



HDR13 – HIGHER DEGREES BY RESEARCH ENROLMENT FORM

SECTION 1 – STUDENT STATUS – All students must complete

Ensure you specify whether you are a new student or a continuing student in this course.

I am a new candidate in the Higher Degrees by Research program who has not previously studied at Batchelor Institute of Indigenous Tertiary Education.

I am a new candidate in the Higher Degrees by Research program who has previously studied at Batchelor Institute of Indigenous Tertiary Education. Please write your student number in the box provided in Section 2.

I am a continuing research candidate in the Higher Degrees by Research program

SECTION 2 – PERSONAL DETAILS

All students must complete.

Student Number						Number & Street (Cannot be a PO Box)			
Title	Mr	Mrs	Ms	Miss	Dr	Suburb/Town			
Surname						State	Post Code		
Given Names						Country			
Preferred Name (optional - not a nickname)						Home Phone (including area code)			
Gender	Male	Female				Emergency Contact – All students must complete			
Date of Birth (dd/mm/yyyy)						Contact Name			
Former Surname (if applicable)						Contact Phone 1 (including area code)			
Email						Contact Phone 2 (including area code)			
Postal Address – All students must complete Enter the address where you would like your correspondence sent and your preferred contact telephone number.						Workplace Address – Optional			
Number & Street or PO Box						Employer name			
Suburb/Town						Suburb/Town			
State					Post Code	State	Post Code		
Country						Telephone (including area code)			
Work Phone (including area code)						Fax Number (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.

SECTION 6 – STATISTICAL INFORMATION – All students must complete unless stated otherwise

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

- Postgraduate Qualifications (eg. Masters, PhD)
Bachelor Degree
Other Post School Qualifications (eg. VET/TAFE Certificate, Associate Degree or Diploma)
Completed Year 12 Schooling or equivalent
Did not Complete Year 12 Schooling or equivalent
Completed Year 10 Schooling or equivalent
Did not Complete Year 10 Schooling or equivalent
Don't Know
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.

Hearing/deaf	please contact me
Learning	please contact me
Medical Condition	please contact me
Mobility	please contact me
Vision	please contact me
Other	please contact me

Q13. Are you willing to serve on any committees in the Institute?

Yes No

SECTION 7 – DECLARATION AND SIGNATURE – All students must complete

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

Additional Documentary Evidence – must be certified and provided if you have:

- › Changed your name (documentary proof is required – driver’s licence, marriage certificate, passport or statutory declaration)
 - › Become a permanent resident (documentary proof is required – passport or permanent residency documentation – document must state the month and year residency was granted)
 - › Become an Australian Citizen – (documentary proof is required)
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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 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

Signature of student

Date

SECTION 8 – 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.

Post to:

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

Hand deliver to:

Division of Higher Education & Research
Batchelor Institute of Indigenous Tertiary Education
Batchelor Campus
BATCHELOR NT 0845

Email: graduateschool@batchelor.edu.au

For enquiries regarding this form:

Telephone: (08) 8939 7260

Facsimile: (08) 8939 7331

Freecall: 1800 677 095

Email: graduateschool@batchelor.edu.au

Website: www.batchelor.edu.au

SECTION 9 - ADMISSION DETAILS

To be completed by the Higher Degrees by Research Coordinator, Division of Higher Education & Research. For new enrolments highest qualification transcript(s) and/or professional standing documentation must be provided.

Basis of admission 31 Higher Education 37 Professional basis

Advanced standing applied for? Yes No

Organisation Research

Research topic summary
Please attach additional page/s if required.

Research title

Field of Research code 1 (6 digit) %

Field of Research code 2 (6 digit) %

Field of Research code 3 (6 digit) %
(all must add to 100%)

SOE Classification code 1 (6 digit) %

SOE Classification code 2 (6 digit) %

SOE Classification code 3 (6 digit) %
(all must add to 100%)

Government research activity type Pure basic Strategic basic Applied

Primary supervisor full name Org unit %

Panel supervisor full name Org unit %

Panel supervisor full name Org unit %
(all must add to 100%)

Date HDC approval

Checked and approved by Date

Student Services Use Only		
Date Received	Date Processed	Expected completion
Received By	Processed By	