

Complete all section in <b>BLOCK LETTERS</b> and ensure that you sign wherever necessary						
PERSONAL DETAIL	PERSONAL DETAILS					
Title:	🗆 Mr.	🗆 Mrs.	□ Miss	□ Ms. □ 0	ther	
Family Name:						
First Name:				Middle Name:		
Gender:	Female	🗆 Male	□ Other	Date of Birth:		
For students unde	r 18 years o	fage:				
Parent / Guardian Name:						
Email ID:				Telephone No:		
middle names. If y	ou do not ye	t have a USI d	and want IHNA	to apply for a USI	lent Identifier (USI), including any on your behalf, you must write your nt you choose to use for this purpose.	
Have you got a cur	rent concess	sion card	□ Yes □	No		
[Please provide a c	opy]					
USUAL ADDRESS:	Do not use P	O Box and ac	lvise IHNA if you	ı change your ada	lress during your course	
Building / Propert Name:	y					
Flat / Unit Numbe	r:					
Street Number & Name:						
Suburb / City:				State:		
Zip / Postcode:				Country:		
Home Phone:				Work Phone:		
Mobile:				*Email:		
*On commencement of Training you will be required to use email to receive correspondence from IHNA and to use our online learning portal to access the resources and submit your assessments. Therefore, it is necessary to provide an email address"						

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POSTAL ADDRESS: (If	not same as above)			
Building / Property Name:				
Flat / Unit Number:				
Street Number & Name:				
Suburb / City:		State:		
Zip / Postcode:		Country:		
UNIQUE STUDENT ID	ENTIFIER (USI)			
	st provide a valid USI to receive a na complete your program.	tionally recogr	nised VET qu	alification or statement of
Option 1 (Already hav	<b>ve USI)</b> * All fields for this option are	mandatory		
🗆 I already have a U	<b>5I</b> and I give IHNA permission to veri	fy my USI.	My USI is:	
	0	R		
Option 2 (Creating ov	vn USI)			
	SI. I will create my own USI account or to enrolment into the course.	and provide m	ny USI to IHN	IA along with permission to
IMPORTANT: To creat	te my own USI visit <u>http://www.usi.</u>	gov.au/pages/	default.asp	
Option 3 (IHNA to cre	ate USI - available only in the even	t you are unav	vailable to cr	reate your own USI)
privacy informat	eate my own USI and I authorize IHI on at <u>http://www.usi.gov.au/Trainir</u> the following forms of personal iden	ng-Organisatio	•	
Driver's License (	Australian)	Australia	in Passport	
Citizenship Certi	icate	Australia	in Birth Certi	ificate
Medicare Card		□ Other		
(Contact IHNA for confirmation)				
Document Identificat	ion Number:			
Country of Birth:		Town or City	of Birth:	
IMPORTANT: For this	service there will be a processing pe	eriod of 1-3 bu	isiness days.	
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## **COURSE DETAILS**

Which course a	re you applying for?			
Course Delivery Mode:	Face to face	□ Blended	Course start date (If applicable):	
<b>NEXT OF KIN</b> (ir Nominated Gua		ho can we contact): For s	students under the a	ge of 18, this must be a Parent/
Full Name			Relationship	
Mobile			Telephone	
Address			Email	
All fields are ma	ndatory to complete.			
LANGUAGE AN	D CULTURAL DIVERSI	ſΥ		
1. In which co	untry where you borr	1?		
🗆 Australia	🗆 Other - p	please specify		
If not Australiar	, your current resider	tial status (Specify the ty	pe of visa):	
2. Do you spe	ak a language other t	nan English at home?		
(If more tha	n one language, indic	ate the one that is spoker	n most often)	
🗆 No, Engli	sh only $\Box$ Yes, other	er – please specify		
3. How well d	o you speak English?			
🗆 Very wel	🗆 Well	🗌 Not well	🗆 Not at a	II
Do you mee	et the NMBA English L	anguage requirements?	□ Yes	□ No
*Students applying for HLT54121-Diploma of Nursing must meet the NMBA English Language requirements prior to enrolling in the course. Refer to Page 8 for more details				
4. Are you of	Aboriginal or Torres S	trait Islander origin?		
(For person	s of both Aboriginal ar	nd Torres Strait Islander o	rigin, mark both 'Yes	' boxes.)
🗆 No	🗌 Yes, Abo	riginal 🗌 Yes, Torres	Strait Islander	

