

SECTION A – EVIDENCE OF CITIZENSHIP/RESIDENCY (OFFICE USE ONLY)

To be completed by an authorised delegate of the training provider - do not leave any section blank.

I confirm that for:
(student's full name)

I have sighted ONE of the following:

- Australian Birth Certificate (not Birth Extract)
- New Zealand Birth Certificate
- current Australian Passport
- New Zealand Citizenship Certificate
- current New Zealand Passport
- a proxy declaration for individuals in exceptional circumstances as per Clauses 2.13 – 2.17 of the Guidelines About Eligibility
- Australian Citizenship Certificate
- confirmation via the Visa Entitlement Verification Online System (VEVO) of permanent residence AND the student's foreign passport or ImmiCard
- current green Medicare card
- confirmation that the student meets the eligibility criteria for the Asylum Seeker VET Program.
- Australian Certificate of Registration by Descent

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];
- 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].

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 your training provider 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.
Yes - write the course name(s) below. Include training you haven't started yet.

No

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

Yes

No

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

Yes

No

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 confirm that I am authorised to provide the personal details presented and I consent to my information being checked with the document issuer or official record holder via third party systems for the purpose of confirming my identity.
- I declare the information in this form is true and accurate.

Name:

Signature:

Date:

SECTION C – TRAINING PROVIDER DECLARATION (OFFICE USE ONLY)

To be completed by the training provider – do not 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 the '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