

## Enrolment Form

### Dementia Care Skills for Aged Care Workers

#### CHCAGE005 – Provide support to people living with dementia

**Please complete ALL information CLEARLY and ensure that you sign page 4 to ensure that a Certificate can be issued.**

*It is a regulatory requirement of a registered training organisation (RTO) to report information about their training to the National VET Provider Collection managed by the National Centre for Vocational Education Research (NCVER). The information made available for these purposes will not identify individuals. For information on how data will be able to be accessed, refer to the NCVER's Data Access Protocols, available at [www.ncver.edu.au](http://www.ncver.edu.au).*

Course Location: STARS - Campsie

Commencement Date: 6 February 2017

**Unique Student Identifier (USI)**  
**From 1 January 2015, all Australians who undertake vocational education and training must hold a USI. If you do not hold a USI, Alzheimer's Australia Vic, by law, cannot issue you a Certificate, Statement of Attainment or Transcript for your training.**

**Section 1 - Unique Student Identifier**

- You **MUST** create a USI number via the website ([www.usi.gov.au](http://www.usi.gov.au)) OR complete the USI Consent form provided.
- Your USI will be a 10 character number made up of numbers and/or letters

What is your USI number?	<input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/>
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**Section 1 - Personal Details**

Surname (Legal Family Name)			
First Name (Legal Given Name)			
Title	• Mr	• Mrs	• Ms
Sex	• Female	• Male	
Date of Birth	Day:	Month:	Year:
Telephone	Home:	Work:	Mobile:
Email Address			
Residential Address ( <b>you must provide a residential address</b> )	Unit:	Number:	Street:
	Suburb:	Post Code:	
Postal Address (if different to residential address)	Unit	Number:	Street / PO Box:
	Suburb:	Post Code:	
Name of Employer	Name:	Suburb:	
Current Position			
Employment Type	• Community	• Residential	

<b>Section 2 - Language and Cultural Diversity</b>	
Are you of Aboriginal or Torres Strait Islander origin?	• No
	• Yes, Aboriginal
	• Yes, Torres Strait Islander
	• Yes, both Torres Strait Islander and Aboriginal
In which country were you born?	• Australia
	• Other - please specify
Which Town/City were you born in?	
Do you speak a language other than English at home?	• No – English only – Go to Section 3
	• Yes, other - please specify
How well do you speak English?	• Very well
	• Well
	• Not very well
	• Not at all

<b>Section 3 - Disability</b>	
Do you consider yourself to have a disability, impairment or long-term condition?	<ul style="list-style-type: none"> <li>• No – Go to Section 4</li> <li>• Yes – Go to next question</li> </ul>
If YES, please indicate areas of disability, impairment or long-term condition (You may indicate more than one)	• Hearing / Deaf
	• Physical
	• Intellectual
	• Learning
	• Mental Illness
	• Acquired Brain Impairment
	• Vision
	• Medical Condition
Do you require special assistance / consideration?	• No – Go to Section 4
	• Yes – Go to next question
If YES, is it due to	• Ethnicity
	• Disability
	• Learning support

<b>Section 4 - Schooling</b>	
What is your highest COMPLETED school level?  <b>(Tick ONE box only)</b>	• Year 12 or equivalent
	• Year 11 or equivalent
	• Year 10 or equivalent
	• Year 9 or equivalent
	• Year 8 or lower
	• Never attended school – Go to Section 5
In which <b>YEAR</b> did you complete that school level?	
Are you still attending secondary school?	• No
	• Yes
What is your Victorian Student Number (VSN)?	
	• Don't have one / Unknown

<b>Section 5 - Previous Qualification Achieved</b>	
Have you SUCCESSFULLY completed any of the following qualifications?	<ul style="list-style-type: none"> <li>• No – Go to Section 6</li> <li>• Yes – Go to next question</li> </ul>
If YES, then TICK ANY applicable boxes  Please ensure you identify whether the qualification is:  A – Australian E – Australian equivalent I – International	A E I <ul style="list-style-type: none"> <li>• • • Bachelor Degree or Higher Degree</li> <li>• • • Advanced Diploma or Associate Degree</li> <li>• • • Diploma (or Associate Diploma)</li> <li>• • • Certificate IV (or Advanced Certificate/Technician)</li> <li>• • • Certificate III (or Trade Certificate)</li> <li>• • • Certificate II</li> <li>• • • Certificate I</li> <li>• • • Certificates other than the above</li> </ul>

<b>Section 6 - Employment Details</b>	
Of the following categories, which BEST describes your current employment status?  <b>(Tick ONE box only)</b>	<ul style="list-style-type: none"> <li>• Full time</li> <li>• Part time</li> <li>• Self-employed – not employing others</li> <li>• Employer</li> <li>• Employed – unpaid worker in a family business</li> <li>• Unemployed – seeking full-time work</li> <li>• Unemployed – seeking part-time work</li> <li>• Not employed – not seeking employment</li> </ul>

<b>Section 7 - Study Reason</b>	
Of the following categories, which BEST describes your main reason for undertaking this course?  <b>(Tick ONE box only)</b>	<ul style="list-style-type: none"> <li>• To get a job</li> <li>• To develop my existing business</li> <li>• To start my own business</li> <li>• To try for a different career</li> <li>• To get a better job or promotion</li> <li>• It was a requirement of my job</li> <li>• I wanted extra skills for my job</li> <li>• To get into another course of study</li> <li>• For personal interest or self-development</li> </ul>

**As an RTO we must comply with standards which ensure that we deliver training and assessment that meets participants' needs.  
The following questions will allow your facilitator to establish any learning needs that you may have.**

<b>Section 9 - Pre-Training Review</b>	
<b>Do you have any special needs or concerns you would like to discuss with us before you commence the unit?</b>	
<b>Do you have any areas in literacy that you are concerned about?</b>	
<ul style="list-style-type: none"> <li>• Spelling      • Writing your assignments      • Comprehension      • Speaking      • Reading</li> <li>• Other, please specify:</li> </ul>	

Write the following fractions as percentages, for example,  $1/5 = 20\%$

$1/4 =$  \_\_\_\_\_       $1/2 =$  \_\_\_\_\_       $1/10 =$  \_\_\_\_\_

**Please read the passage below:**

Dorothy is a resident of the facility where you work. She has mild dementia and suffers with arthritis. Dorothy needs some assistance in dressing and drying herself after a shower. You have noticed she has not been her usual cheerful self the last two mornings you have been on duty. On Monday when you went in to wake her, Dorothy was crying and said she had hurt herself during the night. On inspection, you discover she had a small skin tear on her lower leg. Dorothy also appeared a little confused and did not recognise you. This has not happened before.

At the end of your shift, you need to document in the Progress Notes, all changes you have observed in Dorothy. Use the space below to do this.

Day:

Date:

Time of entry:

I declare that I completed the Pre-Training Review section of this enrolment form on my own and in the event my USI is incorrect, I authorize Alzheimer's Australia Vic to locate it via [www.usi.gov.au](http://www.usi.gov.au)

Signature \_\_\_\_\_

Alzheimer's Australia Victoria request that you provide the information necessary to complete this form. Information collected will only be used in the following way:

- If you DO NOT wish to receive information about other education courses tick this box
- The information collected will be used by Alzheimer's Australia Vic evaluation of the National Dementia Support Program.
- For more information please ask your facilitator.