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**JKR Training For Business Pty Ltd**

**Transit Systems Student Enrolment Form**

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| **Course Enrolment Details** | | | | | | | | |
| **Qualification (Code and Title)** | **TLI31222 Certificate III Driving Operations** | | | | | | | |
| **Employer** | **Transit Systems** | | | | | | | |
| **Employee Number** |  | **Depot** | |  | | | | |
| **Personal Details** | | | | | | | | |
| Please enter your details as they appear on your driver’s licence and as you used when you applied for your Unique  Student Identifier (USI), including any middle names. | | | | | | | | |
| **Single name only** 🞎  (Tick this box if you have one name only that cannot be written in the following format.  Write your single name in the Surname section) | | | | | | | | |
| **Title** | Mr 🞎 Mrs 🞎 Miss 🞎 Ms 🞎 Other: | | | | | | | |
| **First Name** |  | **Middle Name** | |  | | | | |
| **Surname Name** |  | | | | | | | |
| **Date of Birth** |  | **Gender** | | Female 🞎 | | Male 🞎 | | Other 🞎 |
| **Contact Number** |  | | | | | | | |
| **Email Address** |  | | | | | | | |
| Note: If you do not yet have a USI and require JKR Training for Business to apply for a USI on your behalf, **you must write your name (including any middle names) exactly as written on the identity document you choose to**  **use for this purpose**. See section on the USI at the end of this form for a detailed explanation. | | | | | | | | |
| **Unique Student Identifier (USI)** |  | | | | | | | |
| **Identification Documents** (Please provide a copy of the following identification documents) | | | | | | | | |
| **Medicare Card** |  | | | | | | | |
| **Drivers Licence** |  | | | | | | | |
| **Drivers Licence card number** |  | | | | | | | |
| **Your permanent/residential address** | | | | | | | | |
| **Unit/Street number** |  | | **Street Name** |  | | | | |
| **Suburb** |  | | **State** |  | **Post Code** | |  | |
| **Postal Address** (if different from above) | | | | | | | | |
| **Street Number** |  | | **Street Name** |  | | | | |
| **Postal Box Details** |  | | | | | | | |
| **Suburb** |  | | **State** |  | **Post Code** | |  | |

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| **Language and Cultural Diversity Information** | | |
| **In which country were you**  **born?** | **Australia** 🞎 | **Other** (please specify) |
| **Which city/town were you born?** |  | |
| **I live and/or work in NSW** | **Qr code  Description automatically generatedStudent signature**: | |
| **What is your residency status?** | Australian Citizen | 🞎 |
| New Zealand Citizen | 🞎 |
| Australian Permanent Resident | 🞎 |
| Temporary Resident | 🞎 |
| Other (please specify) | 🞎 |

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| **Do you speak a language other than English at home?**  If more than one language is spoken, specify the one that is spoken most often. | | English only | | 🞎 |
| Other (please specify) | | |
| **If other, how well do you speak English?** | Very well | | 🞎 | |
| Well | | 🞎 | |
| Not well | | 🞎 | |
| Not at all | | 🞎 | |

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| **Are you of Aboriginal or Torres Strait Islander origin?** | | | | Aboriginal | | | | | | 🞎 | | |
| Torres Strait Islander | | | | | | 🞎 | | |
| Both | | | | | | 🞎 | | |
| Neither | | | | | | 🞎 | | |
| ***I confirm I am of Torres Strait Islander and/or Aboriginal descent*** | | | | (Please sign) | | | | | | | | |
| **Exemptions/Concession (Smart & Skilled Only)** | | | | | | | | | | | | |
| **Please indicate your welfare status, if any of the following are applicable and submit the appropriate form and evidence with your enrolment.** | | | I am a welfare recipient | | | | 🞎 | | | | | |
| Dependent child or spouse of a Welfare recipient | | | | 🞎 | | | | | |
| Not a welfare recipient | | | | 🞎 | | | | | |
| Living in or on the waitlist for NSW social housing | | | | 🞎 | | | | | |
| If you selected **yes**, please provide proof of your concession card | | | | | | | 🞎 | | | | | |
| **Disability** | | | | | | | | | | | | |
| **Do you consider yourself to have a disability, impairment or long-term condition?** | | | | | | | | **Yes** 🞎 | | | **No** 🞎 | |
| **If you indicated the presence of a disability, impairment, or long-term condition, please select the area(s) in the following list** (You may select more than one)  Please refer to the Disability supplement for an explanation of the following disabilities if required. | | | | | | | | | | | | |
| Hearing / Deafness | 🞎 | Physical | | | 🞎 | Intellectual | | | | | | 🞎 |
| Learning | 🞎 | Mental illness | | | 🞎 | Acquired brain impairment | | | | | | 🞎 |
| Vision | 🞎 | Medical condition | | | 🞎 | Other | | | | | | 🞎 |
| **Are there any individual needs you have that may require additional support to assist**  **you with your learning in terms of literacy or numeracy assistance?** | | | | | | | | | **Yes** 🞎 | | **No** 🞎 | |
| If you have any questions about learning support please discuss with your JKR Representative.  You will be required to complete a JKR Training Language, Literacy and Numeracy Assessment as part of the enrolment process. | | | | | | | | | | | | |

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| **Education** | | | | |
| **What is your highest completed school level?** (Tick one box only) | | | Year 12 or equivalent | 🞎 |
| Year 11 or equivalent | 🞎 |
| Year 10 or equivalent | 🞎 |
| Year 9 or equivalent | 🞎 |
| Year 8 or below | 🞎 |
| Never attended school | 🞎 |
| **Have you successfully completed any of the qualifications listed here** (Tick all applicable) | Bachelor’s Degree or Higher Degree | | | 🞎 |
| Advanced Diploma or Associate Degree | | | 🞎 |
| Diploma or Associate Diploma | | | 🞎 |
| Certificate IV or Advanced Certificate / Technician | | | 🞎 |
| Certificate III or Trade Certificate | | | 🞎 |
| Certificate I or II | | | 🞎 |
|  | *Qualification name and title completed:* | | | |
| **Employment** | | | | |
| **Which of the following best describes your current employment status?** (Tick one box only) | | Full-time employee | | 🞎 |
| Part-time employee | | 🞎 |
| Casual | | 🞎 |
| Self-employed (not employing others) | | 🞎 |
| Self-employed (employing others) | | 🞎 |
| Employed (unpaid worker in a family  business) | | 🞎 |
| Unemployed (seeking full-time work) | | 🞎 |
| Unemployed (seeking part-time work) | | 🞎 |
| Not employed (not seeking employment) | | 🞎 |
| **Which of the following categories best describes the main reason you are undertaking this course / traineeship / apprenticeship?** (Tick one box only) | | To get a job | | 🞎 |
| To develop my existing business | | 🞎 |
| To start my own business | | 🞎 |
| To try for a different career | | 🞎 |
| To get a better job or promotion | | 🞎 |
| It was a requirement of my job | | 🞎 |
| I wanted extra skills for my job | | 🞎 |
| To get into another course of study | | 🞎 |
| For personal interest or self-development | | 🞎 |
| Other reasons | | 🞎 |

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| **Recognition of Prior Learning** | | | |
| Have you worked in this industry for a long time? Have you got experience in a similar workplace? You may be eligible to have this experience recognised. RPL is assessment without training. You will still need to show you have the skills and knowledge that apply to the qualification.  If you have been assessed as competent in any of the units of competency in this qualification, you are eligible for a credit transfer. This means you don’t need to complete the training and assessment again. You’ll need to supply a verified copy of your statement of attainment to your trainer/assessor for this to happen. Credit transfer is applicable for the equivalent accredited units of competency only | | | |
| **Are you seeking Recognition of Prior Learning or Credit Transfer?**  If yes, please provide a validated copy of your Statement of Attainment, Certificate or USI Transcript | | Yes 🞎 | No 🞎 |
| **JKR Training for Business and Transit Systems approval to third party/ sub-contract under Smart and Skilled** | | | |
| During the enrolment process I have been informed and I acknowledge **I am aware that the training will be conducted under an approved sub-contracting arrangement between JKR Training for Business and Transit Systems** | | Yes 🞎 | No 🞎 |
| **I authorise JKR Training For Business to share a copy of my qualification or statement of attainment with Transit Systems.** | | Yes 🞎 | No 🞎 |
| * I declare that all information provided in this enrolment form is true and correct**.** * I understand that if I provide false information, my training and assessment program may be cancelled immediately**.** * I have been informed of the eligibility criteria for this program * I authorize JKR Training for Business to disclose information supplied in this document to relevant state and federal Government agencies as required for: * Reporting enrolment details and training milestones and outcomes * Statistical analysis, audit, verification, program evaluation and internal management process | | | |
| **Print Name** |  | **Date** |  |
| **Signature** | Shape  Description automatically generated with medium confidence | | |

# JKR Training LogoJKR Training for Business Consumer Protection Policy

JKR Training recognises that consumers play an important role in promoting quality training. All trainees have the right to:

* expect that the education and training they receive will be of a quality consistent with national VET

regulator’s requirements (ASQA) and the requirements of the Smart and Skilled contact;

* expect that JKR Training will meet the NSW Government’s rigorous expectations in the area of quality, ethics, accountability, and responsiveness as set out in the Statement of Expectations for Smart and Skilled providers;
* be informed about their personal information that is collected about them and the right to review and correct that information;
* have access to JKR’ consumer protection complaints system outlined in the JKR Policy and Procedure

Manual.

