



Nepean Community College

Data Consent Form

1. CONSENT TO USE AND DISCLOSURE OF PERSONAL INFORMATION TO THE DEPARTMENT OF EDUCATION AND COMMUNITIES AND OTHER GOVERNMENT AGENCIES

I _____
(First, middle and last Name)

Of _____
(current residential address)

Date of birth _____

understand and agree that, under the National Vocational Education and Training Regulator (Data Provision Requirements) Instrument 2020, Nepean Community College RTO Code: 1223 (NCC) is required to collect personal information (information or an opinion about me), collected from me, my parent or guardian, such as my name, Unique Student Identifier, date of birth, contact details, training outcomes and performance, sensitive personal information (including my ethnicity or health information) and other enrolment and training activity-related information (together Personal Information) and disclose that's Personal Information to the National Centre for Vocational Education Research Ltd (NCVER).

The Department may disclose my Personal Information to other Australian Government agencies, including those located in States and Territories outside New South Wales.

The above Government agencies may use my Personal Information for any purpose relating to the exercise of their government functions, including but not limited to the evaluation and assessment of my training, the determination of my eligibility to receive subsidised training or for any Fee Exemptions or Concessions.

My Personal Information may also be disclosed to other third parties if required by law.

I consent to the collection, use and disclosure of my Personal Information in the manner outlined above.

I also acknowledge and agree that the Department may contact me by telephone, email, or post, during or after I have ceased subsidised training with NCC for the purposes of evaluating and assessing my training.

Print Full Name:	
Signature:	Date: / /
Note: If under 18 years of age at the time of giving consent, then the consent of their guardian is required.	
Print Full Name of Guardian:	
Signature of Guardian:	Date: / /

END OF DOCUMENT