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DIS	DISABILITY						
5.	5. Do you consider yourself to have a disability, impairment, or long-term condition?						
	$\Box$ Yes	□ No (If no, go to question 7	)				
6.	If you ind the follow		rment	or lor	ng-teri	m condition, please select the area (s) in	
	Hearing/deaf     Physical     Learning     Mental Health Condition						
	🗆 Intelle	ctual 🛛 Medical condition 🗌	Vision			□ Acquired brain impairment	
	$\Box$ Other,	Please Specify					
SCI	HOOLING						
7.	What is y	our highest COMPLETED school level? (7)	ick ON	E box	only)		
	🗆 Year 1	2 or equivalent 🛛 Year 11 or equiv	valent		□ Y	/ear 10 or equivalent Year	
	🗆 09 or e	equivalent 🗌 Year 08 or below	v			Never attended school	
8.	In which	YEAR did you complete that school level	<b>,</b>				
9.	Are you s	till attending secondary school? $\Box$	Yes			No	
PR	EVIOUS QU	JALIFICATIONS ACHIEVED					
10.	Have you	SUCCESSFULLY completed any of the fol	lowing	g quali	ficatio	ons? 🗆 Yes 🗆 No	
If Y	ES, then ti	ck ANY applicable boxes.					
A -	Australiar	E - Australian Equivalent		I - Int	ernat	ional	
Α	ΕI		Α	E	I		
		Bachelor Degree or Higher Degree				Certificate III (or Trade Certificate)	
		Advanced Diploma or Associate Degree				Certificate II	
		Diploma (or Associate Diploma)				Certificate I	
		Certificate IV (or Advanced Certificate / Technician)				Certificates other than the above	

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All fields in this form are mandatory and must be completed.

FM	PIO	YME	NT

11. Of the following categories, which BEST	<b>11. Of the following categories, which BEST describes your current employment status?</b> (Tick ONE box only)					
Full-time employee	Fmploved -	unpaid worker in a family business				
$\Box$ Part-time employee		d - seeking full-time work				
□ Self-employed - not employing others		d - seeking part-time work				
□ Self-employed - employing others		ed - not seeking employment				
	T describes your curren	t or recent occupation? (Tick one box only) If				
$\Box$ Managers	□ Professionals	$\Box$ Technicians and Trade Workers				
$\Box$ Community and Personal Service	□ Sales Workers	$\Box$ Clerical and Administrative Workers				
$\Box$ Machinery Operators and Drivers	□ Labourers	□ Other				
<b>13. Which of the following classifications BE</b> ( <i>Tick ONE box only</i> ) <b>If never employed go</b>						
Manufacturing     Mining		🗆 Wholesale Trade 🛛 🗆 Retail Trade				
$\Box$ Agriculture, Forestry and Fishing	🗆 Electr	icity, Gas, Water and Waste Services				
$\Box$ Transport, Postal and Warehousing	□ Accon	nmodation and Food Services				
$\Box$ Arts and recreation Services	🗆 Inform	nation Media and telecommunications				
$\Box$ Financial and Insurance Services	🗆 Renta	l, Hiring and real Estate Services				
$\Box$ Professional, Scientific and Technical S	Services 🛛 Admir	nistrative and Support Services				
$\Box$ Public Administration and Safety	🗆 Educa	ation and Training				
$\Box$ Health Care and Social Assistance	🗆 Other	Services				
STUDY REASON						
14. Of the following categories, which BEST course/traineeship/apprenticeship? (Tic.	•	ason for undertaking this				
🗆 To get a job	$\Box$ To get	t a better job or promotion				
$\Box$ For personal interest or self - develop	ment 🛛 To de	velop my existing business				
$\Box$ It was a requirement of my job	🗆 To sta	art my own business				
$\Box$ I wanted extra skills for my job	$\Box$ To get	t skills for community/voluntary work				
$\Box$ To try for a different career	$\Box$ To get	t into another program of study				
□ Other reasons						

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## VICTORIAN STUDENT NUMBER

### To be completed by all students aged up to 24 years.

Since 2009 in schools and since 2011 for vocational education and training (VET) organisations and Adult Community Education providers, a Victorian Student Number (VSN) has been allocated upon enrolment to each individual student aged up to 24 years.

