Consent to the use and disclosure of personal information form

l
(first, middle and last name)
Of
(current residential address)
With date of birth:

Understand and agree that, under the Date Provision Requirements of 2012, the Aboriginal Health & Medical Research Council (AH&MRC) of NSWs Registered Training Organisation (RTO no. 91020), is required to collect personal information from myself or a parent / guardian, such as my name, Unique Student Identifier (USI), date of birth, contact details, training outcomes and performance, sensitive personal information (including my ethnicity or health information) and other enrolment and training activity-related information (together with personal information) and disclose said personal information to the National Centre for Vocational Education Research LIT (NCVER).

My personal information, including personal information contained in my enrolment forms and training activity data, may be used or disclosed by the AH&MRC RTO for statistical, regulatory and research purposes. The AH&MRC RTO may disclose my personal information for the following purposes to third parties:

- School, if I am a secondary student undertaking Vocational Education and Training (VET), including a school-based apprenticeship or traineeship
- Employer if I am enrolled in paid training by my employer
- Commonwealth and State or Territory Government Departments and authorised agencies, including the NSW Department of Industry
- NCVER
- · Organisations conducting student surveys
- Researchers

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

- Issuing a VET Statement of Attainment or VET 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
- Administering VET, including program administration, regulation, monitoring and evaluation.



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

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

The Department may disclose my personal information to other Australian Government agencies, including those located in States and Territories outside New South Wales.

The above Government agencies may use my personal information for any purpose relating to the exercise of their Government functions, including but not limited to the evaluation and assessment of my training, the determination of my eligibility to receive subsidised training or for any fee exemptions for concessions. My personal information may also be disclosed to other third parties if required by law.

I also acknowledge and agree that the Department may contact me by telephone, email or post during or after I have ceased subsidised training with the AH&MRC RTO for the purposes of evaluating and assessing my subsidised training.

I declare that the information I have provided is, to the best of my knowledge, true and correct.

I consent to the collection, use and disclosure of my personal information in the manner outlined in this form.

Print full name:	
Signature:	Date:
Note if under 18 years of age at the time of giving consent, then the cons	sent of their guardian is required.
Print full name of guardian:	
Signature of guardian:	Date:

