

Department of the Prime Minister and Cabinet

10412NAT



# Certificate II in Indigenous Leadership

# **Application form**

Name:	Sex:		Male	☐ Female	
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Date of Birth:

Which course location are you applying for?



National Registration Code: 88105

N.B. All residential workshops are mandatory and there is coursework before and in between each workshop.

# **UNITS OF COMPETENCY**

- VU21059 Develop Leadership Skills as a Member of an Indigenous Community
- SITXCOM201 Show Social and Cultural Sensitivity
- BSBCMM201A Communicate in the Workplace
- BSBCUS201B Deliver a Service to Customers
- BSBWOR202A Organise and Complete Daily Work Activities
- CUFRES201A Collect and Organise Content for Broadcast or Publication
- CHCNET301D Participate in Networks
- CHCCS211B Prepare for Work in the Community Sector

Provide details of the primary contact person for the application:			
Unique Student Identifier (USI) If you do not have one please visit <a href="www.usi.gov.au">www.usi.gov.au</a> to create your USI.			
Title			
Given name			
Family name			
Phone number during office hours			
Mobile phone number			
Email address (please include your work and personal email)			
Residential Address			

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In this section you will need to write why you are interested in the 10412NAT Certificate II in Indigenous Leadership and what you would like to achieve. Your written statement should include: Your reasons for selecting this course What you hope to achieve by undertaking this course Any previous studies, work and or/life experiences Any other personal qualities and attributes to support your application. (Minimum 300 words)

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ABSTUDY Eligibility Survey	
Are you Aboriginal or Torres Strait Islander?	☐ Yes ☐ No
Are you an Australian Citizen?	☐ Yes ☐ No
Are you currently receiving any other government assistance to study or complete an Australian Apprenticeship or traineeship?	□ Yes □ No
Are you currently receiving ABSTUDY assistance for any other approved courses anywhere in Australia?	☐ Yes ☐ No
For your application to be complete and considered by the following;	our selection panel, you must provide the AILC with
Are you prepared to attend and commit all residential training blocks for the course?	☐ Yes ☐ No
Are you prepared to share accommodation with another student on the course? If no please list a reason why.	☐ Yes ☐ No
Participants must commit to providing an evaluation at the end of the course. Are you willing to make this commitment?	☐ Yes ☐ No
Have you attached your support letter? (This may be from your current employer or a community member)	☐ Yes ☐ No
Have you informed your employer of your	☐ Yes ☐ No

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intention to undertake this course? Please

attach your support statement.

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01 May 2016 Review Date: Approved: RTO Manager

#### **DECLARATION**

	,	0	
Name:			
C'a and an			
Signature:			_
Date (DD/MM/YY):			

I declare that the information on this form and the supporting evidence supplied by me is true and

correct. I understand that it is a criminal offence to provide false or misleading information.

#### **HOW TO SUBMIT THE APPLICATION**

Each application, including any supporting documentation, must be received by the AILC by 5pm, AEST on the day applications close.

Applications can be lodged through:

Email: applications@ailc.org.au

Fax: 02 6251 6312

Post: Australian Indigenous Leadership Centre, PO Box 186, CURTIN ACT 2605.

Phone: 02 6251 5770 or free call 1800 284 087 if you have any queries.

THESE DOCUMENTS WITH YOUR APPLICATION)
☐ THE ΔΡΡΙΙCATION OUESTION HAVE REEN ANSWERED

☐ COMPLETED ENROLMENT FORM, MEDIA CONSENT, LLN, BIO/TELL US MORE, USI

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☐ COPY OF YOUR SUPPORT LETTER



#### **ENROLMENT FORM**

**IMPORTANT**: Please read the following before sending in this form.

- 1. Please complete all relevant sections of this form. If the course your wish to enrol in is a nationally recognised unit or qualification, you will need to complete the AVETMISS DETAILS on the reverse of this form.
- 2. A copy of the Student Handbook can be found on our website <a href="www.ailc.org.au">www.ailc.org.au</a> or by request from the AILC Ltd. Students will also be sent a copy of the handbook upon successful enrolment to a qualification.
- 3. Please lodge completed forms with the AILC as soon as possible via fax (02) 6251 6312, email at ailc@ailc.org.au or via post to 'AILC, PO Box 4110, Kingston, ACT, 2604'.
- 4. All other enquiries should be directed to the AILC on 02 6251 5770.

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RTO PRIVACY POLICY: Information collected by the AILC is used, stored and disposed of in accordance with the Australian Privacy Principles as set out in the Commonwealth *Privacy Act 1988*. A copy of this can be found at <a href="http://ailc.org.au/ailc-rto-privacy-policy-2014">http://ailc.org.au/ailc-rto-privacy-policy-2014</a>

COURSE TO BE ENR	OLLED IN:					
Full name:					Preferred name:	
Address:						
Postal address:						
Suburb:		State:			Postcode:	
Email:		Date o	of birth:		Male / Female	
Mobile number:		Please Circle:	Medicare	License	Number:	
Do you have a Uni	que Student Identifier?	Y/N Number:				
(If NO you will need commencement of	ed to apply for one at <u>w</u> f the course.)	ww.usi.gov.au, please	note you w	vill need to d	obtain one prior to the	
Do you have any r	eading or writing difficu	Ities that you may requ	ire assistan	ce with? Y	/ N	
Details:						
Do you have any o	ther individual requiren	nents or circumstances	which may	impact on y	ou learning experience?	Y/N
EMPLOYMENT – TH	IIS SECTION MUST BE CO	OMPLETED.				
	tegories, which BEST de		mployment	status?		
☐ Full-time employ		☐ Employed – unpai			ness	
☐ Part-time emplo		☐ Unemployed – see		-		
	not employing others	☐ Unemployed – see				
☐ Employer	, , , , , , , , , , , , , , , , , , ,	☐ Not employed – i				
LANGUAGE & CULT	URAL DIVERSITY – THIS	SECTION MUST BE CO	MPLETED.			
Citizenship and Res	idence status during stu	udy				
☐ Australian citiz	en					
☐ Permanent Re	sident					
	ry Permit- student visa,	diplomat or a depende	ent of a dipl	omat		
☐ Status other th	an the above					
In which country w	ere you born?					
☐ Australia	☐ Other Country - p	lease indicate:				
SCHOOLING – THIS	SECTION MUST BE COM	IPLETED.				
What is your highes	st COMPLETED school le	evel?				
$\ \square$ Completed year	12 ☐ Complete	ed year 9 or equivalent				
$\square$ Completed year	11	ed year 8 or below				
☐ Completed year	10 ☐ never att	cended school				
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-	complete that school le		
Are you still attending	ng school? ⊔ Yes	□ No	
<ul><li>☐ Yes, Aboriginal</li><li>☐ Yes, Torres Strait</li><li>☐ Yes, Aboriginal and</li></ul>	al or Torres Strait Island Islander nd Torres Strait Islander al nor Torres Strait Islan		
	uage other than English  Yes, other - please		
How well do you spe ☐ Very Well	eak English?   Well Not \	Well □ Not at all	
Do you consider you	ECTION MUST BE COMP irself to have any of the No		ents or long-term medical conditions?
This is for statistical	purposes only and assis	sts us to individualise our trainir	g
☐ Hearing/Deaf	☐ Mental Illness	☐ Physical	☐ Learning
<ul><li>☐ Intellectual</li><li>☐ Other</li></ul>	☐ Vision	☐ Acquired Brain Impairment	☐ Medical Condition
Have you SUCCESSFU If YES, please tick AN Bachelor Degree of Advanced Diplom Diploma (or Assoc Certificate IV (or A Certificates other	ULLY completed any quay applicable boxes or Higher Degree as or Associate Degree ciate Diploma) Advanced Certificate/Teathan the above	Yes	
<ul><li>☐ To get a job</li><li>☐ To develop my ex</li></ul>	risting husiness	<ul><li>☐ It was a requirement of my j</li><li>☐ I wanted extra skills for my j</li></ul>	
☐ To start my own k	•	☐ To get into another course o	
☐ To try for a better		☐ For personal interest or self-	development
☐ To get a better jo	b or promotion	☐ Other reason	
DIETARY AND HEALT  ☐ Vegetarian ☐ Ve	•	l Diabetic □ Coeliac – No Gluter	☐ Lactose intolerant ☐ Nut allergies
current competency,	, mutual recognition & c		recognition of prior learning, recognition of
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EMPLOYER DETAILS:		
Full name:	Position:	
Phone:	Email:	
NEXT OF KIN DETAILS:		
Full name:	Relationship:	
Phone:	Email:	
DECLARATION		
<ul> <li>copy of the Student Handbook can</li> <li>I have read, understand and agree</li> <li>I was adequately informed of the re</li> <li>I have received and understand the requirements for this course and I I</li> <li>The information I have provided information and documentation reenrolment.</li> </ul>	equirements and expectations of the course price information provided regarding pre-requisites	or to enrolment. s, and language, literacy and numeracy ledge and should I provide incorrect s may result in the cancellation of my
Name	Signature	Date
Student Signature		
Name	Signature	Date
Employer/Supervisor: I agree to provide	e the required support prior and throughout the	qualification to the learner.
Name	Signature	Date
Parent or guardian: If you are under 18	s, your enrolment must be approved by a parent	or guardian.
PHOTO IDENTIFICATION AND COLLECT Please submit current photo identification document.	ION OF PERSONAL INFORMATION ation with this form. This can be a copy of yo	our driver's licence, passport or other
I acknowledge the AILC collects private programs and I give permission for this	te personal information for the purposes of a to occur: Y/N (Please circle)	allowing me to participate in training
Please understand that you have a rigid with the AILC.	ht not to provide personal information, but th	is may prevent you from participating
AILC may use your information to offer receive these offers.	you other AILC products & services.	ease tick this box if you do not wish to
Name	Signature	Date

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### PHOTOGRAPHIC/MEDIA CONSENT FORM

I hereby consent yes/no to the collection and use of my personal images by photography or video recording.

I acknowledge these may be used on the <u>www.ailc.org.au</u> website, in newsletters or e-newsletters and publications as well as distributed to members.

I further acknowledge that my image may be used by the **Australian Indigenous Leadership Centre Ltd** media unit to promote the **Australian Indigenous Leadership Centre Ltd** in the future.

I understand that no personal information, such as names, will be used in any publications unless express consent is given. (Refer to AILC RTO Privacy Policy) http://ailc.org.au/ailc-rto-privacy-policy-2014

I also understand that my consent can be withdrawn at anytime in writing to the **Australian Indigenous Leadership Centre Ltd** at **AILC, PO. Box 4110, Kingston ACT 2604**.

CONSENT FORM	
1	
(Name of person giving consent & parent/gua	rdian if under 18 years of age)
	photographs or video footage for use on the <b>Australian Indigenous</b> tters and publications as well as for distribution to members.
•	photographs or video footage being used to promote future <b>Australian</b> by AILC Staff, AILC Media Unit and other media.
I further understand that this consent may	y be withdrawn by me at anytime, upon written notice.
I give this consent voluntarily.	
(Signature of person giving consent)	(Signature of parent/guardian if under 18)
Date / /	

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# LANGUAGE, LITERACY & NUMERACY

#### **TARGET CORE SKILLS:**

This task covers Australian Core Skills Framework	(ACSI) ۲	⊦):
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- Learning and Reading at Level 2
- Oral communication at Level 1
- Numeracy at Level 1

Can you read English?	□ Very well	□ Well	□ Not well	☐ Not at all
Can you write English?	☐ Very well	□ Well	☐ Not well	☐ Not at all
Can you speak English?	☐ Very well	□ Well	☐ Not well	☐ Not at all
Is English your first langua	age? □ Yes	□ No:		

l can	Yes	Sometimes	No
Understand signs			
Count and check change when shopping			
Send a text message			
Use the internet to get information like telephone numbers			
Fill in a government form			
Read a letter from your bank			
Use a computer to email			
Use a calculator for + − x ÷			
Read a newspaper			
Read a work roster			
Follow instructions for mixing a solution or to follow a recipe			
Read a Google map or street directory			
Use an equipment manual			

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1.	. Circle the correct word for each of these sentences:					
a)	a) Frank enjoys working for the AILC. His supervisor says Brian is always					
	puntual	puncktule	punctual	punktual		
b)	The AILC Trainer	to her Students.				
	lisened	listened	lissened	lisaned		
2.	Circle the word that could re	place the word that ap	pears in bold:			
a)	) The store person <b>employed</b> good working habits within their work environment.					
	hired	utilised	explained	took		
b)	Health and safety hazards workplace.	can be <b>minimised</b> by	enforcing good healtl	n and safety practices within the		
	prevented	deficient	reduced	eluded		
3.	Read the procedure given be	low and answer the fo	llowing questions:			
Pr	ocedure for washing hands					
•						
•	Use medicated hand wash and rub thoroughly over hands					
•						
•						
•						
a)	What is the text about?					
b)	What do you use to wash you	r hands with?				
c)	When soap has formed, what	is done next?				
_						
d)	What is done with the towel?					

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4.	Rachelle caught the 9:25am Upfield train. She arrived at Finder's Street Station at 10:00am. How long did she commute on the train for?				
	45 minutes	50 minutes	35 minutes	20 minutes	
5.	Canberra's maximum temperature in temperature.	re was 42 degrees a	nd the minimum was 9 c	legrees. Calculate the diffe	rence
	35 degrees	23 degrees	27 degrees	33 degrees	
6.	Kim bought three bottles of milk for the three bottles of milk?	. Each bottle of milk	cost \$1.09. What is the t	otal amount of money Kim	າ paid
	\$3.00	\$3.27	\$2.97	\$3.31	
7.	Sarah had \$20.00. She bought so change did Sarah receive?	ome chips and grav	y for lunch. The chips a	nd gravy cost \$4.25. How	much
	\$16.75	\$15.75	\$16.25	\$15.25	
8.	How do you write 0.5 as a fraction	n?			
	1/2	1/3	1/4	2/3	
9.	Do you feel you require any extr If yes please list the areas you requ				n ic
	n yes piease list the areas you requ		dential)	it, writing (this information	1 15
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# **BIO/TELLING US MORE**

\*The following information you provide will be used in the graduation program on completion of the course. Please ensure you provide as much information as possible.

Name	
Your community	
Your mob	
Your role (work and/or community)	
Your vision (professional and/or personal)	E.g. My personal vision is to use myself as an example to impact positive attitudes and share my can do attitude with whoever comes crosses my path in life. I wish that I can inspire and motivate them to discover and develop their potential and live life to fullness.
What is your greatest achievement?	

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What inspired you to do undertake this course?	
What are you hoping	
What are you hoping to gain or achieve from this course?	
Please write about your Family o	r your Country (which you come from or live in), and your proudest achievement.

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#### **UNIQUE STUDENT IDENTIFIER (USI)**

From the 1<sup>st</sup> of January 2015 all new and current students will be required to have a Unique Student Identifier (USI). AILC will not be able to print your certificate without a USI. To create your USI you will need to go to <a href="https://www.usi.gov.au">www.usi.gov.au</a>.

For more information this video provides a brief overview and how to create a USI: <a href="https://www.youtube.com/watch?v=HRYaaF-B7Ho">https://www.youtube.com/watch?v=HRYaaF-B7Ho</a>

Personal Details					
Name:					
Address:					
Phone:					
Date of Birth:					
Course Name:					
USI Number:					
Student Signature and date:					
Office Use Only:					
USI Verified:	Date:				
Name:	Signature				

Thank you for providing us with your information. We look forward to meeting you on commencement of your course ©

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