



Australian Careers Education Pty Ltd

CRICOS No: 03219A RTO No: 22424 | 347-351 Victoria Street, Brunswick VIC 3056
Phone: +61 3 9380 1414 | Facsimile: +61 3 9380 1811 | Email: info@ace.vic.edu.au | Website: www.ace.vic.edu.au

ENROLMENT FORM (Domestic)

This Enrolment Form is for **Eligible Domestic Students** (Fee for Service OR Victorian Government's *Skills First* Program) who have been assessed for eligibility requirements and have completed the Pre-Training Review (PTR).

Enrolment Process

1. Complete this form in its **entirety**
2. **Complete the Victorian Government's *Skills First* Program Evidence of Student Eligibility and Student Declaration Form**
3. Attach **certified true copies** of all the following supporting documentation **OR** present the original to the authorised delegate of ACE:
 - Evidence of Australian citizenship/residency or New Zealand Citizenship
 - One of the acceptable Australian Photo Identification: A current drivers licence, A current learner permit, A proof of Age Card or A "Keypass" Card.
 - Concession Card if applicable - Health Care Card or Gold Concession Card or Pensioner card etc.
 - Testamurs / Statements of Attainment for Nationally Recognised Training qualification(s) completed - if applicable

NB: Australian Careers Education (ACE) will not be able to proceed with your enrolment unless the required information is completed and all relevant documentation is provided. Failure to provide your personal information may mean that it is not possible for you to enrol in a VET qualification and/or to obtain a Victorian Government VET subsidy.

SECTION A: PROGRAM (QUALIFICATION / COURSE): Please Tick

	Course Code	Course Name
<input type="checkbox"/>	AUR30620	Certificate III in Light Vehicle Mechanical Technology
<input type="checkbox"/>	AUR40216	Certificate IV in Automotive Mechanical Diagnosis
<input type="checkbox"/>	SIT30821	Certificate III in Commercial Cookery
<input type="checkbox"/>	SIT40521	Certificate IV in Kitchen Management
<input type="checkbox"/>	SIT30722	Certificate III in Hospitality (Restaurant Front of House)
<input type="checkbox"/>	FBP30421	Certificate III in Bread Baking

SECTION B : APPLICANT DETAILS

1. Enter your Unique Student Identifier (USI):

If you do not have USI number - From 1 January 2015, ACE can be prevented from issuing you with a nationally recognized VET qualification of statement of attainment when you complete your course if you do not have a **Unique Student Identifier (USI)**. If you have not yet obtained a USI you can apply for it directly at <http://www.usi.gov.au/create-your-usi/>.

USI application through ACE

If you would like ACE to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>.

I _____ authorise ACE to apply pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf.

I have read and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>, and NCVET policies, procedures and protocols published on NCVET's website at www.ncver.edu.au.

Student Signature: _____ **Date:** _____

2. Title Mr Mrs Ms Miss Other _____

First Name (Legal Given Name) - _____

Middle Name (Legal Middle Name) - _____

Family Name (Legal Family Name) - _____

Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names. If you do not yet have a USI and want ACE to apply for a USI on your behalf, you must write your name, including any middle names, exactly as written in the identity document you choose to use for this purpose.

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3. Gender (tick one box only)	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Indeterminate/Intersex/Unspecified	4. Date of Birth	____ / ____ / ____ (DD/MM/YYYY)		
5. Citizenship / Residency Status	<input type="checkbox"/> Australian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> New Zealand Citizen				
6. Contact Details					
Telephone (Home)	()	Telephone (Work)	()		
Mobile Number		Email Address			
7. Usual Residence*					
<i>*Please provide the physical address (street number and name, not post office box) where you usually reside rather than any temporary address, at which you reside for training, work or other purposes before returning to your home. If you are from a rural area, use the address from your state's or territory's 'rural property addressing' or 'numbering' system as your residential street address.</i>					
Building/Property Name		Flat/Unit		Street Number	
Street Name					
Suburb, Locality or Town		State/Territory	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Postcode	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
8. Postal Address (if different from above)					
Building/Property Name		Flat/Unit		Street Number	
Street Name					
Suburb, Locality or Town		State/Territory	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Postcode	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
9. Emergency Contact Details					
Name		Relationship			
Telephone (Home)	()	Mobile Number			
SECTION C: LANGUAGE & CULTURAL DIVERSITY					
10. In which country were you born? <input type="checkbox"/> Australia <input type="checkbox"/> Other: _____ (please specify)	11. Town or city of birth: _____				
12. Do you speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)	<input type="checkbox"/> No, English only - go to Question 14 <input type="checkbox"/> Yes, other: _____ (please specify)				
13. How well do you speak English?	<input type="checkbox"/> Very Well <input type="checkbox"/> Well <input type="checkbox"/> Not Well <input type="checkbox"/> Not at All				
14. Are you of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander				
15. Are you an Asylum Seeker and/or Victim of Human Trafficking applicant?	<input type="checkbox"/> No <input type="checkbox"/> Yes (Referral Form is supplied - Yes / No [please circle])				
SECTION D: DISABILITY					
16. Do you consider yourself to have a disability, impairment or long-term condition?	<input type="checkbox"/> Yes (please indicate the areas of disability, impairment or long-term condition below) <input type="checkbox"/> No - go to Question 18				
<input type="checkbox"/> Hearing/Deaf	<input type="checkbox"/> Intellectual	<input type="checkbox"/> Physical	<input type="checkbox"/> Learning		
<input type="checkbox"/> Mental Illness	<input type="checkbox"/> Acquired Brain Impairment	<input type="checkbox"/> Vision	<input type="checkbox"/> Medical Condition		
<input type="checkbox"/> Other - please specify _____					
<i>If a disability, impairment or long-term condition has been identified above, please complete the Reasonable Adjustment / Special Needs Form (available on ACE's website under 'Forms') and attach to this enrolment form. Upon receipt, a Student Support Officer will contact you to discuss your needs further.</i>					



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SECTION E: EMPLOYMENT STATUS

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

- | | |
|--|--|
| <input type="checkbox"/> Full-time employee | <input type="checkbox"/> Part-time employee |
| <input type="checkbox"/> Self-Employed – not employing others | <input type="checkbox"/> Self-Employed – employing others |
| <input type="checkbox"/> Employed – unpaid worker in a family business | <input type="checkbox"/> Unemployed – seeking full-time work |
| <input type="checkbox"/> Unemployed – seeking part-time work | <input type="checkbox"/> Not employed – not seeking employment |

18. Which of the following classification BEST describes your current or recent occupation? (Tick ONE box only)

- | | | |
|--|---|---|
| <input type="checkbox"/> 1. Managers | <input type="checkbox"/> 2. Professionals | <input type="checkbox"/> 3. Technicians and Trade Workers |
| <input type="checkbox"/> 4. Community and Personal Service Workers | <input type="checkbox"/> 5. Clerical and Administrative Workers | <input type="checkbox"/> 6. Sales Workers |
| <input type="checkbox"/> 7. Machinery Operators and Drivers | <input type="checkbox"/> 8. Labourers | <input type="checkbox"/> 9. Other |

19. Which of the following classification BEST describes the Industry of your current or previous Employer? (Tick ONE box only)

- | | | |
|---|---|--|
| <input type="checkbox"/> A. Agriculture, Forestry & Fishing | <input type="checkbox"/> B. Mining | <input type="checkbox"/> C. Manufacturing |
| <input type="checkbox"/> D. Electricity/Gas/Water/Waste Services | <input type="checkbox"/> E. Construction | <input type="checkbox"/> F. Wholesale Trade |
| <input type="checkbox"/> G. Retail Trade | <input type="checkbox"/> H. Accommodation and Food Services | <input type="checkbox"/> I. Transport, Postal and Warehousing |
| <input type="checkbox"/> J. Information Media & telecommunications | <input type="checkbox"/> K. Financial and Insurance Services | <input type="checkbox"/> L. Rental, Hiring, and Real Estate Services |
| <input type="checkbox"/> M. Professional, Scientific and Technical Services | <input type="checkbox"/> N. Administrative and Support Services | <input type="checkbox"/> O. Public Administration & Safety |
| <input type="checkbox"/> P. Education and Training | <input type="checkbox"/> Q. Health Care & Social Assistance | <input type="checkbox"/> R. Arts and Recreation Services |
| <input type="checkbox"/> S. Other Services | | |

SECTION F: JOB SEEKER/ EMPLOYMENT SERVICES PROVIDER DETAILS (if applicable)

20. Have you been connected with Job Services Australia (JSA) Provider? Yes No

Provider Name		Location	
Case Manager Name		Email	
Telephone		Fax	

Do you have a Job Seeker Referral Form for ACE? Yes No

SECTION G: AUTOMOTIVE SUPPLY CHAIN TRAINING INITIATIVE DETAILS (if applicable)

21. Have you been Referred Training under Automotive Supply Chain Training Initiative?

- Yes – please supply details below No

Do you have a Referral Letter for ACE? Yes No

Case Manager Name		Email	
Telephone		Fax	

SECTION H: STUDENT DECLARATION

- I certify that the information provided by me on this form is true and correct to the best of my ability.
- I have been advised by ACE that I am seeking funds for my enrolment for above qualifications being subsidised by the Victorian and Commonwealth Governments under the Victorian Government's Skills First Program.
- I understand that enrolling in the above qualification, this may affect my future training options and eligibility for further government subsidised training under the Victorian Government's Skills First Program as I am only eligible for two government subsidised courses in a calendar year, two courses at a time and two courses at the same level in my lifetime.
- I have been advised by ACE that I may be contacted and requested to participate in a National Centre for Vocational Education Research (NCVER) survey or a Department-endorsed project or audit or review relating to your training.
- I am aware that an enrolment fee, materials fees and gap fee (difference in fees between Victorian Government's Skills First Program funded amount and ACE tuition fees) may apply on my enrolment and I agree to make a payment of such fees at the time of enrolment.

Applicant's Signature: _____ **Date:** ____/____/____

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SECTION I: VICTORIAN GOVERNMENT VET STUDENT ENROLMENT PRIVACY NOTICE

Privacy Notice (NCVER)

Under the *Data Provision Requirements 2012*, Australian Careers Education Pty Ltd (ACE) 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), may be used or disclosed by ACE for statistical, administrative, regulatory and research purposes. ACE may disclose your personal information for these purposes to:

- Commonwealth and State or Territory government departments and authorised agencies; and
- NCVER

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:

- Populating authenticated VET transcripts;
- Facilitating statistics and research relating to education, including surveys and data linkage;
- Pre-populating RTO student enrolment forms;
- Understanding how the VET market operates, for policy, workforce planning and consumer information; and
- Administering VET, including program administration, regulation, monitoring and evaluation.

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

NCVER will collect, hold, use and disclose your personal information in accordance with the Privacy Act 1988 (Cth), the National VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au). 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.

Victorian Government's VET Enrolment Privacy Notice

I understand/acknowledge that:

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).

Collection of your data

ACE is required to provide the Department with student and training activity data. This includes personal information collected in ACE's pre-enrolment and enrolment forms and unique identifiers such as the Victorian Student Number (VSN) and the Commonwealth's Unique Student Identifier (USI). ACE provides data to the Department in accordance with the Victorian VET Student Statistical Collection Guidelines, available at: <http://www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx>

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 ACE; 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. 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 ACE's Privacy Officer in the first instance by phone (03) 9380 1414 or email info@ace.vic.edu.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: <https://www.usi.gov.au/about/privacy-and-unique-student-identifier>

I acknowledge that I have read the Victorian Government's VET Enrolment Privacy Notice.

Applicant's Signature: _____ Date: ____/____/____

* Parent / Guardian Signature: _____ Date: ____/____/____

(*Parental/guardian consent is required for all students under the age of 18)

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SECTION J: NATIONAL VET DATA POLICY PRIVACY NOTICE

Why we collect your personal information

As a registered training organisation Australian Careers Education Pty Ltd (ACE), will 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 Employment and Workplace Relations (DEWR), 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 Australian Careers Education Pty Ltd (ACE) using the contact details listed below.

DEWR 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 DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at <https://www.dewr.gov.au/national-vet-data/vet-privacy-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 **Australian Careers Education Pty Ltd (ACE)** to:

- 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

Please contact ACE's Privacy Officer in the first instance by phone (03) 9380 1414 or email info@ace.vic.edu.au

I acknowledge that I have read the National VET Data Policy Privacy Notice.

Applicant's Signature: _____ Date: ____/____/____

* Parent / Guardian Signature: _____ Date: ____/____/____

(*Parental/guardian consent is required for all students under the age of 18)

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SKILLS FIRST PROGRAM - EVIDENCE OF ELIGIBILITY AND STUDENT DECLARATION FORM

SECTION A – EVIDENCE OF CITIZENSHIP/RESIDENCY

TO BE COMPLETED BY AN AUTHORISED DELEGATE OF ACE – DO NOT LEAVE ANY SECTION BLANK

I confirm that for:

(student's full name):

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"/> New Zealand Birth Certificate | <input type="checkbox"/> New Zealand Citizenship Certificate |
| <input type="checkbox"/> A proxy declaration for individuals in exceptional circumstances as per Clauses 2.13 – 2.17 of the Guidelines About Eligibility (the Eligibility Guidelines) | <input type="checkbox"/> confirmation via the Visa Entitlement Verification Online System (VEVO) of permanent residence AND the student's foreign passport or ImmiCard |
| <input type="checkbox"/> confirmation that the student meets the eligibility criteria for the Asylum Seeker VET Program. | |

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 Guidelines About Eligibility*]; **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 Guidelines About Eligibility*]; **OR**
- relying on evidence sighted and retained as part of a previous enrolment [*in accordance with Clause 2.10 of the Guidelines About Eligibility*]; **OR**
- verifying through VEVO, and viewing supporting evidence, if required [*in accordance with Clause 2.5(e) or (f) or 2.7(a) or (b) of the Guidelines About Eligibility*].

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 Guidelines About Eligibility [*where verified through the DVS*]; **OR**
- declaration of sighting a digital green Medicare card [*as set out in Clause 2.5(d) of the Guidelines About Eligibility*]; **OR**
- evidence as set out in Clause 2.5(e) or (f) or 2.7(a) or (b) of the Guidelines About Eligibility [*where verified through VEVO*]; **OR**
- declaration of sighting a document where a student has objected to their document being retained [*as set out in clause 2.6 of the Guidelines About Eligibility*].

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SECTION B – STUDENT DECLARATION

TO BE COMPLETED BY THE STUDENT – DON'T LEAVE ANY QUESTION BLANK UNLESS YOU ARE ASKED TO SKIP A QUESTION OR GO TO THE DECLARATION. PLEASE ASK THE AUTHORISED DELEGATE OF ACE FOR HELP IF YOU DON'T UNDERSTAND A QUESTION.

Q1 Write the name of the course/s you're applying for

Q2 Are you doing, or have you done any other Skills First training in 2024? Tick your response.

- No
 Yes - write the course name(s) below. Include training you haven't started yet.

Q3 Are you enrolled in a school, including government, non-government, independent, Catholic or home school?

- No
 Yes

Q4 Are you enrolled in the Commonwealth Government's Skills for Education and Employment program?

- No
 Yes

Student declaration – read and complete the declaration below.

- I understand that my enrolment may be subsidised by the Victorian and Commonwealth Government under the Skills First Program. I understand my enrolment may affect my eligibility for more Skills First training.
- I understand that the Department of Jobs, Skills, Industry and Regions may contact me to participate in a survey or interview.
- I declare the information in this form is true and accurate.

Name:	
Signature:	
Date:	



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SECTION C – TRAINING PROVIDER DECLARATION

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

Program(s) the student is seeking to enrol in (include program code and name):

--

Based on:

- the evidence I have sighted and retained in Section A;
- the information the student has provided, including in Section B; and
- any additional information I acquired and recorded in 'notes' section below;

I confirm the student is eligible for Skills First funding for the program/s listed above because they:

- are an Australian or New Zealand citizen, or permanent resident of Australia, or eligible for the Asylum Seeker VET Program;
- are not enrolled in a school (except if they are doing a School Based Apprenticeship or Traineeship);
- will not be:
 - commencing more than 2 Skills First AQF qualifications in the same year
 - commencing more than 2 Skills First Skills Sets in the same year
 - doing more than 2 Skills First programs at the same time; and
- (if applicable) are enrolling in a Foundation Skills Program, and they:
 - do not currently hold a qualification at AQF level 5 (Diploma) or higher,
 - are not enrolled in the Commonwealth Government's 'Skills for Education and Employment' (SEE) program.

Authorised training provider declaration

By signing this declaration, I acknowledge that:

- I am responsible for ensuring that all parts of this form are complete.
- I have reviewed Sections A and B and have confirmed they have been completed in full.

Name:	
Position:	
Signature:	
Date:	

Notes

Record additional details or eligibility information, including information you used to verify the student's eligibility that is not captured in Sections A or B.
If there are no notes, write N/A