

Statement of Fees In accordance with the 2022 Guidelines about Fees Skills First Program

Course Start Date ____/____/____ Course End date ____/____/____ Estimated Duration 40 weeks

22484VIC Certificate I in EAL (Access) 500 hours

	Government Contribution (approx.)	Tuition per nominal hour 500 hours	Tuition fee (Rounded)	Materials & Amenities	Total Student Contribution
Standard fee (government-subsidised)*	\$ 3,500	\$ 1.20 per hour	\$600		\$600
Concession fee (government-subsidised)*	\$ 3,500	\$ 0.24 per hour	\$120		\$120
Fee for Service	\$0	\$ 3.38 per hour	\$1690	\$80	\$1770

22485VIC Certificate II in EAL (Access) 490 hours

	Government Contribution (approx.)	Tuition per nominal hour 490 hours	Tuition fee (Rounded)	Materials & Amenities	Total Student Contribution
Standard fee (government-subsidised)*	\$ 3,430	\$ 1.22 per hour	\$600		\$600
Concession fee (government-subsidised)*	\$ 3,430	\$ 0.24 per hour	\$120		\$120
Fee for Service	\$0	\$ 3.44 per hour	\$1690	\$80	\$1770

Tuition subsidies are provided through Victorian and Commonwealth Government funding under the Skills First program for eligible learners.
*For learners eligible for a government-subsidised place who are Aboriginal or Torres Strait Islander, Asylum Seeker, or who hold a valid Centrelink concession card.



STUDENT ID ENTERED IN SMS <input type="checkbox"/> ____/____/____	COURSE NAME Certificate II in EAL Frameworks (Access)
USI	COURSE CODE 22485VIC
STUDENT START DATE	COURSE END DATE

S1	22485VIC Certificate II in EAL (Access)	<input type="checkbox"/> VU22607 Explore community services
S2	22485VIC Certificate II in EAL (Access)	<input type="checkbox"/> VU22603 Read and write simple personal communications and transactional texts

1. PERSONAL DETAILS

Surname (Legal Family Name): _____ Given names (Legal Given Names) _____

Date of birth ____/____/____ Gender Male Female (Indeterminate/Intersex/Unspecified)

2. RESIDENTIAL ADDRESS

Building Property Name _____ Flat/ Unit Number _____ Street Number _____

Street name _____ Suburb _____ Postcode _____

3. POSTAL ADDRESS (if different to residential address)

PO Box _____ Suburb _____ Postcode _____

4. STUDENT CONTACT DETAILS

Phone (Home) _____ Work _____ Mobile _____

Email address _____ Alternative email address (optional) _____

Emergency contact name _____ Phone _____

5. CONCESSION

Do you hold a current Centrelink Concession Card? Yes No If Yes, copy attached (Mandatory)

Concession Card Type _____

Concession card Number _____

6. LANGUAGE AND CULTURAL DIVERSITY

1. In which country were you born?

- Australia
 Other – please specify _____

Town / City of Birth _____

2. I am

- an Australian citizen
 an Australian Permanent Resident (holder of a permanent visa)
 a New Zealand citizen
 none of the above

3. Do you speak a language other than English at home?

- No, English only Yes, other. Please specify which language

(if more than one language, indicate the one that is spoken most often)

4. Are you of Aboriginal or Torres Strait Islander origin?

- No Yes, Aboriginal Yes, Torres Strait Islander
(For persons of both Aboriginal or Torres Strait Islander origin, mark both 'Yes' boxes)

7. DISABILITY

1. Do you consider yourself to have a disability, impairment or long-term condition? Yes No

2. If YES, please indicate the area of disability, impairment or long-term condition? (You may indicate more than one area)

- Hearing/deaf Physical
 Intellectual Learning
 Mental illness Acquired brain impairment
 Vision Medical condition
 Other

8. SCHOOLING

1. What is your highest COMPLETED school level? (Tick ONE box only)

- Completed Year 12
 Completed Year 11
 Completed Year 10
 Completed Year 9 or equivalent
 Completed Year 8 or Lower
 Never attended school

2. Are you still attending secondary school? Yes No

9. PREVIOUS QUALIFICATIONS ACHIEVED

1. Have you SUCCESSFULLY completed any of the following qualifications?

- Yes No
- A E I Certificate I
A E I Certificate II
A E I Certificate III (or Trade Certificate)
A E I Certificate IV (or Advanced Certificate/Technician)
A E I Diploma (or Associate Diploma)
A E I Advanced Diploma or Associate Degree
A E I Bachelor Degree or Higher Degree
A E I Certificates other than the above

If yes, please select **one** of these Prior Education Achievement Recognition Identifiers for **ALL** applicable qualification levels.

