

## HDR 13 ENROLMENT FORM INSTRUCTIONS

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### PURPOSE OF THIS FORM

For students who have been accepted for admission into a Higher Degree by Research (HDR) course with Batchelor Institute and who are:

- Commencing a HDR course for the specified year.

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### MANDATORY INFORMATION

For all students who are seeking to enrolment in a Batchelor Institute HDR course, the following mandatory information must be provided on this form:

Section 1 – Personal Details

Section 2 – Course Details

Section 3 – Unit Details

Section 4 – Admission & Research Details

Section 5 – Statistical Information

Section 6 – Declaration & Signature

Failure to provide this information or not sign this form will result in this enrolment not being processed.

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### COURSE INFORMATION

Students who are enrolling in MA – Master of Philosophy or PhD – Doctor of Philosophy are required to become familiar with the Research Program Rules of their specified course.

The Research Program Rules provide students with an understanding of the requirements of the course including any milestones, as well as completion periods to be able to progress within the program.

The most current Research Program Rules can be found on the Batchelor Institute webpage  
<https://www.batchelor.edu.au/research/current-candidates/>

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### PROOF OF ENROLMENT

Students will be sent a Confirmation of Enrolment to the email address provided on this form once their enrolment has been processed by Student Administration.

This can be used by students as Proof of Enrolment for Human Services (Centrelink).

It is a student's responsibility to advise Human Services of their study load, or any changes to their study load, while enrolled with Batchelor Institute.

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### WHERE TO SEND YOUR FORM

Your enrolment form can be emailed, posted, faxed or hand delivered to the Division of Higher Education & Research at Batchelor campus.

Email: [graduateschool@batchelor.edu.au](mailto:graduateschool@batchelor.edu.au)

Post: Division of Higher Education & Research  
Batchelor Institute of Indigenous Tertiary Education  
c\ - Post Office  
BATCHELOR NT 0845

For enquiries regarding this form:

Telephone: (08) 8939 7260

Facsimile: (08) 8939 7331

Free call: 1800 677 095

Email: [graduateschool@batchelor.edu.au](mailto:graduateschool@batchelor.edu.au)

Website: [www.batchelor.edu.au](http://www.batchelor.edu.au)

# HDR13 - HIGHER DEGREES BY RESEARCH ENROLMENT FORM COMMENCING STUDENT

## SECTION 1 - PERSONAL DETAILS

Student Number \_\_\_\_\_

Title       Mr    Mrs    Ms    Miss    Dr

Surname \_\_\_\_\_

Given Names \_\_\_\_\_

Preferred Name \_\_\_\_\_

(optional - not a nickname)

Gender       Male    Female    Gender X

Date of Birth \_\_\_\_\_

(dd/mm/yyyy)

Former Surname \_\_\_\_\_

(if applicable)

Email \_\_\_\_\_

### Postal Address - All students must complete

Enter the address where you would like your correspondence sent and your preferred contact telephone number.

Number & Street \_\_\_\_\_

or PO Box \_\_\_\_\_

Suburb/Town \_\_\_\_\_

State \_\_\_\_\_ Post Code \_\_\_\_\_

Country \_\_\_\_\_

Work Phone \_\_\_\_\_

(including area code)

Mobile Phone \_\_\_\_\_

Fax Number \_\_\_\_\_

(including area code)

Are you a BIITE staff member?    Yes    No

### Home Address - If different to your postal address

Enter your permanent Home Address. This address must not be a PO Box.

Number & Street \_\_\_\_\_

(Cannot be a PO Box)

Suburb/Town \_\_\_\_\_

State \_\_\_\_\_ Post Code \_\_\_\_\_

Country \_\_\_\_\_

Home Phone \_\_\_\_\_

(including area code)

### Emergency Contact - All students must complete

Contact Name \_\_\_\_\_

Contact Phone 1 \_\_\_\_\_

(including area code)

Contact Phone 2 \_\_\_\_\_

(including area code)

### Workplace Address - Optional

Employer name \_\_\_\_\_

Suburb/Town \_\_\_\_\_

State \_\_\_\_\_ Post Code \_\_\_\_\_

Telephone \_\_\_\_\_

(including area code)

Fax Number \_\_\_\_\_

(including area code)

### Student Administration Use Only

Date Received	Date Processed	Processed By (name and signature)	Expected completion date of

This information will be collected and stored and used at Batchelor Institute in accordance with the Information Privacy Principles set out in the Northern Territory Information Act. If you have any queries regarding storage and collection of your information, please refer to the Institute's Privacy Statement [www.batchelor.edu.au/privacy-statement](http://www.batchelor.edu.au/privacy-statement) or contact the Institute at [privacy.officer@batchelor.edu.au](mailto:privacy.officer@batchelor.edu.au).