All trainees have obligations including but not limited to:

* provide accurate information to JKR Training;
* behave in a responsible and ethical manner. JKR Training has obligations including but not limited to:
* provide the training support necessary to allow the trainee to achieve competency;
* provide a quality training and assessment experience for all trainees;
* ensuring JKR Training Staff meet public expectation of ethical behaviour at all times;
* ensuring prospective consumers are properly informed about their subsidised training entitlements;
* provide a clear and accessible feedback and consumer protection system, including a consumer protection office;
* maintain procedures for protecting a trainee’s personal information.

# Contact details for the Training Services NSW (Department of Education) Customer Support Centre: 1300 772 104

|  |  |  |
| --- | --- | --- |
| **I have read and understood the JKR Training Consumer Protection Policy** | | |
| **Signature** | **Date** |  |

**JKR Training for Business Privacy Statement**

## Why we collect your personal information

As a registered training organisation (RTO) JKR Training for Business collects your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us.

## How we use your personal information

We use your personal information to enable us to deliver VET course 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*](https://www.legislation.gov.au/Details/C2011A00012) *(Cth) (NVTER Act)* to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (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 NCVER 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: <https://www.ncver.edu.au/privacy>

If you would like to seek access to or correct your information, in the first instance please contact JKR Training for Business 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: <https://www.dese.gov.au/national-vet-data/vet-privacy-notice>

## JKR Training Logo

## Surveys

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or other 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 JKR Training for Business 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.

A downloadable copy of our privacy policy can be found on our website: <https://www.jkrtraining.com.au/support>

## JKR Training for Business

## Email: [info@jkrtraining.com.au](mailto:info@jkrtraining.com.au) Office Mobile: 0490 665 215 Website: [www.jkrtraining.com.au](http://www.jkrtraining.com.au/)

**This is consent to the use and disclosure of personal information to Department of Industry and other government agencies, as required**

|  |  |
| --- | --- |
| **First Name** |  |
| **Middle Name** |  |
| **Surname** |  |

I understand and agree that, under the Data Provision Requirements 2012 JKR Training for Business is required to collect personal information (information or an opinion about me), collected from me, my parent or guardian, such as my name, Unique Student Identifier, 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 Personal Information) and disclose that Personal Information to the National Centre for Vocational Education Research Ltd (NCVER).

My Personal Information (including the personal information contained on my enrolment form and my training activity data) may be used or disclosed by JKR Training for Business for statistical, regulatory and research purposes. JKR Training for Business may disclose my personal information for these purposes to third parties, including:

* Employer – if I am enrolled in training paid by my employer.
* Commonwealth and State or Territory government departments and authorised agencies, including the NSW Department of Education (Department);
* NCVER.
* Organisations conducting student surveys; and

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**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; and
* 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, the VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website [https://www.ncver.edu.au](https://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 or Concessions. My Personal Information may also be disclosed to other third parties if required by law.

|  |  |  |  |
| --- | --- | --- | --- |
| **I declare that the information I have provided to the best of my knowledge is true and correct** | | | **Yes** 🞎 |
| **I consent to the collection, use and disclosure of my personal information in the manner outlined above** | | | **Yes** 🞎 |
| **I acknowledge and agree that the Department may contact me by telephone, email or post during or after I have ceased training with JKR Training for Business for the purposes of evaluating and assessing my training.** | | | **Yes** 🞎 |
| **Print Name** |  | **Date** |  |
| **Signature** |  | | |

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**Language, Literacy and Numeracy Indicator Assessment**

**Target Core Skills:** These tasks cover ACSF skills at Level 3

|  |  |
| --- | --- |
| **Course Title:** | **TLI31222 Certificate III in Driving Operations** |
| **Trainee First Name** |  |
| **Trainee Surname** |  |

**Introduction to Trainee:**

The LLN Assessment has been developed specifically for Transit Systems drivers.

