IMAGINE EDUCATION AUSTRALIA PTY LTD
MAIN CAMPUS 13 Benowa Rd Southport Qld 4215
PHONE +617 5552 0900 • E-MAIL info@imagineeducation.edu.au
POST PO Box 4931 Bundall BC Qld 4217

HIGHER LEVEL SKILLS PROGRAM APPLICATION FORM

Personal information

Please supply the following information:

1. What is your full name?

2. What is your gender (please tick one box only): ☐ Male ☐ Female

First name(s)

Last name

Have you ever been known by any other name? **No** ☐ **Yes** ☐ *Please specify name:*

3. What is your date of birth and age at enrolment?

Date of birth *(day/ month/ year)*

Age at enrolment

4. What is the address of your usual residence?
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.

Building/ property name

Flat/ unit details

Street or lot number *(e.g. 205 or Lot 118)*

Street name

Suburb, locality, or town

State/ territory

Postcode

Home telephone Mobile

E-mail address

Next of Kin name Contact phone

5. What is your postal address *(if different from above)?*

Building/ property name

Flat/ unit details

Street or lot number *(e.g. 205 or Lot 118)*

Street name

Suburb, locality, or town

State/ territory

Postcode

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Language and cultural diversity

6. In which country were you born (please tick)?

☐ Australia

☐ Other _____ *Please specify*

7. Do you speak a language other than English at home?

☐ No, English only *Go to question 9*

☐ Yes _____ *Please specify language/s and indicate the one that is spoken most often*

8. How well do you speak English?

☐ Very well

☐ Well

☐ Not well

☐ Not at all

9. Are you of Aboriginal or Torres Strait Islander origin?

☐ No

☐ Yes _____ *Please indicate if Aboriginal, Torres Strait Islander, or both*

Disability

10. Do you consider yourself to have a disability, impairment, or long-term condition?

☐ Yes

☐ No *Go to question 12*

11. If you answered yes to question 10, please indicate the area(s) by selecting from the following list (you may select more than one area):

☐ Hearing/ deaf
☐ Physical
☐ Intellectual
☐ Learning
☐ Mental illness
☐ Acquired brain impairment
☐ Vision
☐ Medical condition
☐ Other

USI

12. Do you have a USI number?

☐ No ☐ Yes

If yes, please provide your USI number: _____

If no, I give Imagine Education permission to create/locate my USI number on my behalf: ☐ *No* ☐ *Yes* *City of birth* _____

HIGHER LEVEL SKILLS PROGRAM APPLICATION FORM

Schooling

13. What is your highest COMPLETED school level (tick ONE box only)?

- ☐ Year 12 or equivalent
- ☐ Year 11 or equivalent
- ☐ Year 10 or equivalent
- ☐ Year 9 or equivalent
- ☐ Year 8 or equivalent
- ☐ Never attended school

14. In which year did you complete that school level?

_____

15. Are you still attending secondary school? ☐ Yes ☐ No

Previous qualifications achieved

16. Have you successfully completed (or partially completed) any of the following qualifications?

☐ No ☐ Yes *Please tick applicable boxes below:*

- ☐ Bachelor degree or higher degree
- ☐ Advanced Diploma or associate degree
- ☐ Diploma (or associate degree)
- ☐ Certificate IV (or advanced certificate/ technician)
- ☐ Certificate III (or trade certificate)
- ☐ Certificate II
- ☐ Certificates I
- ☐ Certificates other than mentioned

17. Are you currently enrolled in any other study? ☐ Yes ☐ No

If yes provide the name of the institution _____ and year of qualification _____

Employment

18. Of the following categories, which BEST describes your current employment status (tick ONE box only):

- ☐ Full-time employee
- ☐ Part-time employee
- ☐ Self-employed
- ☐ Employer
- ☐ Employed - unpaid worker in a family business
- ☐ Unemployed - seeking full-time work
- ☐ Unemployed - seeking part-time work
- ☐ Not employed - not seeking employment

Study reason

19. Of the following categories, which BEST describes your main reason for undertaking this course/ traineeship/ apprenticeship (tick ONE box only):

- ☐ To get a job
- ☐ To develop my existing business
- ☐ To start my own business
- ☐ To try for a different career
- ☐ To get a better job or promotion
- ☐ It was a requirement of my job
- ☐ I wanted extra skills for my job
- ☐ To get into another course of study
- ☐ For personal interest or self-development
- ☐ Other reasons

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HIGHER LEVEL SKILLS PROGRAM APPLICATION FORM

Higher Level Skills - Course selection

- ☐ CHC50113 Diploma of Early Childhood Education and Care
- ☐ SIT40416 Certificate IV in Hospitality (Existing Worker)
- ☐ SIT50416 Diploma of Hospitality Management´
- ☐ CHC43015 Certificate IV in Ageing Support

Student Co-Contribution Fees

Higher Level Skills Qualification	*Course Duration*	*Co-Contribution Fee*	
		Non-Concession	*Concession*
CHC50113 Diploma of Early Childhood Education and Care *Total 28 Units*	*52 Weeks*	*$56.00* *$2.00 per unit*	*$28.00* *$1.00 per unit*
SIT40416 Certificate IV in Hospitality *Existing Workers Only* *Total 21 Units*	*30 Weeks*	*$42.00* *$2.00 per unit*	*$21.00* *$1.00 per unit*
SIT50416 Diploma of Hospitality Management *Total 28 Units*	*56 Weeks*	*$56.00* *$2.00 per unit*	*$28.00* *$1.00 per unit*
CHC43015 Certificate IV in Ageing Support *Total 18 Units*	*39 Weeks*	*$36.00* *$2.00 per unit*	*$18.00* *$1.00 per unit*

Fee information

- ☐ I understand I will be charged a per unit fee for this course as above unless I can provide a Statement of Attainment or Record of Results for a Credit
- ☐ I hold a valid Health Care or Pension Card

Declaration

I understand that on completion of this course I will no longer be eligible for a subsidised training place under the Higher Level Skills Program.
I am not enrolled in or have deferred from a University course.
I declare that the information provided above is accurate and true.
I have been provided information on eligibility, fees, refunds, Higher Level Skills fact sheet, complaints and appeals, and course completion.