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**SECTION 2 – COURSE DETAILS – All students must complete**

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Ensure that you discuss the course and location with the Graduate School Director.

Course Name \_\_\_\_\_

Course Location  Batchelor

External

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**SECTION 3 – UNIT DETAILS – All students must complete**

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Ensure that the units you select have been discussed with your primary supervisor and/or the Director, Higher Degrees by Research.

Unit Code	Semester	Delivery Location	Unit Name

For students enrolling in the Master of Philosophy (MA) and the Doctor of Philosophy (PhD), the following units are compulsory and should be enrolled as per the suggested study plan for full or part-time students:

- RTU541 - Grounding practice in local land-based knowledge
- RTU542 - Research Strategy
- RTU543 - First Nations Research methodologies
- RTU544 - Research Ethics

PLUS

- MA520 - Master of Philosophy unit (Part-time load) OR MA540 - Master of Philosophy unit (Full-time load)

**OR**

- PhD520 - Doctor of Philosophy unit (Part-time load) OR PhD540 - Doctor of Philosophy unit (Full-time load)

MIP – Masters of Indigenous Perspectives by Research *(only available to candidates enrolled prior to 2020)*

PHDIP—Doctor of Philosophy Indigenous Perspectives *(only available to candidates enrolled prior to 2020)*



## SECTION 5 – STATISTICAL INFORMATION - All students must complete

### Q1. Are you of Aboriginal or Torres Strait Islander origin?

- Neither Aboriginal nor Torres Strait Islander
- Yes, Aboriginal
- Yes, Torres Strait Islander
- Yes, Aboriginal and Torres Strait Islander

### Q2. What is your Citizenship and Residence Status this year?

- Australian citizen (including Australian citizens with dual citizenship)
- New Zealand citizen or a diplomatic or consular representative of New Zealand, a member of the staff of such a representative or the spouse or dependent relative of such a representative, excluding those with Australian citizenship. (Note: includes any such persons who have Permanent Resident status)
- I have a permanent humanitarian visa
- I have a permanent residency visa other than a permanent humanitarian visa
- I have a temporary entry permit or am a diplomat or a dependent of a diplomat (except New Zealand) and reside in Australia during this unit of study
- Not one of the above categories and I am residing outside Australia during my unit of study

### Q3. If you have Permanent Resident status, which statement best describes your circumstance?

- Permanent Residence status does not apply to me
- I am residing in Australia during the semester OR outside Australia as per the course requirement
- I am residing outside Australia for the semester
- On enrolment day I met the residency requirements more than 12 months ago

*The Institute must have a certified copy of your current Visa documentation to process your enrolment. Please provide the certified copy of your visa as soon as possible.*

### Q4. In what country is your permanent home residence?

- Australia, postcode

OR

- Overseas, name of country \_\_\_\_\_

### Q5. In what country is your residence during the year?

- Australia, postcode

OR

- Overseas, name of country \_\_\_\_\_

### Q6. In what country were you born?

- Australia, postcode

OR

- Overseas, name of country \_\_\_\_\_

Year of arrival in Australia

### Q7. Do you speak a language other than English at your permanent home residence?

- No
- Yes, other language \_\_\_\_\_

### Q8. Where was your permanent home residence during Year 12?

Suburb/Town \_\_\_\_\_

Postcode

### Q9. In what year did you leave Secondary School?

Year

### Q10. What is your highest educational participation prior to this enrolment?

- A complete Higher Education postgraduate level course
- A complete Higher Education bachelor level course
- A complete Higher Education sub-degree level course
- An incomplete Higher Education course
- A complete final year of secondary education course at school or through a Registered Training Organisation
- Other qualification, complete or incomplete
- No prior educational attainment
- A complete VET award course
- An incomplete VET award course