Transit Systems and JKR Training will offer you maximum assistance through your training experience. Many of the units which form part of the selected course require that you have adequate comprehension and writing skills in order to achieve competence. This assessment provides a method of assessing these skill levels and aims to help us determine the learning approach that is most suited to your specific needs

Transit Systems and JKR Training will review your assessment results together with the information gathered during your interview. If your skills do not meet the entry requirement, Transit Systems and JKR Training may decide to refer you to another training provider for specific training in language, literacy and numeracy. Transit Systems and JKR Training can provide you with a list of providers Who have the expertise to maximise your opportunity.

This strategy has been implemented to ensure that you are given the best opportunity to achieve competence and ultimately obtain the skills in your chosen field. We wish you every success in your assessment.

**Assessor Instructions: Activity One**

**Part 1** is a statement about an Alcohol and Drugs policy and procedure. The candidate should read the statement and answer questions 1 through 4. This is a demonstration of the candidate’s understanding and will be enhanced by the trainee’s ability to draw meaning from the text by contextualising information.

**Part 2** requires the trainee to read the statement about a Transit Systems safe driver and to reproduce (write) the information. The trainee’s response should include a clear and succinct outline of the statement.

**Assessor Instructions: Activity Two**

The second activity requires the trainee to complete a number of numeracy activities including addition, subtraction, multiplication, division and their ability to read a statement and calculate a numeracy activity.

**ACTIVITY ONE: LITERACY AND WRITING**

Read the following information and then answer the questions below in the spaces provided.

|  |
| --- |
| **Activity 1 Part 1: Transit Systems Drug and Alcohol Policy and Procedure Statement**  The legal blood alcohol limit for drivers of public passenger vehicles is **Zero (0)**.  Due to the nature of the role and the immense responsibilities of the position, bus drivers should be aware of what, when and the quantities of alcohol they consume. The body removes alcohol from the blood stream at a predicted rate. Cold showers, strong coffee, etc. will not accelerate this rate.  An employee arriving at the Depot to commence their duties Who has any level of drugs or alcohol in their system that may affect their driving will **NOT be allowed to commence** duty and will be subject to disciplinary procedures. Drivers will be required to participate in tests for the presence of alcohol or drugs, from time to time.  Consumption of alcohol or the use of illegal drugs is not permitted on Transit Systems property. |
| **Q1.** What is this statement about? |
|  |
|  |
| **Q2.** What will happen if an employee commences duty with alcohol and/or drugs in their system? |
|  |
|  |
| **Q3.** What is the blood alcohol limit for a driver of a public passenger vehicle? |
|  |
| **Q4.** What does the last line of the statement mean? |
|  |
| **Activity 1 Part 2: A Transit Systems Safe Driver**  A Bus driver must operate their bus in a safe manner, drive defensively and carefully. A driver must always follow the Transit Systems NSW instructions and obey the road regulations. |
| **Q1:** In twenty words or less, describe what you consider to be a ‘Safe Driver’. |
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**ACTIVITY TWO: NUMERACY**

Please answer the following questions. You may use a calculator if you wish.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Q1:** | 28 + 35 = | | **Answer:** | | |
| **Q2:** | 15 – 11 = | | **Answer:** | | |
| **Q3:** | 48 ÷ 6 = | | **Answer:** | | |
| **Q4:** | 128 + 55 = | | **Answer:** | | |
| **Q5:** | 87 – 15 = | | **Answer:** | | |
| **Q6:** | 15 ÷ 3 = | | **Answer:** | | |
| **Q7:** | You are given eight uniforms, but you should only have been given five. How many uniforms do you return? | | | **Answer:** | |
| **Q8:** | Your bus is licenced to carry 45 passengers sitting and 15 passengers standing.  You currently have 38 passengers sitting and 9 passengers standing.  How many more passengers can board your bus? | | | **Answer:** | |
| **Q9:** | You have 40 stops to make on your bus run today.  You complete ¼ of these and your bus breaks down.  How many stops have you not been able to complete? | | | **Answer:** | |
| **Trainee Name:** | |  | | | |
| **Transit Systems**  **Employee No:** | |  | | | |
| **Trainee Signature:** | |  | | | |
| **LLN Reviewed** | | **Yes** | | | |
| **JKR Staff Name:** | |  | | | |
| **LLN Support Identified**  If yes, please note support action to be taken, add note in VETtrack and advise Transit Systems | | | | **Yes** | **No** |

