="checkbox"/> For personal interest or self-development <input type="checkbox"/> To get a better job or promotion	<input type="checkbox"/> It was a requirement of my job <input type="checkbox"/> I wanted extra skills for my job <input type="checkbox"/> To get into another course of study <input type="checkbox"/> Other reason
<p>Victorian Student Number (VSN): To be completed by all students aged up to 24 years: If you have previously undertaken any education in Victoria and you aged up to 24 years you will have been allocated a Victorian Student Number (VSN). If you know it please enter the number in the boxes provided. If you don't know it please provide the information below. Students aged under 24 years enrolling for the first time will get a new VSN.</p>		
<p>11. Victorian Student Number (VSN)</p>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
<p>12. If you entered your VSN above, you do not need to answer these questions.</p> <p>Have you attended any Victorian school since 2009 or done any training with a vocational education and training (VET) registered training organisation or an Adult and Community Education provider in Victoria since 2011?</p>	<input type="checkbox"/> No – I have not attended a Victorian school since 2009 or a TAFE or other VET training provider since the beginning of 2011 <input type="checkbox"/> Yes – I have attended a Victorian school since 2009 Most recent Victorian school attended: _____ <input type="checkbox"/> Yes – I have participated in training at a TAFE or other training organisation since the beginning of 2011. List the most recent training organisations with which you have participated in training in Victoria since 2011 (list up to 3 training organisations) 1. _____ 2. _____ 3. _____	
<p>If your Employer requires a copy of your results /certificates: I consent to the release of results/certificates by Ceputec</p>		
<p>13. I give consent to provide this information to the employer listed on page 1 of this form.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Enrolment Form - Vic

RTO 4612 / ABN 21 078 869 673 / www.ceputec.edu.au

Student Enrolment Privacy Statement

Under the *Data Provision Requirements 2012*, Ceputec is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by Ceputec for statistical, regulatory and research purposes. Ceputec may disclose your personal information for these purposes to third parties, including:

- School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Employer – if you are enrolled in training paid by your employer;
- Commonwealth and State or Territory government departments and authorised agencies;
- NCVER;
- Organisations conducting student surveys; and
- Researchers.

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- Issuing statements of attainment or qualification, and populating authenticated VET transcripts;
- facilitating statistics and research relating to education, including surveys;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including programme administration, regulation, monitoring and evaluation.

You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. You may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the *Privacy Act 1988* (Cth), the VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

Sharing Information with other training providers: The personal information provided in this Enrolment Form and any subsequent amendments to it may be shared between Master Plumbers Australia Limited (ABN 47 062 235 063), Service Trades College (RTO) Pty Ltd (ABN 50109049096), Fire Industry Training Pty Ltd (ABN 15 116 739 916), Plumbing Industry Climate Action Centre (PICAC) Ltd (ABN 11 146 359 104), and the Air Conditioning and Mechanical Contractors' Association of Victoria Limited (ABN 87 005 021 670) for the purpose of enrolling you in training courses conducted by any of these entities.

Student Declaration and Consent

In signing this form, I declare that (please tick each box):

- I declare that the information I have provided to the best of my knowledge is true and correct.
- I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.
- Tuition fees are payable at the commencement of the course. Fees must be paid within the period stated on the invoice. See "Fees" Policy at Ceputec.edu.au for details.
- All courses are subject to minimum class numbers.
- I authorise Ceputec to verify my Unique Student Identifier.
- I will inform Ceputec when any of my contact details change including email and mobile details;
- I have been provided with appropriate and sufficient information to make an informed decision about my enrolment in this course, including information about:
 - Minimum entrance requirements;
 - Course structure, contents, duration, modes of study and assessment methods;
 - Details of any arrangements with other providers (if any);
 - Fees and charges associated with my course, including tuition fees, materials fees, refunds and cancellations;
- I have received the Learners Handbook (or accessed it on the Ceputec website), and acknowledge and agree to its details about:
 - Complaints and appeals;
 - Enrolment, orientation and support, Fees, charges and enrolment status changes;
 - Health, safety and rights, Access and equity;
 - Misconduct, attendance and discipline;
 - Credit transfer and recognition of prior learning, Qualifications and statements of attainment
 - Student support and welfare services.

Learner
signature
Parent or
Guardian
Signature*

Date:

/ /

Date:

/ /

(*Parental/guardian consent is required for all students under the age of 18)

Office use: checked and entered into VETtrak			
Initials		Date	