

# CENTRE FOR COMMUNITY WELFARE TRAINING



Application Pack

Smart and Skilled Subsidised Training

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## Acknowledgements

This work has been produced by Linda Watson, CCWT.

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## Contact ACWA/CCWT

Locked Bag 13  
Haymarket NSW 1240

Level 4, 699 George Street  
(Near Ultimo Road)  
Sydney NSW 2000

Phone: (02) 9281 8822  
Email: [ccwt@acwa.asn.au](mailto:ccwt@acwa.asn.au)

[www.ccwt.edu.au](http://www.ccwt.edu.au)

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## Purpose

The purpose of this Information and Application Pack is to provide you with the information you need to enrol in training under the Smart and Skilled funding scheme, and to meet the requirements of your course.

You can also phone or email CCWT for more information.

To phone call (02) 9281 8822 and ask to speak to the person in charge of the qualification you would like to study.

Or you can email [ccwt@acwa.asn.au](mailto:ccwt@acwa.asn.au) and the email will be directed to the most suitable person.

For general enquires phone Linda Watson, Director or email [linda@acwa.asn.au](mailto:linda@acwa.asn.au)

## Enrolment Procedure

To enrol in this qualification the following steps will be followed:

**Check eligibility:** We will check your eligibility for the program. A general guide of eligibility is included in the table below. All students must meet Criteria 1. However, further conditions apply for people on Centrelink benefits, people with a disability or Aboriginal people. If you are not sure of your eligibility please discuss it with us.

You will be asked to provide proof of eligibility and will be informed of what type of evidence is acceptable. Your Provider will take you through a Proof of Eligibility Checklist on enrolment. You will be required to provide some documents and sign statements.

For a student to be eligible for a Smart and Skilled funded place they must meet the following eligibility requirements:	
Type of training	Eligibility criteria
For all Smart and Skilled Courses	<ul style="list-style-type: none"><li>• Australian citizen, permanent resident, humanitarian visa holder, or New Zealand citizen, and</li><li>• aged 15 years or older, and</li><li>• left school, and</li><li>• live or work in New South Wales (or a defined NSW border)</li><li>• Any student registered as a NSW Apprentice or New Entrant Trainee</li></ul>
Part qualifications, prevocational training and full qualifications from Certificate IV to Advanced Diploma	<ul style="list-style-type: none"><li>• Can have any level of Qualification</li></ul>

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All	<ul style="list-style-type: none"><li>• Enrolling student must reside the postcodes designated in the Funding Contract</li></ul>
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**Declarations:** You will also be required to sign the following documents:

- Prospective Student Declaration (page 5)

**Pre-enrolment information:** You should by now have received the Pre-Enrolment Information Book which includes the following topics:

- Recognition of Prior Learning and Credit Transfer information
- Consumer protection information
- Subcontractor information if relevant
- What a student should do if they wish to defer or discontinue training
- How students can access support during training
- Contact details for any support services provided
- The fees chargeable

Please contact CCWT if you do not have a copy of this booklet.

**Accessing Smart and Skilled funding:**

CCWT needs to collect information on you and your previous studies prior to issuing you an accurate quote. This includes making a decision about which subjects can be completed by RPL or are eligible for credit transfer. Any changes to this will affect your student administration fee and you may be required to pay more, or to receive a refund.

If you would like to receive information on your Student Administration fee please access our application survey using the following link: <https://www.surveymonkey.com/r/CCWTsmartskilled>

Then complete the Application Form on pages 7 – 9

In addition, you will need to email any transcripts from previously completed studies to [assessment@acwa.asn.au](mailto:assessment@acwa.asn.au)

On receipt of your survey results and your transcripts, CCWT will obtain a quote for your qualification and will be in contact to discuss this with you.

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## Prospective Student Declaration

I,  
(First middle and last name)

Of  
Current residential address)

With date of birth

Declare that all information provided by myself to the Association of Children's Welfare Agencies in connection with the Notification of Enrolment Process is true, accurate, complete and not misleading in any way.

I have been informed of (delete as relevant)

- that there is no subcontracting arrangement in place
- the fees chargeable
- the Student Information as follows:
  - Recognition of Prior Learning and Credit Transfer
  - Consumer protection information
  - What a student should do if they wish to defer or discontinue training
  - How students can access support during training
  - Contact details for any support services provided

I also understand and agree that personal information (information or an opinion about me), collected from me, such as my name, Unique Student Identifier, date of birth, contact details, training outcomes and performance, or sensitive personal information (including my ethnicity or health information) (together **Personal Information**) collected by Association of Children's Welfare Agencies may be disclosed to the Training Services NSW, Department of Industry (**Department**).

The Department may disclose my personal information to other Australian government agencies, including those located in States and Territories outside New South Wales.