Students must report their VSN on all subsequent enrolments at a Victorian school or training organisation. In particular, all students who are currently enrolled in either a VET provider or a Victorian school (including those already participating in a VET in schools program) should obtain their VSN from their current education or training organisation and report their VSN on this enrolment form.

Students who are enrolling for the first time since the VSN was introduced will get a new VSN.

Question						
Enter your Victorian Student Number (VSN)	No more questions if you provided your VSN.					
Have you attended		<ul> <li>No - I have not attended a Victorian school since 2009 or a TAFE or other VET training provider since the beginning of 2011.</li> <li>No more questions if you answer No above.</li> </ul>				
any Victorian school since 2009 or done any training with a vocational		Yes - I have attended a Victorian school since 2009: Most recent Victorian school attended and / or				
education and training (VET) registered training organization or an Adult and Community Education provider		Yes - I have participated in training at a TAFE or other training organisation since the beginning of 2011 List the most recent training organizations with which you have participated in training in Victoria since 2011 (List up to 3 training organizations)				
in Victoria since 2011?						
Funding/VET Studen	t Loar	n Eligibility				
Are you eligible for g	overni	ment funding	□ Yes	□ No		
Have you completed	the V	TG form	🗆 Yes	□ No		
Are you eligible for V	ET Stu	ident Loan	□ Yes	□ No		
Would you like to ava	ail for	VET Student Loan	□ Yes			

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You would need to provide your TFN number for the ecaf application. For more details please visit <u>https://www.education.gov.au/vet-student-loans</u>						
TUITION FEE PAYMENT	TUITION FEE PAYMENT					
Choose one of the payment plans below.						
□ Full Fee Paying Student □ Skil	ll First Funding	🗆 DTWD Fu	inding 🗌 VET	Student Lo	ans	
If you have selected, Full Fee Paymen	it student please se	lect from the be	elow.			
□ Full Fee Paid Upfront □ Pay	yment Plan					
*IHNA does not require students to pay in course fees must be paid as outlined in IHI		to the course con	nmencement. However,	the remaina	ler of the	
(Please contact your admission consult	tant or customer se	rvice team on 18	800 22 52 83 for any q	uestions.)		
Please choose one of the followin methods. Please use invoice numbe transactions. To finalize the enrolm	er in all payment	<ul> <li>Pay at our campus</li> <li>Using Credit card</li> </ul>				
recommended you include a copy of the deposit receipt with this enrolment form.		Credit Card Authorization				
Bank transfer		Cardholders Name:				
Bank Details						
Bank: ANZ Heidelberg, Victoria, A		Card Number:				
Account Name: Institute of Healt Australia	h & Nursing					
BSB No. 013-313		Credit card type:	□ Master Card	$\Box$ V	isa	
Account No. 197 452 667.		Expiry Date:		CVV No:		
Pay Online from our website <u>https://www.ihna.edu.au/pay-online/</u>		I authorize the Institute of Health and Nursing Australia to process payment/s against the credit card (Credit card surcharges apply @ 1.50%) as set out in my selected Payment Plan.			edit card	
Signature:		Date:				
For students under 18 years of age:						
Parent / Guardian Name:						
Telephone No:	Email ID:					

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### Direct Debit\*

Please provide following details				
Name of Account Holder		BSB No		
Accno		Date you want to start the direct debit		

To ensure your enrolment is finalised quickly, it is recommended to sign and sent the direct **debit form** to the enrolment officer as quickly as possible.

