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| **FST COURSE ENROLMENT FORM****Introductory Health and Safety Representative Training Course TAFE East Perth*****PLEASE ENTER PREFERRED COURSE DATE:***   |
| **All information provided is strictly confidential and used only for WorkSafe WA reporting requirements. Please print neatly.** |
| **1. Participant details** |
| **Are you an elected Health and Safety Representative?**  **YES**  **NO** |
| **Given name/s:** | **Surname/family name:** |
| **Date of birth:** | * **Male**  **Female**  **Prefer not to say**
 |
| **Home address:** |
| **Mobile phone number:** (We need this so we can SMS you a course reminder) | **Business phone number:** |
| **Personal email address:** | **Work email address:** |
| **Occupation:** |
| **Where do you usually work in your current job?**  **Metropolitan area**  **Non-metropolitan area** |
| **Work address:** |
| **In which country were you born?** |
| * **Australia**
 | * **Another country** – please specify:
 |  |
| **Do you speak a language other than English at home?** |
| * **NO,** English only
 | * **YES** – please specify:
 |  |  |  |
| **Do you consider yourself to have a disability, impairment or long‐term condition?** |
| **NO ‐** go to question 2 **YES ‐** Please select the area(s) in the list below *(You may select more than one area)** Hearing/deaf  Learning  Vision
* Physical  Mental illness  Medical condition
* Intellectual  Acquired brain impairment  Other
 |
| **Do you need any additional support to complete this training course?** |
| * **NO**  **YES –** Please specify support required or contact FST to discuss your requirements:
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| **2. Employer details** |
| **Employer’s name:****Employer’s address:** |
| **My employer has given me permission to attend this course**  **YES**  **NO** |

**Please complete the next page of this form**

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| **3. Attendance authorisation and invoicing details** |
| **Details of the person to whom the invoice should be forwarded** |
| **Name:** | **Phone No:** |
| **Email:** | **Signature:** |
| **Cost Centre (if applicable):** | **Purchase Order No (if applicable):** |
| **4. Please tick the category below which best describes your employer’s industry:** |
| * Accommodation & Food Services
 | * Professional, Scientific & Technical Services
 |
| * Agriculture, Forestry & Fishing
 | * Public Administration and Safety
 |
| * Arts and Recreational Services
 | * Administrative & Support Services
 |
| * Construction
 | * Other Services
 |
| * Education and Training
 | * Rental, Hiring and Real Estate Services
 |
| * Electricity, Gas & Waste Services
 | * Retail Trade
 |
| * Financial & Insurance Services
 | * Transport, Postal and Warehousing
 |
| * Health Care & Social Assistance
 | * Wholesale trade
 |
| * Information Media & Telecommunications
 | * NOPSA
 |
| * Manufacturing
 | * Seafarers
 |
| * Mining (Onshore – Resources Safety)
 | * Other: *(please describe)*
 |
| **5. Please tick the category below which best describes your occupation:** |
| * **Managers and Administrators** including SchoolPrincipals, Directors, Mine Managers, Farm, Managers, Managing Supervisors, Commissioned Police Officers, Chief Executives, Trade Union Secretaries
 |
| * **Professionals** including Chemists, Teachers, Architects, Accountants, Engineers, Geologists, Metallurgists, Journalists, Actors, Librarians, Public Relations Officers, Registered Nurses
 |
| * **Para‐Professionals** including Technicians, Police Officers, Ships Captains, Welfare Officers, Safety Inspectors, Prison Officers
 |
| * **Tradespersons** including Fitters, Welders, Tilers, Hairdressers, Chefs, Tailors, Mechanics, Gardeners, Apprentices
 |
| * **Clerks** including Typists, Secretaries, Messengers, Computer Operators, Bookkeepers, Telephonists, Teachers Aides, Law Clerks
 |
| * **Salespersons and Personal Service Workers** including Travel Agents, Enrolled Nurses, Dental Nurses, Waiters, Insurance Brokers, Sales Representatives, Tellers, Cashiers, Beauty Therapists
 |
| * **Plant and Machine Operators** including Bus Drivers, Forklift Drivers, Crane Operators, Press Operators, Processing Machine Operators, Treatment Plant Operators, Mining Equipment Operators
 |
| * **Labourers and Related Workers** including Trades Assistants, Factory Hands and Cleaners, FarmHands, Meat Packers, Process Workers, Scaffolders, Riggers, Security Officers, Fishing Workers, Deckhands, Labourers, Miners
 |
| * **Not Stated/Other** *(please describe)***:**
 |
| **Please submit this enrolment form to:****EMAIL 1**: enrolment@felgatesafetytraining.com.au **OR****EMAIL 2**: Felgate.safety@bigpond.com |