A – Australian E – Australian Equivalent I – International

Note “Australian Equivalent” means you have had your overseas qualification assessed and formally recognised by an appropriate Government Authority. In Victoria this authority is the Overseas Qualification Unit.

If you have not had your qualification assessed and formally recognised in Australia, select “I – International”.

Note If you have multiple Prior Education Achievement Recognition Identifiers for any one qualification, use the following priority order to determine which identifier to use:

1. A – Australian, 2. E – Australian equivalent, 3. I - International

10. EMPLOYMENT

1. Of the following categories, which BEST describes your current employment status? (Tick **ONE** box only)

- Full-time employee
 Part-time employee
 Self-employed – not employing others
 Self Employed – employing others
 Employed – unpaid worker in a family business
 Unemployed seeking full-time work
 Unemployed – seeking part-time work
 Not employed – not seeking employment

ANH Student Agreement

This form is to be completed upon enrolment by each student enrolled in an accredited training course at Duke Street Community House.

Acknowledgment of receipt of information

I have been provided with a Student Handbook and have been inducted in the information on the topics listed below.

- Student selection, enrolment and induction/orientation procedures
- Qualification or accredited course information
- Marketing and advertising of course information
- Legislative requirements
- Fees, charges and refund policy
- Fee Schedule
- Student services
- Student support, welfare and guidance services
- Provision for language, literacy and numeracy assistance
- Access and equity policy and procedure
- Flexible learning and assessment procedures
- Competency based assessment
- Student access to accurate records policy and procedures
- Confidentiality procedure
- Employer contributing to learner’s training and assessment
- Complaints and appeals procedures
- Recognition arrangements for RPL and credit transfer
- Recognition of AQF qualifications and statements of attainment issued by another RTO

I am aware that Angliss Neighbourhood House will endeavour to ensure that I am able to complete the training and assessment as agreed. I also am aware that if there are circumstances that prevent the house fulfilling this agreement that arrangements will be made for my training and assessment to be completed by another suitable Registered Training Organisation. I also understand that if this type of situation occurs then the house will keep me informed of any such arrangements including any fee refunds. I also have been informed that I can access further information from the Angliss Neighbourhood House website www.anglissnh.au or ask my tutor.

For applicants eligible for government subsidised training under the Skills First initiative, the following statements apply

I have completed the Skills First Evidence of Student Eligibility and Student Declaration form. I declare that I am an Australia Citizen; or a holder of a permanent visa; or a holder of a Special Category Visa (sub class 444, New Zealand); or an East Timorese Asylum Seeker; or a holder of a Temporary Protection Visa Holder; or a holder of a referral form from the Asylum Seeker Resource Centre confirming me as an “Asylum Seeker”; or a holder of a referral form from the Australian Red Cross confirming me as a Victim of Human Trafficking.

I have been informed of the eligibility requirements for government subsidized training under the Skills First program, and that receiving funding at this time may impact on any future entitlements. In addition I understand and acknowledge that: providing any false information and/or failing to disclose any information relevant to my application for enrolment and/or failure to complete an application/enrolment form may result in withdrawal of any offer, particularly as it relates to my eligibility to obtain an offer for government subsidised training, and/or cancellation of enrolment at the discretion of Angliss Neighbourhood House. It is my responsibility to provide all relevant and required documentation. I am not a prisoner from the Judy Lazarus Transition Centre or a young person required to undertake a course of study pursuant to a community based order.

I authorise Angliss Neighbourhood House to check all available records to confirm that information provided is correct, particularly information pertaining to my eligibility for the Skills First funding.

I authorise ANH to take and use photos and video of me for publicity and promotion. It is my responsibility to inform others that I do not want myself filmed or photographed.

