

**PARTICIPANT**

**APPLICATION**

**FORM**

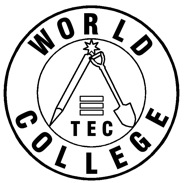
***Please tick the Unit/s of Competency and/or Qualification for which you are applying.***

**UNITS OF COMPETENCY**

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| ☐ | **MEM05042B Perform welds to code standards using flux core arc welding process** |
| ☐ | **MEM05043B Perform welds to code standards using gas metal arc Welding process** |
| ☐ | **MEM05044B Perform welds to code standards using gas tungsten arc welding process** |
| ☐ | **MEM05045B Perform pipe welds to code standards using manual metal arc welding process** |
| ☐ | **MEM05046B Perform welds to code standards using manual metal arc welding process** |
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**QUALIFICATIONS**

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| ☐ | [**CPC30611**](https://training.gov.au/Training/Details/CPC30611) **Certificate III in Painting and Decorating** |
| ☐ | [**MEM20105**](https://training.gov.au/Training/Details/MEM20105) **Certificate II in Engineering** |



**Student ID**

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| **Personal Details** | | | | | | | | | | | | | | |
| **Family Name** |  | | | | | | **Given Name** | | | |  | | | |
| **Date of Birth** | / / | | | | | | **Gender** | | | | ☐ Male ☐ Female | | | |
| USI (Unique Student Identifier) | | | | | | | | | | | | | | |
| USI | |  | | | | | | | | | | | | |
| If you do not have a USI, please apply here: <http://www.usi.gov.au/create-your-USI/Pages/default.aspx> | | | | | | | | | | | | | | |
| Contact Details | | | | | | | | | | | | | | |
| Street Address |  | | | | | | | | | | | | | |
| Suburb |  | | | | | | State & Postcode | | | |  | | | |
| Phone | ( ) | | | | | | Mobile | | | |  | | | |
| Email Address |  | | | | | | | | | | | | | |
| Verification of Identity | | | | | | | | | | | | | | |
| Passport Number & Country of Issue | | | | | | |  | | | | | | | |
| Expiry Date | | | | | | | / / | | | | | | | |
| Emergency Contact | | | | | | | | | | | | | | |
| Family Name |  | | | | | | Given Name | | | |  | | | |
| Phone/Mobile |  | | | | | | Relationship | | | |  | | | |
| Language and Cultural Diversity | | | | | | | | | | | | | | |
| **Country of Birth** |  | | | | | | **Citizenship** | | | |  | | | |
| **Do you hold Permanent Residency?** (If NO, please proceed to next question.) | | | | | | | ☐ Yes ☐ No | | | | | | | |
| **Do you hold an Australian Visa?** | | | | | | | ☐ Yes ☐ No | | | | **Which Class of Visa?** | |  | |
| **Are you of Australian Aboriginal or Torres Strait Islander origin?**  (For persons of both Aboriginal and Torres Strait Islander origin, mark both ‘Yes’ boxes.) | | | | | | | ☐ Yes  ☐ No | | | | **Aboriginal** | | ☐ Yes☐ No | |
| **Torres Strait Islander** | | ☐ Yes☐ No | |
| **How well do you speak English?** | | | | | | | **Very well** ☐ | | | | | **Not well** ☐ | | |
| **Well**  ☐ | | | | | **Not at all** ☐ | | |
| **Do you speak a language other than English at home?** | | | | | | | | ☐ Yes ☐ No | | | | | | |
| **If YES, which language do you usually speak at home?** | | | | | | | |  | | | | | | |
| **Do you require any language, literacy or numeracy assistance?** | | | | | | | | ☐ Yes ☐ No ☐ Not Sure | | | | | | |
| **How did you hear about World Tec College?** | | | | | | | | * Friend or family * Internet * Korean newspaper or magazine * Local newspaper or magazine * Other *(Please explain)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| **Disability** | | | | | | | | | | | | | | |
| **Do you consider yourself to have a disability, impairment or long-term condition?** | | | | | | | | ☐ Yes ☐ No | | | | | | |
| **If YES, then please indicate the areas of disability, impairment or long-term condition.** (You may indicate more than one area.) | | | | | | | | | | | | | | |
| Hearing/Deaf | | | ☐ | | Learning | | | | ☐ | Medical Condition | | | | ☐ |
| Physical | | | ☐ | | Vision | | | | ☐ | Other | |  | | ☐ |
| Intellectual | | | ☐ | | Acquired Brain Impairment | | | | ☐ |  | | | | |
| Education | | | | | | Previous Qualifications | | | | | Employment | | | |
| **What is your highest COMPLETED school level?** *(Tick ONE box only.)* | | | | | | **Have you SUCCESSFULLY completed any of the following qualifications?** | | ☐ Yes  ☐ No | | | **Of the following categories, which BEST describes your current employment status?** *(Tick ONE box only.)* | | | |
| Year 12 or equivalent | | | | ☐ | | **If YES, tick ANY applicable boxes** | | | | | Full-time employee | | ☐ | |
| Year 11 or equivalent | | | | ☐ | | Bachelor Degree or Higher Degree | | ☐ | | | Part-time employee | | ☐ | |
| Year 10 or equivalent | | | | ☐ | | Advanced Diploma or Associate Degree | | ☐ | | | Self-employed – not employing others | | ☐ | |
| Year 9 or equivalent | | | | ☐ | | Diploma (or Associate Diploma) | | ☐ | | | Employer | | ☐ | |
| Year 8 or below | | | | ☐ | | Certificate IV (or Advanced Certificate/Technician) | | ☐ | | | Employed – unpaid worker in a family business | | ☐ | |
| Never attended school | | | | ☐ | | Certificate III (or Trade Certificate) | | ☐ | | | Unemployed – seeking full-time work | | ☐ | |
| In which YEAR did you complete that school level? | | | |  | | Certificate II | | ☐ | | | Unemployed – seeking part-time work | | ☐ | |
| Are you still attending secondary school? | | | | ☐ Yes  ☐ No | | Certificate I | | ☐ | | | Not employed – not seeking employment | | ☐ | |
| Certificates other than the above | | ☐ | | |  | | | |