\*For direct debit administration charges & fees apply. Dishonour fee of AUD 20/- is applicable in case of dis-honour of any direct installment.

## **VET Student Enrolment Privacy Notice**

The Department's collection and handling of enrolment data and VSNs is authorised under the *Education and Training Reform Act 2006* (Vic). The Department is also authorised to collect and handle USIs in accordance with the *Student Identifiers Act 2014* (Cth) and the *Student Identifiers Regulation 2014* (Cth).

### **Survey participation**

You may be contacted to participate in a survey conducted by NCVER or a Department-endorsed project, audit or review relating to your training. This provides valuable feedback on the delivery of VET programs in Victoria.

Please note you may opt out of the NCVER survey at the time of being contacted.

## Consequences of not providing your information

Failure to provide your personal information may mean that it is not possible for you to enrol in VET and/or to obtain a Victorian Government VET subsidy

### Access, correction and complaints

You have the right to seek access to or correction of your own personal information. You may also complain if you believe your privacy has been breached.

For further information, please contact IHNA's Privacy Officer in the first instance by phone [#] or email [#].

### **Further information**

For further information about the way the Department collects and handles personal information, including access, correction and complaints, go to <a href="http://www.education.vic.gov.au/Pages/privacypolicy.aspx">http://www.education.vic.gov.au/Pages/privacypolicy.aspx</a>.

For further information about Unique Student Identifiers, including access, correction and complaints, go to <u>http://www.usi.gov.au/Students/Pages/student-privacy.aspx</u>.

□ I acknowledge that I have read the Victorian Government's VET Student Enrolment Privacy Notice.

Student Signature	Parent/Guardian Signature*	
Date	Date	

\*Parental/guardian consent is required for all students under the age of 18.

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#### NMBA English Language Requirement

From 1 July 2018 all students that would be required by the NMBA to provide a formal English language skills test when applying for registration, must provide a formal English language test result demonstrating achievement of the NMBA specified level of English language skills, prior to commencing the program as below:

Has attended and satisfactorily completed at least six years of primary and secondary education taught and assessed in English in either Australia, Canada, New Zealand, Republic of Ireland, South Africa, United Kingdom or United States of America, including at least two years between years 7 and 12 [NB: At the time of applying for NMBA registration as a program graduate: the applicant will have completed an NMBA approved Enrolled Nurse program and will therefore have a qualification that has been taught and assessed solely in English.]

OR

At the time of applying for NMBA registration as a program graduate, the applicant will be able to demonstrate having completed 5 years (full time equivalent) of studies taught and assessed in English – that includes a combination of secondary, vocational or tertiary studies (or tertiary education alone) and evidence of a minimum of one year fulltime equivalent pre-registration program of study approved by the recognised nursing and/or midwifery regulatory body in either Australia, Canada, New Zealand, Republic of Ireland, South Africa, United Kingdom or United States of America.

OR

- Has formal English language test score results showing:
  - an IELTS (academic module) with a minimum overall score of 7 and a minimum score of 7 in each of the four components (listening, reading, writing and speaking).

**NOTE:** Only accepting test results: from one test sitting, or a maximum of two test sittings in a six-month period only if: achieved a minimum overall score of 7 in each sitting and achieved a minimum score of 7 in each component across the two sittings, and no score in any component of the test is below 6.5. **OR** 

> an OET with a minimum score of B in each of the four components (listening, reading, writing and speaking).

**NOTE:** Only accepting test results: from one test sitting, or a maximum of two test sittings in a six-month period only if: was tested in all four components in each sitting, and achieved a minimum score of B in each component across the two sittings, and no score in any component of the test is below C. **OR** 

a PTE Academic with a minimum overall score of 65 and a minimum score of 65 in each of the four communicative skills (listening, reading, writing and speaking).

**NOTE:** Only accepting test results: from one test sitting, or a maximum of two test sittings in a six-month period only if: a minimum overall score of 65 is achieved in each sitting, and you achieve a minimum score of 65 in each of the communicative skills across the two sittings, and no score in any of the communicative skills is below 58. **OR** 

a TOEFL iBT with a minimum total score of 94 and the following minimum score in each section of the test: 24 for listening,24 for reading,27 for writing, and23 for speaking.