Student name _____ Student signature _____ Date ____/____/____

Use of your data - The Department uses student and training data, including personal information, for a range of VET purposes including administration, monitoring and planning.

A student's USI may be used for specific VET purposes including the verification of student data provided by ANH; the administration and audit of VET providers and programs; education-related policy and research purposes; and to assist in determining eligibility for training subsidies.

Disclosure of your data - As necessary and where lawful, the Department may disclose VET data, including personal information, to its contractors, other government agencies, professional bodies and/or other organisations for VET-related purposes. In particular, this includes disclosure of VET student and training data to the Commonwealth and the National Centre for Vocational Education Research (NCVER).

Legal and Regulatory - The Department's collection and handling of enrolment data and VSNs is authorised under the *Education and Training Reform Act 2006 (Vic)*. The Department is also authorised to collect and handle USIs in accordance with the *Student Identifiers Act 2014 (Cth)* and the *Student Identifiers Regulation 2014 (Cth)*.

Survey participation - You may be contacted to participate in a survey conducted by NCVER or a Department-endorsed project, audit or review relating to your training. This provides valuable feedback on the delivery of VET programs in Victoria. You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor.

NCVER will collect, hold, use and disclose your personal information in accordance with the *Privacy Act 1988 (Cth)*, the VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au). Please note you may opt out of the NCVER survey at the time of being contacted.

Consequences of not providing your information - Failure to provide your personal information may mean that it is not possible for you to enrol in VET and/or to obtain a Victorian Government VET subsidy.

Access, correction and complaints - You have the right to seek access to or correction of your own personal information. You may also complain if you believe your privacy has been breached.

For further information, please contact Angliss Neighbourhood House's Coordinator in the first instance by phone (03) 9687 9908 or email angnh@anglissnh.net.au.

Further information

For further information about the way the Department collects and handles personal information, including access, correction and complaints, go to <http://www.education.vic.gov.au/Pages/privacypolicy.aspx>.

For further information about Unique Student Identifiers, including access, correction and complaints, go to <http://www.usi.gov.au/Students/Pages/student-privacy.aspx>.

STUDENT DECLARATION AND CONSENT

- I acknowledge that I have read the *above privacy notice and declaration*.
- I declare that the information I have provided to the best of my knowledge is true and correct.
- I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

Name _____

Signature _____

Date ____/____/____

16. REFUND POLICY GUIDELINES

- Refunds are available and class fees will be refunded if student/participant notifies reception prior to the start of class that they will not be continuing with the enrolment.
- An administration charge of 20% of the class fee will be deducted from any class fee refund.
- Partial refunds are also available if a student/participant withdraws before the midway point of the term
- Refunds are not available for any fee of \$50 or less.
- A full refund will be given for any class cancelled by the house.
- The full Fees, Charges & Refunds Policy is available on the house website

2. Which of the following classifications BEST describes your current or recent occupation (Tick ONE box only)

(If never employed go to Question 4)

- Managers
- Professionals
- Technicians and Trade Workers
- Community and Personal Service Workers
- Clerical and Administrative Workers
- Sales Workers
- Machinery Operators and Drivers

3. Which of the following classifications BEST describes the Industry of your current or previous Employer?

- Agriculture, Forestry and Fishing
- Mining
- Manufacturing
- Electricity, Gas, Water and Waste Services
- Construction
- Wholesale Trade
- Retail Trade
- Accommodation and Food Services
- Transport, Postal and Warehousing
- Information Media and telecommunications
- Financial and Insurance Services
- Rental, Hiring and Real Estate Services
- Professional, Scientific and Technical Services
- Administrative and Support Services
- Public Administration and Safety
- Education and Training
- Health Care and Social Assistance
- Arts and Recreation Services
- Other Services

4. Of the following categories, which BEST describes your main reason for undertaking this program? (Tick ONE box only)

- To get a job
- To develop my existing business
- To start my own business
- To try for a different career
- To get a better job/promotion
- It was a requirement of my job
- I wanted extra skills for my job
- To get into another course of study
- For personal interest/self-development
- To get skills for community / voluntary work
- Other reasons

11. MARKETING

How did you hear about ANH?

