

If sending by mail, please mark 'Attention LVT Program'  
 POST PO Box 663 Ballarat VIC 3353 Australia  
 EMAIL lvt@federation.edu.au | WEB federation.edu.au  
 CALL (03) 5327 8071 or 1800 FED UNI | ABN 51 818 692 256

<b>Federation Student ID No. (if known)</b>	<b>USI No. (if known)</b>
<input type="text"/>	<input type="text"/>

Personal Details	
First name	<input type="text"/>
Other name/s	<input type="text"/>
Family name	<input type="text"/>
Title	<input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Miss <input type="radio"/> Dr <input type="radio"/> Other (please specify):
Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Country of birth	<input type="radio"/> Australia <input type="radio"/> Other (please specify):
Are you Aboriginal or Torres Strait Islander origin?	
<input type="radio"/> No <input type="radio"/> Yes, Aboriginal <input type="radio"/> Yes, Torres Strait Islander <input type="radio"/> Yes, both Aboriginal and Torres Strait Islander	
Citizenship/Residency Status	<input type="radio"/> Australian Citizen <input type="radio"/> New Zealand Citizen <input type="radio"/> Permanent Humanitarian Visa <input type="radio"/> Permanent Non-Humanitarian <input type="radio"/> Overseas Resident <input type="radio"/> Temporary Entry Permit
Driver Licence No.	<input type="text"/>

**Note:**  
 Please write the EXACT name that you used when you applied for your Unique Student Identifier (USI) including any middle names.

All questions must be answered for the enrolment to be processed. Please print in block letters using a blue or black pen.

Address Details	
Address	<input type="text"/>
Suburb/Town	<input type="text"/>
State/Territory	<input type="text"/>
Post code	<input type="text"/>
Mailing address (if different from above)	
Address	<input type="text"/>
Suburb/Town	<input type="text"/>
State/Territory	<input type="text"/>
Post code	<input type="text"/>
Phone (preferred)	<input type="text"/>
Phone (other)	<input type="text"/>
Email	<input type="text"/>

Please provide the physical address of where you **usually live** – street number and name not post office box. Do not provide any temporary address at which you reside for training, work or other purposes before returning to your home. If you are from a rural area use the address from your state or territory's 'rural property addressing' or 'numbering' system as your residential street address.

You **MUST** provide at least one phone number  
 You **MUST** provide the email address you check most regularly.

Business Details	
Business contact name	<input type="text"/>
Contact phone	<input type="text"/>
Name of business	<input type="text"/>
Address of business	<input type="text"/>
Suburb/Town	<input type="text"/>
State/Territory	<input type="text"/>
Post code	<input type="text"/>
Business email	<input type="text"/>
VicRoads LVT Licence no. of Business or include VicRoads Letter: (Mandatory)	
<input type="text"/>	

# VET (TAFE) Enrolment Form 2024 | VicRoads Licensed Vehicle Tester – UB0112AU

Select your course plus Pretest (Mandatory):		Fee
<input type="radio"/> Pretest: LVT Program	online	\$86.52
<input type="radio"/> Pretest: Admin unit	online	\$43.26
<input type="radio"/> Administration	online and class	\$494.40
<input type="radio"/> Pretest & Admin Program	online and class	\$537.66
<input type="radio"/> LPG session	1 day	\$587.04
<input type="radio"/> Structural Awareness unit	1 day	\$587.08
<input type="radio"/> Motorcycle LVT Program (includes administration)	3 days	\$1,557.36
<input type="radio"/> LVT Program	4 days	\$2,193.90
<input type="radio"/> Pretest & Full LVT	4 days	\$2,280.42
<input type="radio"/> Technical Inspection unit	2 days	\$1,390.50
<b>Total \$</b>		

## Location and choice of date/s: as per information sheet (dates cannot be guaranteed)

Bayswater

Ballarat

## Payment details

- Visa   
  Mastercard   
  American Express (AMEX)  
 Purchase Order (Payable to Federation University Australia and attached to application)

Invoice addressed to: (Payment will be received in this name)   
 Student   
 Business/Third Party

Card number:

Name on card:

Expiry Date:   /   /        Amount AUD \$:

Cardholders Signature: Must be signed by cardholder

Contact phone:

I accept the above terms and conditions and authorise Federation University to release my results to VicRoads and to my LVT Licence Holder

Signature  Date   /   /

Authorised RTO delegate:  Funding Code: **F**

Name

Position

Signature  Date   /   /

## Short course terms and conditions

### Payment

Full course fees are payable at the time of enrolment. If the tax invoice and receipt is to be addressed to a business/third party, please indicate in payment section below.

### Cancellations

Cancellations notified less than 48 hours prior to the course commencement date will NOT be refunded.

### General

- FedUni reserves the right to cancel or reschedule any course that does not have sufficient enrolment numbers or in the event of unforeseen circumstances. A refund or an alternate date and time will be offered.
- Please attach a **scan of your Drivers licence, VicRoads letter** if applicable plus your **Certificate III** in Light Vehicle Mechanical Technology or similar if working in industry less than 7 years.

NOTE – all units other than pretest include an in-class assessment onsite

## Student HQ Data Entry Record

### Student's data entered

YES   /   /

### Enrolment data entered

YES   /   /

### Student HQ Staff Signature



**Warning – Uncontrolled when printed! The current version of this document is kept on the Federation University website.**

Authorised by: Manager, Student Administration  
 Document Owner: University Registrar  
 Page 2 of 2

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