

Enrolment Form



Western Sydney
Recovery College

* Required fields

***Workshop Name**

***Workshop Date and Location**

<input type="text"/>	<input type="text"/>
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Student Information

*First Name

*Surname

Preferred Name e.g. *nickname*

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*Gender

Male Female Other

*Date of Birth *dd/mm/year*

*Address

*Suburb

*Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Address type

Home Work Mailing

If your work or home address is not located in Western Sydney, please explain how you are connected to or provide service in the area.

*Phone

*Mobile

*Email

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*Preferred Contact Method

Phone call Text message Email

Text Message Reminder

Yes

Emergency Contact

*First Name

*Surname

Relationship to student

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*Phone

*Mobile

<input type="text"/>	<input type="text"/>
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About you

Do you identify as:

Aboriginal Torres Strait Islander
 Both Neither

Country of birth

Language spoken at home

How would you best describe your experience with mental illness? *Choose one*

Carer Support Family Member Mental Health Worker Other
 Study Consumer Friend Volunteer

Continued over page

Which of the following would best describe your current work status?

- Full time employee Part time employee
 Volunteer Support employment
 Full time student Unemployed (seeking work)
 Unemployed (not seeking work) Retired

What is your occupation/area of work?
This may include volunteer positions

What is your highest level of education?

- Did not finish school Year 10 Year 12 Certificate
 Diploma Bachelor Degree Higher Degree

Do you have any specific needs in relation to learning or access that may assist us to improve your experience at Recovery College? e.g. wheelchair access, learning styles

Do you have any dietary needs? e.g. vegetarian, vegan. We cater for your needs where possible.

How did you hear about the Western Sydney Recovery College?

- Family/friend Mental Health Worker NGO/Support Worker GP
 Colleague Website Brochure Direct mail out

Other

Would you like to receive our electronic newsletter?

Privacy & Consent

- I consent to my information being collected to ensure Western Sydney Recovery College educators can meet my learning needs and for the purpose of evaluating the Recovery College program. I consent to my de-identified information to be used for statistical purposes for WentWest and the Department of Health. One Door Mental Health may use my personal information to train and educate professional staff and students for health research (this information will be de-identified).

As a service of One Door Mental Health, Western Sydney Recovery College complies with privacy legislation when collecting and storing personal and health information. One Door Mental Health is subject to privacy laws including but not limited to the Privacy and Personal Information Protection Act 1998 and the Health Records and Information Privacy Act 2002 which may affect the operation of this form.

Community Learning Growth

Phone: 02 9854 5541

Email: wsydrecoverycollege@onedoor.org.au

Web: www.wsydrecoverycollege.org.au

Mail: L3 81 Flushcombe Rd Blacktown NSW 2148



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