

This form is to be used for assessing an individual's Entitlement to Funded Training and for collecting the necessary supporting evidence. Section I, II and III are to be completed.

Ι	You	our Personal Details						
First	Name	ne: Fam:	ily Name:					
Address:								
Prefe	Preferred communication mode: ☐ Email ☐ Phone ☐ SMS							
Phor	Phone: Email:							
II		ibility Questionnaire						
	1.	•						
		☐ An Australian Citizen						
		☐ A holder of a permanent visa						
		☐ A New Zealand citizen						
		☐ None of the above						
	2.	, ,						
		□ Yes □ No						
	If the above address is different from the address in Victoria please provide your address he							
	3. Which course are you seeking to enrol in?							
☐ EAL (Foundation Skills)								
	☐ Automotive							
	☐ Business and Management							
	☐ Marketing							
	4.	. Are you seeking to do RPL of your existing skills and	knowledge?					
		□ Yes □ No						
	5.	. Have you been referred under any particular training i	nitiative?					
		☐ Asylum seekers and victims of human trafficking initiative						
		☐ Retrenched employees						
		☐ Workers in transition program						
		☐ Single and teenage parents training initiative						
		☐ Letter of principal if transitioning from school (For Ap	prentice under 17 years)					
		☐ I have no referrals (go to no 7)						
		Do you have the relevant referral forms?						
		□ Yes □ No						

6. Do you have any current concession cards?



☐ Healthcare Card	
☐ Job Seekers Concession Card	
☐ Pensioner Concession Card	
□ Veteran's Gold Card	
☐ None of the above	



III Skills First Program Evidence of Eligibility and Student Declaration

SECTION A – EVIDENCE OF CITIZENSHIP/RESIDENCY AND AGE

TO BE COMPLETED BY AN AUTHORISED DELEGATE OF THE TRAINING PROVIDER – DON'T LEAVE ANY SECTIONS BLANK

	firm that for: ent's full name):						
I have sighted ONE of the following:							
	Australian Birth Certificate (not Birth Extract)		Current Australian Passport				
	Current New Zealand Passport		Australian Citizenship Certificate				
	Current green Medicare card		Australian Certificate of Registration by Descent				
	New Zealand Birth Certificate		New Zealand Citizenship Certificate				
	A proxy declaration for individuals in exceptional circumstances as per Clauses 2.11 2.15 of the Guidelines About Eligibility (the Eligibility Guidelines)		Formal confirmation of permanent residence granted by the Department of Home Affairs (or its successor) AND the student's foreign passport or ImmiCard.				
	a Referral to Government Subsidised Training - Asylun Seekers' form from the Asylum Seeker Resource Centre or the Australian Red Cross		Confirmation obtained from the Visa Entitlement Verification Online System (VEVO) that the student holds a valid Bridging Visa Class E, Safe Haven Enterprise Visa, Temporary Protection Visa or Bridging Visa Class F, or Humanitarian Stay (Temporary) (subclass 449) visa.				
By Either:							
	viewing an original; OR						
	viewing a certified copy; OR						
	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						
	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						
	relying on evidence sighted and retained as part of a previous enrolment [in accordance with Clause 2.8 of the Eligibility Guidelines]						
	viewing a printed or electronic record from VEVO that confirms a student holds valid Bridging Visa Class E, Safe Haven Enterprise Visa, Temporary Protection Visa or Bridging Visa Class F, or Humanitarian Stay (Temporary) (subclass 449) visa.						
And I have retained ONE of the following:							
	a copy of the original or certified copy; OR						
	the certified copy; OR						
	evidence as set out in Clause 2.5(c) of the Eligibility Guidelines [where verified through the DVS]; OR						



	declaration of sighting a digital green Medicare card [as set out in Clause 2.5(d) of the Eligibility Guidelines]; OR								
	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, Temporary Protection Visa or Bridging Visa Class F, or Humanitarian Stay (Temporary) (subclass 449) visa.								
				_	, , ,	ONLY IF		ce of citizenship/residency doo	es
	current d	rivers licenc	e	□ '	Keypass' c	ard		Current foreign passport	
	current le	earner permi	t		Proof of A	ge card		Not applicable	
SECT	TION R1 -	FDIICAT	ION HIST	rory (ENROI N	IENT IN A	OUALIE	ICATION)	
								,	
ARE	ASKED 7	TO SKIP	A QUEST	'ION C	R GO T	O THE D	ECLARA'	ΓΊΟΝ BLANK UNLESS YC ΓΊΟΝ – PLEASE ASK ΤΗ . QUESTION	
A 'ski	i ll set' mea							all group of subjects (for exam	ple
	alification' ma of Nurs		erse that has	s 'Certific	cate' or 'Di	ploma' in the	title (for ex	cample, 'Certificate III in Busine	ess',
Q1	What is the highest qualification that you have now , or expect to complete at the time the training you are applying for is scheduled to start? Don't include secondary or high school qualifications.								iing
	(include co		title of qual	ification	if possible		•	e III in Aged Care. If you have	not
Q2	How many other Skills First funded qualifications have you enrolled in that have started, or will start in same calendar year as the qualification/s you are applying for now?							the	
	Don't inc	clude the qu	alification/	s you are	applying t	for now.			
	Do include other qualification/s you've enrolled in a this or another training provider but haven't started yet.								
	0	1	2	<u></u> 3	4+	(tick number))		
Q3	Not including the qualification/s you are applying for now, how many other <i>Skills First</i> funded skill seand/or qualifications are you doing at the moment?							sets	
	0	1	2	□ 3	4+	(tick number))		
Q4	the one y							started that are at the same leve on the Foundation Skills Progra	
	<u> </u>	1	2	□ 3	4+	(tick number)	□ nc	t applicable	



