

AGENT / AGENCY DETAILS

Thank you for your interest in enrolling in GBCA. Please ensure that you answer ALL of the following questions to ensure correct processing of your enrolment. Please tick where appropriate.

AGENT NAME		AGENT OFFICE ADDRESS	
AGENCY NAME	AGENT PHONE NUMBER	AGENT EMAIL	

PERSONAL DETAILS

FIRST NAME*	FAMILY NAME (SURNAME)*	DATE OF BIRTH (DD/MM/YYYY)*	
		DAY	MONTH YEAR
GENDER*	COUNTRY OF BIRTH*	CITY/TOWN OF BIRTH*	
CURRENT ADDRESS*	SUBURB*	POSTCODE*	STATE*
PHONE NUMBER*	MOBILE NUMBER*	EMAIL ADDRESS*	
PROOF OF RESIDENCY STATUS (PROVIDE ONE)*	PROOF OF ADDRESS (PROVIDE ONE)* IF STUDENT IS OVER 18	PROOF OF ADDRESS (PROVIDE ONE)* IF STUDENT IS UNDER 18	REQUIRED DOCUMENTS (PLEASE PROVIDE ALL)
<input type="checkbox"/> Medicare <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Visa	<input type="checkbox"/> Student's driver licence <input type="checkbox"/> Student's bank statement <input type="checkbox"/> Student's utility bill	<input type="checkbox"/> Guardian's driver licence <input type="checkbox"/> Guardian's bank statement <input type="checkbox"/> Guardian's utility bill	<input type="checkbox"/> Certified copies of ID <input type="checkbox"/> A set of certified educational qualifications (such as secondary school qualifications or the equivalent).

EMERGENCY CONTACT (IN AUSTRALIA)*

FIRST NAME (IN CAPITAL)	FAMILY NAME (IN CAPITAL)	RELATIONSHIP TO STUDENT	CONTACT NUMBER	EMAIL
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THE COURSE YOU WANT TO STUDY AT GBCA

ENGLISH COURSES (DETERMINED BASED ON THE OUTCOME OF THE PLACEMENT TEST) I would like to study one of the following: <input type="checkbox"/> 10727NAT Certificate I in Spoken and Written English <input type="checkbox"/> 10728NAT Certificate II in Spoken and Written English <input type="checkbox"/> 10729NAT Certificate III in Spoken and Written English	VOCATIONAL COURSES DO YOU WISH TO APPLY FOR CREDIT TRANSFER (CT)?*	DO YOU WISH TO APPLY FOR RECOGNITION OF PRIOR LEARNING (RPL)?*
WHEN WOULD WISH TO START THE COURSE?	<div style="border: 1px solid black; padding: 5px;"> <p>YES (Evidence is required)</p> <p>NO</p> <p>Explanation: Have you previously undertaken formal learning that you think might be used to provide credit towards this course? Formal learning means a recognised course for which you have received a qualification and/or a statement of attainment or statement of results? Please refer to GBCA's Credit Transfer Policy and Procedure.</p> </div>	<div style="border: 1px solid black; padding: 5px;"> <p>YES (separate process is required)</p> <p>NO</p> <p>Explanation: Have you previously gained work skills/experience, or other life skills/experience that might be used to provide recognition of prior learning (RPL) towards this course? Please refer to GBCA's Recognition of Prior Learning Policy and Procedure.</p> </div>
<div style="border: 1px solid black; padding: 5px;"> <p>DAY MONTH YEAR</p> </div>		

ORIGIN / LANGUAGE BACKGROUND / SUPPORT

HOW WELL DO YOU SPEAK ENGLISH?*

NOT AT ALL NOT WELL WELL VERY WELL

MAIN LANGUAGE
SPOKEN AT HOME

HAVE YOU EVER TAKEN
AN IELTS TEST BEFORE?