**NOTE:** Only accepting test results: from one test sitting, or a maximum of two test sittings in a six-month period only if: a minimum total score of 94 is achieved in each sitting, and you achieve a minimum score of 24 for listening, 24 for reading, 27 for writing and 23 for speaking across the two sittings, and no score in any of the sections is below: 20 for listening19 for reading24 for writing, and20 for speaking. **OR** 

> other English language test approved by the NMBA as published on the Board's website with the required minimum scores.

#### Unique Student Identifier Privacy Notice and Privacy Policy

#### **Privacy Notice**

You are advised that and agree that you understand and consent that the personal information you provide in connection with an application for a USI:

- is collected by the Student Identifiers Registrar for the purposes of:
  - > applying for, verifying and giving a USI;
  - resolving problems with a USI; and
  - > creating authenticated vocational education and training (VET) transcripts.

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All fields in this form are mandatory and must be completed.

#### may be disclosed to:

- Commonwealth and State/Territory government departments and agencies and Statutory bodies performing functions relating to VET for:
  - The purposes of administering and auditing Vocational Education and Training (VET), VET providers and VET programs;
  - Education related policy and research purposes; and
  - To assist in determining eligibility for training subsidies.
- > VET regulators to enable them to perform their VET regulatory functions
- > VET Admission Bodies for the purposes of administering VET and VET programs
- > Current and former Registered Training Organizations to enable them to deliver VET

Courses to thee individual meet their reporting obligations under the VET standards and government contracts and assist in determining eligibility for training subsidies:

- Schools for the purposes of delivering VET courses to the individual and reporting on these courses;
- The national Centre for Vocational Education Research for the purpose of creating authenticated VET transcripts, resolving problems with USIs and for the collection, preparation and auditing of national VET statics;
- Researchers for education and training related research purposes;
- Any other person or agency that may be authorized or required by law to access the information;
- Any entity contractually engaged by the Student Identifiers Registrar to assist in the performance of his or her functions in the administration of the USI system; and
- will not otherwise be disclosed without their consent unless authorized or requires by or under law.

#### **USI Privacy policy**

You can find further information on how the Student Identifiers Registrar collect, use, disclose and store personal information including sensitive information in Student Identifiers Registrar's Privacy Policy. The registrar's Privacy policy contains information about how you may access and seek corrections of the personal information held about you and how you may make a complaint about a breach of privacy by the Registrar in connection with the USI and how such complaints will be dealt with.

## **Student Checklist**

- □ Selected payment option
- □ Attached copy of Green Medicare/ Concession card.
- Attached Copy of Photo ID and Age Proof (Passport, Driver's Licence, etc.)
- □ Attached copy of proof of residence.
- □ Signed this form.
- Attached copies of your previous academic qualifications. *(if applicable)*
- Completed Funding Application form. *(if applicable)*
- □ For student under the age of 18, parent/ nominated guardian has signed this form
- □ For students applying for HLT54121-Diploma of Nursing, attach relevant evidence for meeting NMBA English Language Requirements (*refer to page 8 for more details*)

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All fields in this form are mandatory and must be completed.

