JobTrainer Skilled Capital application form

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| **Office use only** | Skilled Capital information entered into RTO Data | AVETAR Contract Number: |
| Actioned by: ETU member | Contract number |

Please complete **all** areas of this form. This form can be completed digitally or neatly using blue or black pen. Please note that we are unable to finalise your enrolment until you have provided all required information and supporting evidence.

# Personal details

Note: Your name and date of birth must match your enrolment form.

|  |  |  |  |
| --- | --- | --- | --- |
| First name | Your first name | Middle name | Your middle name, if any |
| Last name | Your last name | Date of birth | DD/MM/YYYY |

# Study information

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| --- | --- |
| What course do you want to enrol in for your JobTrainer Skilled Capital funding? | CHC30121 Certificate III in Early Childhood Education and Care  CHC50121 Diploma of Early Childhood Education and Care |

# Enrolment checklist

To be eligible for funding under JobTrainer Skilled Capital, you must:

* be an Australian citizen, a permanent resident, a New Zealand passport holder (resident in Australia for more than six months) or be a person who holds a visa that is identified as being eligible
* live or work in the ACT
* be at least 17 years old
* be a job seeker who is out of work and/or in receipt of income support payments.

For details on eligible visas or any other inquiries on eligibility requirements, please email the [YWCA Canberra Education and Training team](mailto:training@ywca-canberra.org.au) email or call 02 6185 2000.

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| **Required evidence to support enrolment** | **Attached** | **Office use: confirmation of receipt. Staff member to sign and date.** |
| Proof of Australian residency:   * Australian citizen: birth certificate, Australian passport, or green Medicare card * permanent resident: copy of visa or green Medicare card * New Zealand passport * copy of eligible visa. |  |  |
| Proof of living or working in the ACT |  |
| Proof of age (such as driver’s licence or birth certificate) |  |
| Copy of any health care card or pension card |  |
| Copies of previously completed qualifications |  |
| Proof of job seeker status |  |

# Student declaration

By ticking the following statements and signing this form, I declare that I have honestly and accurately provided information contained within the application form. I declare:

I have read, understood and completed all the details of this form and have been given the opportunity to ask any questions about the content or course prior to signing this agreement.

I have read and understood the requirements of the course as specified in the course information and the terms and conditions as set out in the *Student Handbook*.

Full name: Your full name

Signature:



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| **Office use only** | | | |
| Version number | Version date | Review due | Changes |
| 1 | November 2020 |  |  |
| 2 | November 2021 | November 2022 | Changes to course numbers, revised branding |