NO YES

YES, BAND/SCORE

IELTS TEST DATE

DO YOU SUFFER FROM ANY DISABILITIES?*

NO YES

PLEASE INDICATE THE AREAS OF DISABILITY

ARE YOU ABORIGINAL OR TORRES STRAIT ISLANDER?*

NO YES, ABORIGINAL YES, TORRES STRAIT ISLANDER

DO YOU REQUIRE ADDITIONAL LEARNING SUPPORT?*

NO YES

YES, PLEASE SPECIFY

EDUCATIONAL / EMPLOYMENT HISTORY

WHAT IS YOUR HIGHEST COMPLETED SCHOOL LEVEL?*

WHAT YEAR DID YOU COMPLETE THIS SCHOOL LEVEL?*

ARE YOU STILL ATTENDING SECONDARY SCHOOL?*

NO YES

I HAVE SUCCESSFULLY COMPLETED OF THE FOLLOWING QUALIFICATIONS

RECOGNITION IDENTIFIER

IN YEAR

WHICH BEST DESCRIBES YOUR CURRENT EMPLOYMENT STATUS?*

WHICH BEST DESCRIBES YOUR MAIN REASON FOR UNDERTAKING THIS COURSE?*

WHICH OF THE FOLLOWING CLASSIFICATIONS BEST DESCRIBES YOUR CURRENT OR RECENT OCCUPATION?*

WHICH OF THE FOLLOWING BEST DESCRIBES THE INDUSTRY OF YOUR CURRENT OR PREVIOUS EMPLOYER?*

I HAVE USI, AND MY USI IS

I don't have USI, I will provide later.

PREVIOUS EDUCATION (MOST RECENT ONES)

YEARS ATTENDED (FROM-TO)

INSTITUTION (NAME AND LOCATION)

DEGREE/AWARD ATTAINED

WORK EXPERIENCE

YEARS EMPLOYED (FROM-TO)

EMPLOYER (NAME AND LOCATION)

POSITION HELD

GUARANTEE STATEMENT

GBCA is a member of the Australian Council for Private Education and Training (ACPET)'s Australian Student Tuition Assurance Scheme (ASTAS). Should GBCA be unable to provide your course there are measures in place to ensure you can continue to study, or, receive a refund of any unused tuition fees. For more information, visit: www.acpet.edu.au

PRIVACY NOTICE

Why we collect your personal information
As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us.

HOW WE USE YOUR PERSONAL INFORMATION

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

HOW WE DISCLOSE YOUR PERSONAL INFORMATION

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

HOW THE NCVER AND OTHER BODIES HANDLE YOUR PERSONAL INFORMATION

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the Privacy Act 1988 (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.

The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (DESE), Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation

- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf. The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at www.ncver.edu.au/privacy. If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below. DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how the DESE will handle your personal information, please refer to the DESE VET Privacy Notice at <https://www.dese.gov.au/national-vet-data/vetprivacy-notice>.

SURVEYS

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

Contact information

At any time, you may contact Global Business College of Australia on (03) 9041 3050 and GBCA's Policy 25 Privacy Policy at <http://gbc.edu.au/students>:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

TERMS AND CONDITIONS OF ENROLMENT

The Terms and Conditions of Enrolment apply equally to a new and/or continuing student unless otherwise specified. GBCA reserves the right to amend the Terms and Conditions of Enrolment at any time. A prospective student acknowledges and agrees to follow GBCA's policies and Procedures as published on www.gbc.edu.au

A prospective student acknowledges and agrees to follow the student Code of Behavior as following: The Student Code of Behaviour requires the following rights and expectation to be respected and adhered to at all times.

- The right to be treated with respect from others, to be treated fairly and without discrimination, regardless of religious, cultural,

racial and sexual differences, age, disability or socioeconomic status

- The right to be free from all forms of intimidation
- The right to work in a safe, clean, orderly and cooperative environment The right to have personal property (including computer files and student work) and the College property protected from damage or other misuse
- The right to have any disputes settled in a fair and rational manner (this is accomplished by the Complaints and Appeals Procedure)
- The right to work and learn in a supportive environment without interference from others
- The right to express and share ideas and to ask questions
- The right to be treated with politeness and courteously at all times
- The expectation to have GBCA's property protected from damage or other misuse (include obeying of any signs that specify use of GBCA's property: student kitchen, computer lab...)
- The expectation that students will not engage in copyright breaches, cheating or plagiarism
- The expectation that students will submit work when required.
- The expectation that students will be punctual for classes.
- The expectation that students will treat other students, GBCA's staff with respect and without discrimination.
- The expectation that students will at all times meet the requirements, terms and conditions contained in the Student application and enrolment form including payment of fees.
- The expectation that students will maintain consistent attendance by attending all classes and assessments.
- The expectation that students will attend all required classes and assessment as part of the requirement to progress through the course satisfactorily and complete the course in within the time frame notified in the Student application and enrolment form.
- The expectation that all fees will be paid by the due date.

ACKNOWLEDGEMENT

I have access to the electronic copies of the following documents from

www.gbc.edu.au/students:

- Course information and student handbook
- Complaints and Appeals policy and Procedure
- Refund Policy and Procedure

These policies and the availability of complaints and appeals processes do Not remove students' right to take action under Australia's consumer protection laws.

Please sign below.

ACKNOWLEDGEMENT AND CONSENT

YES

NO

I acknowledge and provide unconditional consent to my testimonial and/or photograph and/or video to be used in GBCA website, newspaper, poster, television, flyer and/or any other marketing whilst I am a current or former student of GBCA.

SIGNATURE OF STUDENT

SIGNATURE OF GUARDIAN (IF STUDENT IS UNDER 18)

PRE-TRAINING REVIEW

Instructions to the student: This document is part of our Pre-Training Review process. It is designed to gather information on your knowledge, skills, experience, career plans and hopes for the future. It will be considered in conjunction with your enrolment form, Language, Literacy and Numeracy assessment, Credit Transfer / RPL application documents and discussions with our staff. This will assist us to make sure the course is right for you and to customise your learning program. Please complete this document accurately, honestly and to the best of your ability.

1. DO YOU HAVE ANY INDUSTRY EXPERIENCE RELATING TO THE COURSE YOU APPLY FOR? IF YES, PLEASE PROVIDE DETAILS.*

NO YES

2. DO YOU HAVE ANY QUALIFICATION RELATING TO THE COURSE YOU APPLY FOR? IF YES, PLEASE PROVIDE DETAILS.*

NO YES

3. WHAT DO YOU HOPE TO ACHIEVE FROM THIS TRAINING PROGRAM?*

4. DO YOU WISH TO GO ON TO FURTHER STUDY AFTER COMPLETING THIS QUALIFICATION? IF SO, WHICH QUALIFICATION?

5. WHAT EMPLOYMENT ARE YOU HOPING TO ATTAIN AFTER COMPLETING THIS QUALIFICATION?*

6. HOW MANY HOURS PER WEEK YOU CAN DEDICATE TO STUDY THIS COURSE?*

7. BRIEFLY OUTLINE ANYTHING THAT MIGHT PREVENT YOU FROM PROGRESSING THROUGH THE TRAINING AND ASSESSMENT PROGRAM (E.G. PHYSICAL INJURIES, ADDITIONAL NEEDS, DISABILITIES, LANGUAGE BARRIERS, CHILDCARE/FAMILY RESPONSIBILITIES, FINANCIAL DIFFICULTIES, UPCOMING HOLIDAYS RELIGIOUS REQUIREMENTS ETC.):

8. HOW CAN WE HELP YOU TO OVERCOME THESE BARRIERS?

9. IF YOU HAVE ANY CONCERNS ABOUT ENROLLING INTO THIS COURSE, PLEASE DESCRIBE HERE.

10. DIGITAL LITERACY. THIS COURSE WILL REQUIRE YOU TO USE THE INTERNET, EMAIL, WORD, EXCEL, AND POWERPOINT. IN A FEW SENTENCES, PLEASE DESCRIBE YOUR EXPERIENCE AND PROFICIENCY USING COMPUTERS FOR INTERNET SEARCHING, DOCUMENT PREPARATION, EMAIL COMMUNICATION AND ANY ADDITIONAL FUNCTIONS.*

PLEASE TICK ALL THE STATEMENTS WHICH APPLY TO YOU*

I have access to a computer for internet, email & word processing

I am confident using email

I am confident using the internet to search for information, navigate websites and can move within and around screens

I am confident with basic word processing

I am confident with making basic presentations with PowerPoint (or similar, e.g. SlideShare)

SECTION B1 – EDUCATION HISTORY (ENROLMENT IN A QUALIFICATION)

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 'qualification' means a course that has 'Certificate' or 'Diploma' in the title (for example, 'Certificate III in Business', 'Diploma of Nursing').

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+

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?*

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+

0 1 2 3 4+

FOR JOBTRAINER ENROLMENT ONLY

Q9 ARE YOU SEEKING TO ENROL IN A QUALIFICATION UNDER THE JOBTRAINER INITIATIVE?
NOTE: YOU CAN ONLY ENROL IN ONE QUALIFICATION UNDER THE JOBTRAINER INITIATIVE.

NO YES

Q12 ARE YOU 17 TO 24 YEARS OLD?

NO YES

Q10 IF YOU ANSWERED 'YES' TO Q9, HAVE YOU PREVIOUSLY STARTED A QUALIFICATION UNDER THE JOBTRAINER INITIATIVE?

NO YES

Q13 ARE YOU A JOB SEEKER?

NO YES

Q11 IF YOU ANSWERED 'YES' TO Q10, ARE YOU APPLYING TO RECOMMENCE IN THE SAME QUALIFICATION THAT YOU ALREADY STARTED UNDER THE JOBTRAINER INITIATIVE?

NO YES

Q14 IF YOU ANSWERED 'YES' TO Q13, TICK ANY OF THESE BOXES IF THEY APPLY TO YOU:

NO YES

Q15 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.

NO YES

SECTION B3 – EDUCATION HISTORY (STUDENT DECLARATION)

I, _____
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:*

_____ enrolled in a school, including government, non-government, independent, Catholic or home school.

_____ enrolled in the Commonwealth Government's Skills for Education and Employment program.

- 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 of Education and Training or an agent to participate in a survey, interview or other questionnaire.

SIGNATURE OF STUDENT

SIGNATURE OF GUARDIAN

PRE-TRAINING REVIEW

OFFICE USE ONLY – TO BE COMPLETED BY SKILLS FIRST COURSE ADVISOR.

1. WHAT ARE THE STUDENT'S ASPIRATIONS AND INTERESTS THAT RELATE TO THE PROPOSED COURSE?

AS APPLICABLE, CONSIDER AND DOCUMENT:

- Career aspirations
- Interests
 - Strengths
 - Weaknesses
 - Reasons for enrolling in the course, including expectations and objectives
 - The likely job or further study prospects resulting from the training

RATIONALE:

The student should not be enrolled in a training program they are not interested in. The chosen training program links to likely job, participation and/or further study opportunities and/or access to training for disadvantaged learners.

2. WHAT EDUCATIONAL ATTAINMENTS AND CAPABILITIES DOES THE STUDENT CURRENTLY HAVE?

AS APPLICABLE, CONSIDER AND DOCUMENT:

- The student's existing educational attainment and capabilities including
- Prior learning
 - Whether the course entry requirements and pre-requisites are met
 - Employment experience
 - Volunteering

RATIONALE:

The student is enrolled in a training program that is at the appropriate level for them.

3. IF THE PROPOSED LEARNING INCLUDES PORTIONS DELIVERED ONLINE, DOES THE STUDENT HAVE THE REQUIRED DIGITAL CAPABILITY? DOES THE STUDENT FACE CHALLENGES OR BARRIERS WITH DIGITAL CAPABILITY OR ACCESS TO NECESSARY TECHNOLOGY?

AS APPLICABLE, CONSIDER AND DOCUMENT:

- Results of digital capability testing as determined using the training provider's PTR business process
- Student's level of confidence and selfassessment of digital capability
- Any additional digital capability support the student may require, to also be documented in the Training Plan

RATIONALE:

Proper consideration is given to whether the proposed learning strategies and materials in the TAS are appropriate for the student; and whether adjustments need to be made to suit the student's individual needs.

SKILLS FIRST PROGRAM - EVIDENCE OF ELIGIBILITY AND STUDENT DECLARATION

**OFFICE USE ONLY – TO BE COMPLETED BY AN AUTHORISED DELEGATE OF THE TRAINING PROVIDER
*DON'T LEAVE ANY SECTIONS BLANK.**

SECTION A – EVIDENCE OF CITIZENSHIP/RESIDENCY AND AGE

STUDENT'S FULL NAME

I confirm that in relation to:

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

A proxy declaration for individuals in
exceptional circumstances as per Clauses
2.12 – 2.16 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 - Asylum Seekers' form from the
Asylum Seeker Resource Centre or the
Australian Red Cross

BY EITHER:*

viewing an original; OR

viewing a certified copy; 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 accor-
dance with Clause 2.8 of the Eligibility
Guidelines] OR

verifying through the Document Verifica-
tion Service (DVS) [where it is possible
to do so, and in accordance with Clause
2.5(c) of the Eligibility Guidelines]; OR

AND I HAVE RETAINED ONE OF THE FOLLOWING:*

a copy of the original or certified copy;
OR

declaration of sighting a digital green
Medicare card [as set out in Clause
2.5(d) of the Eligibility Guidelines]; OR

evidence as set out in Clause 2.5(c) of
the Eligibility Guidelines [where verified
through the DVS]; OR

the certified copy; OR

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

'Keypass' card

Not applicable

current learner permit

Proof of Age card

SECTION C – TRAINING PROVIDER DECLARATION

OFFICE USE ONLY – TO BE COMPLETED BY THE TRAINING PROVIDER – *DON'T LEAVE ANY SECTIONS BLANK.