### DECLARATION

- I have read and understood the student handbook and the course Brochure (available at www.ihna.edu.au)
- I am aware of all course details, units of competencies, duration, mode of delivery and fees for the course I am enrolling in.
- I would like to apply for enrolment with IHNA and agree to be bound by the policies and procedures set out by IHNA and I agree to maintain good and proper behaviour for the duration of my training. I understand my enrolment can be suspended or cancelled by the breach of IHNA policies and procedures, use inappropriate behaviour, or endanger myself or others.
- I declare that the information I have provided in this application is true and correct.
- I acknowledge and agree to the terms described in privacy statement including the USI privacy policy
- I have received the Course Handbook for students. I have fully advised the assessment processes involved in the course including the work experience placement and I acknowledge that I am willing to be assessed. I am aware that the Course Handbook is available on the Student Portal
- I have read and understood the work experience placement assessment section in the Course Handbook for students. Work experience placement (if it is a part of the course) will be arranged by IHNA with its preferred partners and specific requirements like Australian National police clearance, immunization (if required), WWCC (if applicable) should be met by the students before the placement.
- I have read and understood the course extension, refund, withdrawal, deferral, credit transfer and RPL policy published in IHNA website and Course Handbook (http://www.ihna.edu.au/policydocuments/listing)
- I am obliged to advise IHNA of my residential address in Australia, and advise any change in my address during the period I am enrolled in the course/s. This can be done through IHNA online portal "Student Hub"
- I am aware that it is a requirement of the VET Quality Framework that students can access personal information held by the Institute. Accordingly, if I wish to correct or update information, I shall apply to IHNA if I wish to review my own records.
- I understand that enrolling in this qualification and availing the relevant state funding, may affect student's future training options and the eligibility for further government subsidised training.
- I agree that the Institute reserves the right to change the particulars of the services, including changes to prices, courses, facilities and dates of programs where circumstances beyond the Institute's control necessitate such a change.
- I understand that all soft and hard copies of lessons and/ or any related material supplied by IHNA are copy-right, and any ٠ unauthorized copying is prohibited.

As a registered training organisation (RTO), IHNA collects your personal information so we can process and manage your enrolment in a vocational education and training (VET) course(s) with us. If you do not provide the required information as, we will not be able to enrol you as a student.

Please refer to our Privacy Policy for more details.

Applicant's Name:		
For students under 18 years of age:		
Parent/Guardian Name:		
Signature:	Date	

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All fields in this form are mandatory and must be completed.

ABOUT IHNA					
How did you hear about IHN	IA?				
□ Online		Please Specify:			
Friend/ Relative		Please Specify:			
Magazine/Advertiseme	ent				
□ Other		Please Specify:			
Refer a friend scheme		Please Specify:			
I agree that IHNA can take n promotional purposes.	ny photo, video footage, detai □ Do not agree	ils, achievements and fee	dback that may be used for		
•	ng materials such as emails, no	ewsletters etc. from IHNA	for the purpose of notifying		
FEEDBACK:					
Can you suggest any improv	vements to our pre-enrolmen	t information, applicatio	n/enrolment process?		
Please submit the completed a Email: <u>enquiry@ihna.edu.au</u> Post: To: Admissions, Institute of Hea	pplication form by e-mail or posi alth and Nursing Australia,	t to:			
Melbourne CBD	Melbourne CBD	Melbourne Heidelberg	Perth CBD		
Level 6, 131 Queen Street, Melbourne, VIC - 3000, Australia	Level 4 and 10, 399 Lonsdale Street, Melbourne, VIC - 3000, Australia	597-599 Upper Heidelberg Road, Heidelberg Heights, VIC 3081, Australia	Level 2 and 4, 12 St Georges Terrace, Perth, WA – 6000, Australia		
Sydney	Brisbane	Our Corporate office			
Level 7, 33 Argyle Street, Parramatta, NSW 2150, Australia	Level 3, 59, Adelaide Street, Brisbane, QLD - 4000, Australia	<b>North Melbourne</b> Level 2, 187 Boundary Roa North Melbourne, VIC - 30			
	If you have any questions please feel free to contact IHNA at Email: enquiry@ihna.edu.au Telephone: 1800 22 52 83				
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For Office Use Only:			
	Confirmed all sections of application form are complete		
	USI collected /Created and verified		
	Checked and approved student funding and/or VET Student Loan (If applicable)		
	Eligible for funding     Eligible	for VET Student Loan	Accessed VET Student Loans
	Completed LLN test		
	Created Wise net ID:		
	Checked and approved the payment plan		
	Confirmed the initial deposit for the commencement of the course has been received		
	Assessed and finalized RPL/Credit Transfer and informed change in fee to the accounts		
	Sent confirmation letter with Academic Hub details to the students		
Staff Name		Date	Signature

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