The above government agencies may use my Personal Information for any purpose relating to the exercise of their government functions, including but not limited to the evaluation and assessment of my training, the determination of my eligibility to receive subsidised training or for any Fee Exemption or Concessions. My Personal Information may also be disclosed to other third parties if required by law.

I consent to the collection, use and disclosure of my Personal Information in the manner outlined above.

I also acknowledge and agree that the Department may contact me by telephone, email or post during or after I have ceased subsidised training with Association of Children's Welfare Agencies for the purposes of evaluating and assessing my subsidised training.

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Print Full Name of Student:

Signature:

Or check the following box:

I agree to the collection of information as outlined above.

Date:

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## Personal Details

<b>First Name</b>			
<b>Family Name</b>			
<b>Date of Birth</b>			
<b>Home Address</b>			
<b>Gender</b>			
<b>USI</b> <i>(see Pre-enrolment booklet)</i>			
<b>Mobile phone</b>		<b>Day time phone contact</b>	
<b>Email</b>			

## Your Workplace

<b>Organisation name:</b>			
<b>Job Title</b>			
<b>Postal Address of Workplace</b>			
<b>Phone</b> (if different from above)			
<b>Email</b> (if different from above)			
<b>Please indicate the type of organisation that you work for:</b>			
<input type="checkbox"/>	Private sector	<input type="checkbox"/>	Local Government
<input type="checkbox"/>	Group Training Scheme	<input type="checkbox"/>	State Government
<input type="checkbox"/>	Government Business Employee	<input type="checkbox"/>	Commonwealth Government

<input type="checkbox"/>	Other		
<b>Of the following, which best describes your employment status?</b>			
<input type="checkbox"/>	Full time employee	<input type="checkbox"/>	Part time employee
<input type="checkbox"/>	Self employed and not employing others	<input type="checkbox"/>	Employer

<b>Dietary Requirements</b>			
Gluten Free?	<input type="checkbox"/>	Vegetarian?	<input type="checkbox"/>
Will you need special assistance during training and/or assessment including literacy support? <input type="checkbox"/>			
If yes, please specify:			

<b>Reason for studying:</b>			
Of the following categories, which <b>ONE BEST</b> describes your main reason for undertaking this course:			
<input type="checkbox"/>	To get a better job or promotion	<input type="checkbox"/>	For personal interest or self development
<input type="checkbox"/>	To try for a different career	<input type="checkbox"/>	To start my own business
<input type="checkbox"/>	It was a requirement of my job	<input type="checkbox"/>	To develop my existing business
<input type="checkbox"/>	I wanted extra skills for my job	<input type="checkbox"/>	To get into another course of study
<input type="checkbox"/>	Other reasons		

<b>Cultural and Linguistic Background</b>			
Do you have a disability? Yes/ No			
If yes, please indicate the area of disability, impairment or long term condition			
<input type="checkbox"/>	Hearing	<input type="checkbox"/>	Intellectual
<input type="checkbox"/>	Vision	<input type="checkbox"/>	Physical
<input type="checkbox"/>	Learning	<input type="checkbox"/>	Medical condition
<input type="checkbox"/>	Mental health	<input type="checkbox"/>	Acquired brain impairment
<input type="checkbox"/>	Other		
Are you of Aboriginal or Torres Strait Islander background?			
<input type="checkbox"/>	No	<input type="checkbox"/>	Yes, Aboriginal
<input type="checkbox"/>	Yes, Torres Strait Islander	<input type="checkbox"/>	Yes, both Aboriginal and Torres Strait Islander
Do you speak a language other than English at home?			
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Please specify which language			



If you speak a language other than English at home, 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
<b>What is your residency status?</b>			
<input type="checkbox"/>	Australian citizen		
<input type="checkbox"/>	Australian permanent resident		
<input type="checkbox"/>	New Zealand citizen		
<input type="checkbox"/>	Humanitarian visa holder		
<b>Educational Status</b>			
What was the highest level of primary/secondary school that you completed?			
<input type="checkbox"/>	Did not go to school	<input type="checkbox"/>	Year 8 or below
<input type="checkbox"/>	Year 9 or equivalent	<input type="checkbox"/>	Completed Year 10
<input type="checkbox"/>	Completed Year 11	<input type="checkbox"/>	Completed Year 12
Please indicate in which year you completed your schooling			
Have you successfully completed any qualification since leaving school?			
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes, please tick all applicable:			
<input type="checkbox"/>	Bachelor degree or higher	<input type="checkbox"/>	Advanced Diploma or Associate Degree
<input type="checkbox"/>	Diploma or Associate Diploma	<input type="checkbox"/>	Certificate IV or advanced trade certificate/technician
<input type="checkbox"/>	Certificate III or trade qualification	<input type="checkbox"/>	Certificate II
<input type="checkbox"/>	Certificate I	<input type="checkbox"/>	Certificates other than the above



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