- Visa grant letter
- JSA/Centrelink
- Newspaper article
- Advertisement
- Email/SMS
- HSS provider
- Friend/Relative
- AUSCO
- Internet
- Previous ANH Australia student
- DIBP Website

12. THIRD PARTY DETAILS (IF APPLICABLE)

- JA (Job Active)
- Work Cover
- Other

Organisation name _____

Contact name _____

Contact phone _____

Email _____

I authorise Angliss Neighbourhood House to give details of my course enrolment and progress to this organisation

Signature _____

Date ____/____/____

Payment options

- The above third party is also paying the course fees
- The fees are being paid by me

13. VICTORIAN STUDENT NUMBER (VSN)

To be completed by all students aged up to 24 years only:

Since 2009 in schools and since 2011 for vocational education and training (VET) organisations and Adult Community Education providers, a Victorian Student Number (VSN) has been allocated upon enrolment to each individual student aged up to 24 years. Students should report their VSN on all subsequent enrolments at a Victorian school or training organisation. In particular, students who are currently enrolled in either a VET provider or a Victorian school (including those already participating in a VET in schools program) should obtain their VSN from their current education or training organisation and report their VSN on this enrolment form.

Students who are enrolling for the first time since the VSN was introduced will get a new VSN. Enter your Victorian Student Number (VSN)

If you do not have a VSN, or do not know what it is, answer the following

Have you attended any Victorian school since 2009 or done any training with a Vocational Education and Training (VET) Registered Training Organisation or an Adult and Community Education provider in Victoria since 2011?

No – I have not attended a Victorian school since 2009, or a TAFE or other VET training provider since the beginning of 2011.

Yes - I have attended a Victorian school since 2009:

Name of most recent school attended:

_____ and / or

Yes – I have participated in training at a TAFE or other training organisation since the beginning of 2011

List the most recent training organisations with which you have participated in training in Victoria since 2011 (List up to 3 training organisations)

14. UNIQUE STUDENT IDENTIFIER (USI)

From 1 January 2015, Angliss Neighbourhood House can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we submit to NCVER. If you have not yet obtained a USI, you can apply for it directly at <https://www.usi.gov.au/students/create-your-usi> on a computer or mobile device.

You may already have a USI if you have done any nationally recognised training, which could include training at work, completing a first aid course or RSA (Responsible Service of Alcohol) course, getting a white card, or studying at a TAFE or training organisation.

It is important that you try to find out whether you already have a USI before attempting to create a new one. You should not have more than one USI. To check if you already have a USI, use the 'Forgotten USI' link on the USI website at:

<https://www.usi.gov.au/faqs/i-have-forgotten-my-usi>

If you are unsure if you have a USI, ANH can use the 'Existing USI Search' tool on www.usi.gov.au to check. Do you authorise ANH to check your USI records before applying for a new USI?

I, _____, the applicant, request and authorise ANH to check my USI records for an existing USI on my behalf before applying for a new one.

Enter your Unique Student identifier (If you already have one)

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and I authorise ANH to use it.

(Office Use Only) Verified: (please tick)

No, I don't have a USI.

If you would like ANH to apply for a USI on your behalf, you must authorise us to do so and declare that you have read the privacy information below. You must also provide some additional information as noted in this form so that we can apply for a USI on your behalf.

I, _____ authorise Angliss Neighbourhood House to apply, pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf. I have read the USI Consent notice below, and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed in the USI Consent notice, and NCVER policies, procedures and protocols published on NCVER's website at www.ncver.edu.au.

Signature: _____

Date: ____/____/____

If you wish ANH to apply for your USI on your behalf, we will need to verify your identity. Please provide details for **one** of the forms of identity below. **Please ensure that your name written on page 1 of this enrolment form is exactly the same as written in the document you provide below, including any middle names.**

- Australian Driver's Licence
- Medicare Card
- Australian Birth Certificate
- Australian Passport
- Non-Australian Passport (with Australian Visa)
- Immicard
- Citizenship Certificate
- Certificate of Registration by Descent.

In accordance with section 11 of the *Student Identifiers Act 2014*, ANH will securely destroy personal information which we collect from individuals solely for the purpose of applying for a USI on their behalf as soon as practicable after we have made the application or the information is no longer needed for that purpose, unless we are required by or under any other law to retain it.