Year of completion was

### Q11. What was the highest level of education completed by your parent/guardian #1 and your parent/guardian #2?

- | #1                    | #2                    |  |
|-----------------------|-----------------------|--|
| <input type="radio"/> | <input type="radio"/> | Postgraduate Qualifications (eg. Masters, PhD)   |
| <input type="radio"/> | <input type="radio"/> | Bachelor Degree  |
| <input type="radio"/> | <input type="radio"/> | Other Post School Qualifications (eg. VET/TAFE Certificate, Associate Degree or Diploma) |
| <input type="radio"/> | <input type="radio"/> | Completed Year 12 Schooling or equivalent  |
| <input type="radio"/> | <input type="radio"/> | Did not Complete Year 12 Schooling or equivalent   |
| <input type="radio"/> | <input type="radio"/> | Completed Year 10 Schooling or equivalent  |
| <input type="radio"/> | <input type="radio"/> | Did not Complete Year 10 Schooling or equivalent   |
| <input type="radio"/> | <input type="radio"/> | Don't Know   |
| <input type="radio"/> | <input type="radio"/> | Not Applicable   |

Parent/Guardian #1 is Male Female

Parent/Guardian #2 is Male Female

### Q12. Do you consider yourself to have a disability, impairment or long-term medical condition?

- No
- Yes

*If yes, then please indicate the areas of disability, impairment or long-term condition **and** indicate if you would like to be contacted regarding advice on support services, equipment and facilities that may assist you with your studies.*

- |  |  |
|--|--|
| <input type="checkbox"/> Hearing/deaf      | <input type="checkbox"/> please contact me |
| <input type="checkbox"/> Learning          | <input type="checkbox"/> please contact me |
| <input type="checkbox"/> Medical Condition | <input type="checkbox"/> please contact me |
| <input type="checkbox"/> Mobility          | <input type="checkbox"/> please contact me |
| <input type="checkbox"/> Vision            | <input type="checkbox"/> please contact me |
| <input type="checkbox"/> Other             | <input type="checkbox"/> please contact me |

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**SECTION 6 - DECLARATION AND SIGNATURE - All students must complete**

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Please read the declaration, and sign and date the form if you agree.

1. I declare that the information I have supplied on this form is, to the best of my knowledge, correct and complete.
2. I understand that I am responsible for notifying Centrelink of study load or changes to study load where applicable.
3. I agree to be contacted via electronic means whilst I am a student at BIITE.
4. I understand that the giving of forged, false or misleading information may lead to the cancellation of my enrolment.
5. I acknowledge that while I am enrolled I will comply with the rules, policies and by-laws of the BIITE.
6. I further undertake to pay the prescribed incidental charges (if any) within the time allowed by BIITE for such payment.
7. I agree to indemnify BIITE against all debt collection cost, solicitors' costs and any disbursements incurred as a result of my non-payment of monies owed to BIITE.
8. I understand that BIITE will not disclose the information provided by me on this form to third parties, without my written consent, except to other educational institutions, to government bodies, as required or authorised by law or in accordance with BIITE's Privacy Policy, which is available at [www.batchelor.edu.au](http://www.batchelor.edu.au) or on request.
9. I acknowledge that I have access to, and have read the information supplied in the BIITE Student Guide.
10. I authorise Centrelink to confirm with Batchelor Institute of Indigenous Tertiary Education the current status of my Commonwealth Benefit and other details as they pertain to my concessional entitlement. This involves electronically matching details I have provided to the Participant with Centrelink or Department of Veterans' Affairs (DVA) records to confirm whether or not I am currently receiving a Centrelink or DVA benefit. I understand that this consent, once signed, is effective only for the period I am a customer of Batchelor Institute of Indigenous Tertiary Education. I also understand that this consent, which is ongoing, can be revoked any time by giving notice to the Batchelor Institute of Indigenous Tertiary Education. I understand that if I withdraw my consent, I may not be eligible for the concessions provided by Batchelor Institute of Indigenous Tertiary Education. A brochure is available from Centrelink that provides more details about the Centrelink Confirmation eService's or on Centrelink's website at [www.centrelink.gov.au](http://www.centrelink.gov.au)

Signature of student \_\_\_\_\_ Date \_\_\_\_\_