Number of qualifications student is currently eligible for:*

0	1	2
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Number of skill sets student is currently eligible for:

0	1	2
---	---	---

Eligibility exemption granted:*

NO	YES	N/A
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Based on:

- discussion with the student;
- the evidence I have sighted (and retained a copy of) in Section A; and
- the information provided to me by the student in Section B of 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): (write the code and full title of the program/s in which the student is seeking to enrol)

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 Sections A and B and have confirmed they have been completed in full.

AUTHORISED TRAINING PROVIDER DELEGATE

DELEGATE'S FULL NAME

DELEGATE'S POSITION

SIGNED

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 in Sections A or B. If there are no notes, write N/A

PRE-TRAINING REVIEW

OFFICE USE ONLY – TO BE COMPLETED BY TRAINING DEPARTMENT STAFF

1. DOES THE STUDENT HAVE THE MINIMUM LANGUAGE LITERACY AND NUMERACY (LLN) SKILLS TO SUCCESSFULLY COMPLETE THE PROGRAM?

AS APPLICABLE, CONSIDER AND DOCUMENT:

Results of LLN testing – as determined using the training provider’s business process for literacy and numeracy testing

- The AQF level of the proposed qualification
- Secondary school results
- Issues that may prevent the student from successfully completing the training
- Any additional LLN support the student may require, to also be documented in the Training Plan.

RATIONALE:

The results of LLN testing indicate that the student has the ability to successfully complete the training program, or can be provided with reasonable and accessible support to assist them to complete the training.

2. HAS THE STUDENT PREVIOUSLY ACQUIRED ANY RELEVANT COMPETENCIES?

AS APPLICABLE, CONSIDER AND DOCUMENT:

- RPL
- Recognition of current competency (RCC)
- Credit transfer
- The options offered to the student for applying competencies to this training program

RATIONALE:

The student does not undertake any unnecessary training that duplicates competencies.

3. ARE THE PROPOSED LEARNING STRATEGIES AND MATERIALS APPROPRIATE FOR THE STUDENT? DO THE LEARNING STRATEGIES AND MATERIALS POSE POTENTIAL ISSUES/CHALLENGES/BARRIERS FOR THE STUDENT?

AS APPLICABLE, CONSIDER AND DOCUMENT:

- Special needs
- Disability
- The student’s personal circumstances
- Preferred learning style
- Previously used methods of learning
- Adequacy/appropriateness of learning materials
- Any additional support or adjustments the student may require, to also be documented in the Training Plan

RATIONALE:

Proper consideration is given to whether the proposed learning strategies and materials in the TAS are appropriate for the student; and whether adjustments need to be made to suit the student’s individual needs.

SECTION C – TRAINING PROVIDER DECLARATION

OFFICE USE ONLY – TO BE COMPLETED BY THE TRAINING PROVIDER – *DON'T LEAVE ANY SECTIONS BLANK.

4. TAKING INTO ACCOUNT THE ASSESSMENTS MADE AT ITEMS 1 TO 4, IS ENROLMENT IN THE PROPOSED TRAINING PROGRAM SUITABLE, AND THE MOST SUITABLE TRAINING FOR THE STUDENT?

YES. DOCUMENT REASONS	YES, WITH DOCUMENT REASONS; AND IDENTIFIED SUPPORTS/ ADJUSTMENTS TO BE DOCUMENTED IN THE TRAINING PLAN	NO, DOCUMENT REASONS
(1) STUDENT ASPIRATION	LLN	
	Wellbeing support	
	Digital Capability	
(2) LLN RESULT	Career counselling	
	Academic Skills	
	Intervention support	
(3) RELEVANT EXPERIENCE (IF APPLICABLE)		

5. ALTERNATIVE ENROLMENT OFFERED?

YES. DOCUMENT REASONS	NO, DOCUMENT REASONS

GBCA TRAINING DEPARTMENT STAFF

FULL NAME

SIGNED