USI Consent for collection, use or disclosure of personal information.

The following is provided to you on behalf of the Student Identifiers Registrar (Registrar). You are advised and agree that you understand and consent that the personal information you provide in connection with your application for a Unique Student Identifier (USI):

- is collected by the Registrar as authorised by the *Student Identifiers Act 2014*.
- is collected by the Registrar for the purposes of:
 - * applying for, verifying and giving a USI;
 - * resolving problems with a USI; and
 - * creating authenticated vocational education and training (VET) transcripts;
- may be disclosed to
 - * Commonwealth and State/Territory government departments and agencies and statutory bodies performing functions relating to VET for:
 - * the purposes of administering and auditing VET, VET providers and VET programs;
 - * education related policy and research purposes; and
 - * to assist in determining eligibility for training subsidies;
 - * VET Regulators to enable them to perform their VET regulatory functions;
 - * VET Admission Bodies for the purposes of administering VET and VET programs;
 - * current and former Registered Training Organisations to enable them to deliver VET courses to the individual, meet their reporting obligations under the VET standards and government contracts and assist in determining eligibility for training subsidies;
 - * schools for the purposes of delivering VET courses to the individual and reporting on these courses;
 - * the National Centre for Vocational Education Research for the purpose of creating authenticated VET transcripts, resolving problems with USIs and for the collection, preparation and auditing of national VET statistics;
 - * researchers for education and training related research purposes;
 - * any other person or agency that may be authorised or required by law to access the information;
 - * any entity contractually engaged by the Student Identifiers Registrar to assist in the performance of his or her functions in the administration of the USI system; and will not otherwise be disclosed without your consent unless authorised or required by or under law.
- The consequences for not providing the Registrar with some or all of your personal information are that the Registrar will not be able to issue you with a USI.

Privacy policies and complaints

You can find further information on how the Registrar collects, uses and discloses the personal information about you in the Registrar's Privacy Policy or by contacting the Registrar on usi@education.gov.au or telephone 1300 857 536, international enquiries +61 2 6240 8740. The Registrar's Privacy Policy contains information about how you may access and seek correction of the personal information held about you and how you may make a complaint about a breach of privacy by the Registrar in connection with the USI and how such complaints will be dealt with.

You may also make a complaint to the Information Commissioner about an interference with privacy pursuant to the Privacy Act 1988, including in relation to the misuse or interference of or unauthorised collection, use, access, modification or disclosure of USI's.

15. PRIVACY NOTICE AND DECLARATION

Under the *Data Provision Requirements 2012*, Angliss Neighbourhood House is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by Angliss neighbourhood House for statistical, regulatory and research purposes. Duke Street Community House may disclose your personal information for these purposes to third parties, including:

- School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Employer – if you are enrolled in training paid by your employer;
- Commonwealth and State or Territory government departments and authorised agencies;
- NCVER;
- Organisations conducting student surveys; and
- Researchers.

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- Issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts;
- facilitating statistics and research relating to education, including surveys;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

The Victorian Government, through the Department of Education and Training (the Department), develops, monitors and funds vocational education and training (VET) in Victoria. The Victorian Government is committed to ensuring that Victorians have access to appropriate and relevant VET services. Any personal information collected by the Department for VET purposes is protected in accordance with the *Privacy and Data Protection Act 2014 (Vic)* and the *Health Records Act 2001 (Vic)*.

And if the student's age is relevant to their eligibility, and the document produced from the list above does not include a date of birth (or if the date of birth has not been verified through use of the DVS), I have also sighted and retained a copy of one of the following

<input type="checkbox"/>	current drivers license	<input type="checkbox"/>	'Keypass' card	<input type="checkbox"/>	Not applicable
<input type="checkbox"/>	current learner permit	<input type="checkbox"/>	Proof of Age card		

And I have retained **ONE** of the following:

<input type="checkbox"/>	a copy of the original or certified copy; OR
<input type="checkbox"/>	the certified copy; OR
<input type="checkbox"/>	evidence as set out in Clause 2.5(c) of the Eligibility Guidelines [where verified through the DVS]; OR
<input type="checkbox"/>	declaration of sighting a digital green Medicare card [as set out in Clause 2.5(d) of the Eligibility Guidelines]; OR
<input type="checkbox"/>	a printed or electronic copy of a record from VEVO that confirms the student holds a valid Bridging Visa Class E, Safe Haven Enterprise Visa or Temporary Protection Visa.