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**Student Enrolment Interview Form**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Trainee Name:** |  | | | | | | |
| **RTO Representative:** |  | | | | **Date:** |  | |
| **Interview method:** | Face-to-face 🞏 | | | | | | |
| **Course being applied for:** | **TLI31222 Certificate III in Driving Operations** | | | | | | |
| **Purpose.** What is the applicant’s career objective in seeking to complete this course? Is this the right course for them? | **Notes:** *The trainee enrolling is currently operating as a bus driver employed by Transit Systems. The employer is sponsoring the delivery and providing workplace support for the traineeship.* | | | | | | |
| **Individual needs.** This may include educational needs, dietary, physical needs such as a disability, medical needs, language needs, etc. | **Notes:** | | | | | | |
| **RPL/RCC.** Does the applicant have any current competence or prior learning? |  | | | | | | |
| **Workplace requirements.** Does the applicant have any specific workplace requirements that need to be addressed in the training? | **Notes:**  *All training and assessment will be completed in the workplace and utilise the facilities and equipment provided by the employer in support of this training.*  *Where appropriate assessment is completed on the job with the trainee performing tasks in the actual workplace supporting the assessment activity.* | | | | | | |
| **Policy and procedures.**  The JKR policies and procedures are discussed with each trainee which are contained in the JKR Training Student Handbook.  Trainees are advised a copy of the handbook and is available on the JKR web site or on request from the JKR office. | Fees payable (page 7). Note: Student is not responsible for any fees | 🞏 | | Accessing your records (page 7) | | | 🞏 |
| Your Privacy (page 6) | 🞏 | | Withdrawing from a course (page 7) | | | 🞏 |
| Your Safety (page 5) | 🞏 | | Your Equity -no discrimination or harassment (page 6) | | | 🞏 |
| Making complaints and appeals (page 11) -Complaint and Appeal forms available on JKR web site | 🞏 | | Legislative and Regulatory responsibilities (page 16) - JKR is required to operate within the law | | | 🞏 |
| **I am aware a copy of the JKR Student Handbook and JKR Training Consumer Protection Policy is available on the JKR webs site:** [**http://www.jkrtraining.com.au**](http://www.jkrtraining.com.au) **and I have been advised how to search the web site and download the necessary information.** | | | | | | 🞎 |
| **I request JKR Training email a copy of the student handbook to me via email using the email address I have supplied on my enrolment form** | | | | | | 🞎 |
| Shape  Description automatically generated**Student Signature:** | | | **RTO Representative Signature:** | | | | |

**Student Survey Form 1**

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| --- | --- |
| **Qualification** | **TLI31222 Certificate III in Driving Operations** |
| **Trainee Full name** |  |
| **Trainee Employee No:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Marketing, recruitment, and enrolment** | | **Strongly agree** | **Somewhat agree** | **Neither agree nor disagree** | **Do not agree** |
| As an employee, I am undertaking this training in support of my existing job role. | |  |  |  |  |
| 1.The information I received about my course at the time of my enrolment was factual and accurate. | |  |  |  |  |
| 2.I was advised of the name of my training provider at the sign up. | |  |  |  |  |
| 3.I was not offered any incentive to sign up for the course e.g., iPad or a laptop. | |  |  |  |  |
| 4.My training provider gave me advice about how the course would meet my needs before I enrolled. | |  |  |  |  |
| 5.I understood the length of the course, study requirements and assessment methods before I enrolled. | |  |  |  |  |
| 6.My rights and responsibilities as a student were explained to me before I enrolled. | |  |  |  |  |
| 7.I understand all cost for this training are the responsibility of my employer. | |  |  |  |  |
| 8.My training provider has asked me if I have any special learning needs including language and literacy support. | |  |  |  |  |
| 9. I have been given information about the support services available to me as a student. | |  |  |  |  |
| 10.I have been asked if I am seeking recognition of prior learning as part of the enrolment. | |  |  |  |  |
| 11.I know I can get help if I have a problem or find the course difficult. | |  |  |  |  |
| 12.I understand how to make a complaint if I am unhappy about my training or support services. | |  |  |  |  |
| 13. I am aware I can access a copy of the student handbook from the web site and a copy will be forwarded to me via email. | |  |  |  |  |
| 14.I was advised my training was going to delivered under an approved partnership agreement between JKR Training and Transit Systems. | |  |  |  |  |
| **Email address for student handbook:** |  | | | | |

|  |  |
| --- | --- |
| **Trainee Signature:** | Shape  Description automatically generated with medium confidence |