Student signature _____

Guardian signature _____ Date _____

Authorised person _____ Signature _____

HIGHER LEVEL SKILLS PROGRAM APPLICATION FORM

Evidence for application

Please note, no application will be approved without this evidence.

Evidence of date of birth *(please provide one of the below):*

- ☐ Driver's Licence or 18+ card
- ☐ Australian or New Zealand passport
- ☐ Birth certificate

Evidence of residency (Qld):

- ☐ A letter from a utility company, financial institution, or Government institution showing Qld address and the student's name

Evidence of Australian or New Zealand Citizenship or Australian Permanent Residency (please provide one of the below:

- ☐ Medicare card
- ☐ The student's permanent visa or formal communication from the Department of Immigration and Border Protection showing approval of a permanent visa subclass

The following documents for concession:

- ☐ Student's Health Care Card of Concession Card
- ☐ Senior Statement issued by the Queensland Curriculum and Assessment Authority

EXISTING WORKER

Existing worker means a current employee who has a one month or more employment relationship with their employer and has actively ful lled work duties for this period. The one month working relationship could be full-time or on a part-time/casual employment equivalent basis. Existing workers have access to employee entitlements and therefore do not include volunteers. Registration with a Labour Hire Company does not satisfy the 'existing worker' requirement, unless at the commencement of the training the prospective student has been engaged in employment for a period of one month or more and is currently employed.
The following document/s provide evidence for SIT40416 Certi cate IV in Hospitality (Existing Worker)

- ☐ A letter from current employer on company letter head including ABN showing length of employment is longer than at least one month or
- ☐ Pay slips for paid work indicating a one month or more relationship with this employer

OFFICE USE ONLY:

Student contribution charge

Government contribution charge

Start date in student database management system

End date in student database management system

HIGHER LEVEL SKILLS PROGRAM INFORMATION

Imagine Education Australia welcomes your enquiry into the Higher Level Skills program, a key initiative under the Queensland Government's five-year training reform action plan, Great skills. Real opportunities. Below you will find valuable pre-enrolment information.

STUDENT INFORMATION FACT SHEET The below link is a valuable student fact sheet provided by the Queensland Government on their training website, explaining about the program:
https://training.qld.gov.au/site/providers/Documents/funded/hls-student-factsheet.pdf

REQUIRED DOCUMENTATION Students will be required to provide evidence to be eligible under this program. This evidence is outlined in Appendix 2 of the Evidence Guide. Appendix 2 outlines approved identification types.
https://training.qld.gov.au/site/providers/Documents/funded/certificate/pqs-evidence-guide.pdf

FEES All students who enrol under the Higher Level Skills program are required to pay a student contribution fee unless they have received credit for that unit by providing a Statement of Attainment or Records of Results. Funding is not currently available for these qualifications under Year 12 Fee Free. See below.

CO-CONTRIBUTION FEE SCHEDULE

Courses Available	*Course Duration*	*Co-contribution Fee*		
		Non-concession	*Concession*	*Year 12 Fee Free*
CHC50113 Diploma of Early Childhood Education and Care *Total 28 Units*	*52 Weeks*	*$56.00* *$2.00 per unit*	*$28.00* *$1.00 per unit*	*N/A*
SIT40416 Certificate IV in Hospitality *Existing Workers Only* *Total 21 Units*	*30 Weeks*	*$42.00* *$2.00 per unit*	*$21.00* *$1.00 per unit*	*N/A*
SIT50416 Diploma of Hospitality Management *Total 28 Units*	*56 Weeks*	*$56.00* *$2.00 per unit*	*$28.00* *$1.00 per unit*	*N/A*
CHC43015 Certificate IV in Ageing Support *Total 18 Units*	*39 Weeks*	*$36.00* *$2.00 per unit*	*$18.00* *$1.00 per unit*	*N/A*

REFUND FOR HIGHER LEVEL SKILLS STUDENTS ONLY If a student cancels from their course prior to the completion of the course, they are eligible for a refund of the student contribution fee for any units you have not been commenced. This is calculated by adding all unit student contribution fees for any non-commenced units. To receive the refund, students are required to complete a Refund Application Form, which is located on the Imagine Education Australia website. All refunds are processed within 28 days of receipt of refund.

COMPLAINTS Imagine Education Australia has a Complaints and Appeals Policy. This is available on the Imagine Education Australia website and in the Student Handbook.

ON COMPLETION Students will be provided with a qualification and Record of Results on successful completion of the course. Students will no longer be eligible for a government-subsidised training place under the Higher Level Skills program once they have completed this qualification. If you do not complete the whole qualification, you will be provided with a Statement of Attainment. Students will be required to complete a short survey within 3 months of completing or discontinuing their course.