And if the student's age is relevant to their eligibility, and the document produced from the list above does not include a date of birth (or if the date of birth has not been verified through use of the DVS), I have also sighted and retained a copy of one of the following

current drivers licence current learner permit Keypass' card Proof of Age card not applicable

TRAINING PROVIDER DECLARATION TO BE COMPLETED BY THE TRAINING PROVIDER

Number of Courses Student is currently eligible for:	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Number of skill sets student is currently eligible for:	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2
Eligibility exemption granted:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

Based on:

- discussion with the student; AND
- the evidence I have sighted (and retained a copy of) ; AND
- the information provided to me by the student in this form;

I believe that the above individual satisfies the Skills First Entitlement eligibility requirements as set out in the VET Funding Contract (the Contract) and the Guidelines About Eligibility (the Eligibility Guidelines) and is eligible for funding under the Skills First Program for the following program/s

.....

Where applicable I have also sighted and retained relevant evidence required to grant an exemption from eligibility requirements or other limits under any initiatives in Part C of Schedule 1 of the Contract and as specified in Attachment 4 of the Eligibility Guidelines.

I acknowledge that as the Training Provider's authorised delegate, I am responsible for ensuring that all parts of this form are complete. By signing this Declaration, I acknowledge that I have reviewed all sections and have confirmed they have been completed in full.

Authorised Training Provider Delegate	
Name	
Position	
Signed	
Date	

EDUCATION HISTORY ENROLMENT IN A QUALIFICATION Student Name **Number**

TO BE COMPLETED BY THE STUDENT – DON'T LEAVE ANY SECTION BLANK UNLESS YOU ARE ASKED TO SKIP A QUESTION OR GO TO THE DECLARATION – PLEASE ASK THE TRAINING PROVIDER FOR HELP IF YOU DON'T UNDERSTAND A QUESTION

Q1 What is the highest qualification (not including secondary or high school) that you have **completed**, or **expect to complete** at the time the training you are applying for is scheduled to start? (include code and full title of qualification if possible, for example, Certificate III in Aged Care. If you have not completed **any** qualification, write 'none')

Q2 How many other **Skills First funded** qualifications have you enrolled in that have started, or will start in the **same calendar year** as the qualification/s you are applying for now? (**Don't** include the qualification/s you are applying for now. **Do** include other qualification/s at this and other training providers you've enrolled in, but haven't started yet).

0	1	2	3	4+	(circle number)
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Q3 Not including the qualification/s you are applying for now, how many other **Skills First funded** skill sets and/or qualifications are you doing at the moment?

0	1	2	3	4+	(circle number)
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Q4 In your lifetime, how many **government funded** qualifications have you started that are at the same level as the one you are applying for now? If you are applying for a qualification on the Foundation Skills List, tick 'not applicable'.

0	1	2	3	4+	(circle number) <input type="checkbox"/> not applicable
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EDUCATION HISTORY ENROLMENT IN A SKILL SET

TO BE COMPLETED BY THE STUDENT – DON'T LEAVE ANY SECTION BLANK UNLESS YOU ARE ASKED TO SKIP A QUESTION OR GO TO

A '**skill set**' means a course with the title 'Course in...' or a single subject, or small group of subjects (for example 'Course in Family Violence', 'Infection control Skill Set (Retail)'). A '**qualification**' means a course that has 'Certificate' or 'Diploma' in the title (for example, 'Certificate III in Business')

Q1 How many other **Skills First funded** skill sets have you enrolled in that have started, or will start in the **same calendar year** as the skill set you are applying for now? (**Don't** include the skill set you are applying for now. **Do** include other skill sets at this and other training providers you've enrolled in, but haven't started yet).

0	1	2	3	4+	(circle number)
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Q2 Not including the skill set/s you are applying for now, how many other **Skills First funded** skill sets and/or qualifications are you doing at the moment?