[Note: Q5-8 has been deleted, not required]

FOR JOBTRAINER ENROLMENT ONLY

☐YES Declaration)	□NO	(tick ans.	wer)	(If 'NO', go to S	tuden			
,	ES' to Q9, have you previou	usly started a qualification	n under	· IohTrainer?				
YES	□ NO	(tick answer)		NO', go to Q12)				
If you answered 'YES' to Q10, are you applying to recommence in the same qualification that you already started under JobTrainer?								
YES	□NO	(tick answer) (If YE	ES' or 'I	NO', go to Student Dec	laration			
Are you 17 to 24 ye	ars old?							
YES	\square NO	(tick answer)	(If Y	YES', go to Student Dec	laratio			
Are you a job seeke	r?							
YES	□NO	(tick answer)	(If 'I	NO', go to Student Dec	laratio			
If you answered YI	ES' to Q13, tick any of these	e boxes if they apply to	you:					
I have a current and valid Health Care Card, Pensioner Concession Card or Veteran's Gold Card, or am the dependant of a card holder								
I have a letter fr will be, made redu	erhead that says I have	been, o						
☐ I have a separation certificate from my employer								
(If you ticked a box, go to Student Declaration)								
If you did not tick any of the boxes in Q14, you can make a declaration that you are a job seeker by ticking this box and signing this form.								
box and signing this	iorm.							

SECTION B2 - 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 THE DECLARATION – PLEASE ASK THE TRAINING PROVIDER FOR HELP IF YOU DON'T UNDERSTAND A QUESTION

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',).

dependant of a card holder



A 'qualification' means a course that has 'Certificate' or 'Diploma' in the title (for example, 'Certificate III in Business', 'Diploma of Nursing'). 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 set/s you've enrolled in at this or another training provider, but haven't started yet. $\prod 0$ $\prod 1$ $\prod 2$ \square 3 $\prod 4+$ (tick. number) $\mathbf{Q}2$ 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? $\Box 0$ $\prod 1$ $\prod 4+$ \square 2 (tick number) $\mathbf{Q}\mathbf{3}$ Please tick any of these boxes if you are doing, or will start, one of the skill sets on this list: Course in identifying and responding to family Construction Industry Skill Set violence risk Do you have a qualification at a Diploma level or higher? Q4 Yes No (tick answer) FOR JOBTRAINER ENROLMENT ONLY Are you seeking to enrol in a qualification under the JobTrainer? Note: You can only enrol in one skill set $\mathbf{Q}5$ under JobTrainer. □NO ☐ YES (tick answer) (If 'NO', go to Student Declaration) If you answered 'YES' to Q5, have you previously started a skill set under the JobTrainer? **Q**6 \square NO ☐ YES (tick answer) (If 'NO', go to Q8) If you answered 'YES' to Q6, are you applying to recommence in the same skill set that you already started $\mathbf{Q}7$ under JobTrainer? ☐ YES \square NO (tick answer) (If YES' or 'NO', go to Student Declaration) Are you 17 to 24 years old? **O**8 ☐ YES □NO (tick answer) (If 'YES', go to Student Declaration) Are you a job seeker? **Q**9 \square NO ☐ YES (tick answer) (If 'NO', go to Student Declaration) If you answered 'YES' to Q9, tick any of these boxes if they apply to you: **Q**10 I have a current and valid Health Care Card, Pensioner Concession Card or Veteran's Gold Card, or am the



	I have a letter from my employer or a company receiver on company letterhead that says I have been, or will be, made redundant or retrenched							
	☐ I have a separation certificate from my employer							
	(If you ticked a box, go to Student Declaration)							
Q 11	If you did not tick any of the boxes in Q10, you can make a declaration that you are a job seeker by ticking this box and signing this form.							
	I declare that I am currently unemployed.							
SEC.	FIONI D2 EDITOATIONI HICTORY (CTHEENT DECLADATION)							
	TION B3 – EDUCATION HISTORY (STUDENT DECLARATION)							
	UDENT DECLARATION							
I,	(print your full name):							
ai	n seeking to enrol in (write the code and full title of the qualification/s or skill et/s):							
De	clare the following to be true and accurate statements:							
•	I AM / AM NOT enrolled in a school, including government, non-g or home school. (<i>Tick the appropriate response</i>)	overnment, independent, Catholic						
 I AM / AM NOT enrolled in the Commonwealth Government's Skills for Education and Employment program. (Tick 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 Skills First Program. I understand how my enrolment will affect my future training options and eligibility for further training under the Skills First program.								
•	I acknowledge and understand that I may be contacted by the Department agent to participate in a survey, interview or other questionnaire.	of Education and Training or an						
SIGN	ED:	DATE:						
	t	J						

eligibility that is not captured in Sections A or B.

If there are no notes, write N/A



SECTION C – TRAINING PROVIDER DECLARATION

TO BE COMPLETED BY THE TRAINING PROVIDER - DON'T LEAVE ANY SECTIONS BLANK

Based on: