

**Proposed vocation & certificate level:** \_\_\_\_\_

**Preferred RTO:** \_\_\_\_\_

**PRE-ASSESSMENT OF INCENTIVE ELIGIBILITY Start date of contract:**

Below is a guide only for eligibility for Australian Government Incentives.  
 Final assessment of eligibility will be determined after finalisation of Training Contract.

PERSONAL DETAILS	PRIOR QUALIFICATIONS (if applicable)
Family Name: _____ Given Name/s: _____ D.O.B: ____/____/____ <input type="checkbox"/> Female <input type="checkbox"/> Male	What is your highest completed school level? Year..... When did you complete that school level?..... Have you successfully completed any qualifications? <input type="checkbox"/> NO <input type="checkbox"/> YES If YES, then tick ANY applicable boxes: include start & end date <input type="checkbox"/> Pre-Apprenticeship/Pre-Vocational ____/____/____ ____/____/____ <input type="checkbox"/> Certificate I ____/____/____ ____/____/____ <input type="checkbox"/> Certificate II ____/____/____ ____/____/____ <input type="checkbox"/> Certificate III (eg, trade certificate) ____/____/____ ____/____/____ <input type="checkbox"/> Certificate IV ____/____/____ ____/____/____ <input type="checkbox"/> Dip/Adv Dip/Bach Degree/higher ____/____/____ ____/____/____ <input type="checkbox"/> Certificate other than above ____/____/____ ____/____/____ Title and level of qualification/s obtained (please provide copies of certificate/s at sign up): _____
CONTACT DETAILS	
Street Address: _____ Suburb/Town: _____ State: _____ Postcode: _____ Home Phone: _____ Mobile: _____	
CITIZENSHIP DETAILS	
<input type="checkbox"/> Australian Citizen or permanent resident  <input type="checkbox"/> NZ passport holder who has been resident in Australia for 6 months or more. Passport Number _____  <input type="checkbox"/> Other – Visa document number _____ Details: _____	Have you <b>COMMENCED</b> but <b>NOT COMPLETED</b> any qualifications? <input type="checkbox"/> NO <input type="checkbox"/> YES → Title and level of qualification: _____  Are you currently undertaking any other study? <input type="checkbox"/> NO <input type="checkbox"/> YES → Title and level of qualification: _____
EMPLOYMENT DETAILS	OTHER INFORMATION
Employer: _____ Employment status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part time <input type="checkbox"/> Casual If Part-Time/Casual – total hrs per week worked? _____ Date employment commenced: ____/____/____ Department: _____ Your Position Title: _____ Supervisor: _____	Have you previously worked as an apprentice or trainee? <input type="checkbox"/> NO <input type="checkbox"/> YES → Please provide details below. Name of company: _____ Title and level of qualification: _____ State/Territory/Overseas: _____ Year of Commencement: _____ Apprentice/Trainee number: _____
DECLARATION	

I understand that this information may be used by Mission Australia Australian Apprenticeships Centre to assess eligibility of Australian Government Incentives for any future Australian Apprenticeships I may undertake.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**OFFICE USE ONLY -** Based on the above information the following Australian Government Incentives may be available

<input type="checkbox"/> Eligible for incentives	<input type="checkbox"/> Commencement	Other: _____
<input type="checkbox"/> Not Eligible for incentives	<input type="checkbox"/> Re-Commencement	
		<input type="checkbox"/> Completion

Notes: \_\_\_\_\_