0	1	2	3	4+	(circle number)
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Q3 Please tick any of these boxes if you are doing, or will start, one of the skill sets on this list:

<input type="checkbox"/> Infection Control Skill Set	<input type="checkbox"/> Construction Industry Skill Set	<input type="checkbox"/> Course in identifying and responding to family violence risk
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EDUCATION HISTORY STUDENT DECLARATION

I, (print your full name): _____.

In seeking to enrol in (write the code and full title of the qualification/s or skill set/s):

Declare the following to be true and accurate statements

I AM / AM NOT enrolled in a school, including government, non-government, independent, Catholic or home school. (circle the appropriate response)		
I AM / AM NOT enrolled in the Commonwealth Government's Skills for Education and Employment program. (circle the appropriate response)		
I understand that my enrolment in the above qualification/s and/or skill set/s may be subsidised by the Victorian and Commonwealth Government under the <i>Skills First</i> Program. I understand how my enrolment will affect my future training options and eligibility for further training under the <i>Skills First</i> program.		
I acknowledge and understand that I may be contacted by the Department of Education and Training or an agent to participate in a survey, interview or other questionnaire.		
Signed	_____	Date ____/____/____

NOTES Use this section to record additional detail, relevant eligibility information, including information used by the Training Provider to verify the student's eligibility that is not captured. **If there are no notes, write N/A**

COURSE INFORMATION

Your classes will be held at 2/11 Vipont Street, Footscray and modes of delivery includes classroom training, self-paced activities and homework.

Our administration office is located at 2 /11 Vipont Street, Footscray. Office hours are: 9.30 to 2.30pm Tuesday and Thursday.

Please note

The tuition fees as published are subject to change given individual circumstances at enrolment.

Eligibility for a government-subsidised place will be confirmed at the time of enrolment based on evidence provided.

You can choose to pay your fee in four easy instalments. Please speak to the administration office for more information.

In circumstances of financial hardship, individuals can request to be considered for a payment plan and/or a fee reduction or waiver.

Contact the administration office for more information.

Total fee _____

Student Name _____

Signature _____ Date ____/____/____

SKILLS FIRST PROGRAM - EVIDENCE OF ELIGIBILITY, CITIZENSHIP/RESIDENCY AND AGE

TO BE COMPLETED BY AN AUTHORISED DELEGATE OF THE TRAINING PROVIDER

I confirm that in relation to: (student's full name):	_____
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I have sighted ONE of the following:	
<input type="checkbox"/> Australian Birth Certificate (not Birth Extract)	<input type="checkbox"/> Current Australian Passport
<input type="checkbox"/> Current New Zealand Passport	<input type="checkbox"/> Australian Citizenship Certificate
<input type="checkbox"/> Current green Medicare card	<input type="checkbox"/> Australian Certificate of Registration by Descent
<input type="checkbox"/> A proxy declaration for individuals in exceptional circumstances as per Clauses 2.12 – 2.16 of the Guidelines About Eligibility (the Eligibility Guidelines)	<input type="checkbox"/> Formal confirmation of permanent residence granted by the Department of Home Affairs (or its successor) AND the student's foreign passport or ImmiCard.
<input type="checkbox"/> a Referral to Government Subsidised Training - Asylum Seekers' form from the Asylum Seeker Resource Centre or the Australian Red Cross	<input type="checkbox"/> Confirmation obtained from the Visa Entitlement Verification Online System (VEVO) that the student holds a valid Bridging Visa Class E, Safe Haven Enterprise Visa or Temporary Protection Visa.

By Either:	
<input type="checkbox"/>	viewing an original; OR
<input type="checkbox"/>	viewing a certified copy; OR
<input type="checkbox"/>	verifying through the Document Verification Service (DVS) [where it is possible to do so, and in accordance with Clause 2.5(c) of the Eligibility Guidelines]; OR
<input type="checkbox"/>	viewing a digital green Medicare card on a Digital Wallet app on the card holder's mobile device [in accordance with Clause 2.5(d) of the Eligibility Guidelines]; OR
<input type="checkbox"/>	relying on evidence sighted and retained as part of a previous enrolment [in accordance with Clause 2.8 of the Eligibility Guidelines] OR
<input type="checkbox"/>	viewing a printed or electronic record from VEVO that confirms a student holds valid Bridging Visa Class E, Safe Haven Enterprise Visa or Temporary Protection Visa.