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| **If seeking employment, would you like to register with EMH Industries Labour Hire?** | | | | | | ☐ Yes ☐ No | | |
| **Employer Details (If Applicable)** | | | | | | | | |
| **Company Name** |  | | | **ABN/ACN** | | |  | |
| **Address** |  | | | | | | | |
| **Contact Name** |  | | | **Position** | | |  | |
| **Phone** |  | | | **Email** | | |  | |
| **Do you permit World Tec College to contact the listed Contact Person for the purpose of verification and for matters regarding your RPL application?** | | | | | | | ☐ Yes ☐ No | |
| **Personal History** | | | | | | | | |
| **Why are you undertaking this course/programme?** | | | | | | | | |
| To get a job | | ☐ |  | | It was a requirement of my job | | | ☐ |
| To develop my existing business | | ☐ | I wanted extra skills for my job | | | ☐ |
| To start my own business | | ☐ | To get into another course of study | | | ☐ |
| To try for a different career | | ☐ | For personal interest or self-development | | | ☐ |
| To get a better job/promotion | | ☐ | Other reasons | | | ☐ |

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| **Are you applying for Smart & Skilled Training?** | ☐ Yes ☐ No | |
| **If YES, please complete this entire section. If NO, please skip to PROPOSED STUDY.** | | |
| **Smart & Skilled Student** | | |
| **Do you live in NSW?** | ☐ Yes ☐ No | |
| **Residential Postcode (at the time of training)** |  | |
| **Suburb** |  | |
| **Are you living in NSW social housing or are you or your household on the NSW Housing Register?** | ☐ Yes ☐ No | |
| Are you being enrolled under a waiver? | ☐ Yes ☐ No | |
| Are you still at school? | ☐ Yes ☐ No | |
| What is your residency status? | ☐ Australian Citizen ☐ Australian Permanent Resident ☐ Humanitarian Visa  ☐ New Zealand Citizen  ☐ None of the above | |
| Have you achieved any qualifications since turning 17? | | ☐ Yes, while still at school  ☐ Yes, after leaving school   ☐ No |
| Are you registered or intending to be registered in an apprenticeship or traineeship for this qualification in NSW? Only NSW apprentices or trainees approved/registered as new entrants are eligible to undertake the relevant apprenticeship or traineeship qualification. Individuals will not be eligible to receive a subsidy if they are not a NSW apprentice or New Entrant Trainee at the time of commencing the qualification. Existing Worker Trainees are not eligible for government subsidised training for the traineeship qualification associated with their traineeship. | | ☐ Yes, registered  ☐ Yes, intending to be registered   ☐ No |
| Have you undertaken any other Smart & Skilled qualification this calendar year? This includes any other Smart and Skilled subsidised qualification that the individual:   * has completed this calendar year, or * is enrolled in but has not yet commenced this calendar year, or * is currently undertaking. | | ☐ Yes ☐ No |
| Indicate disability status, if any. | | ☐ I have a disability  ☐ I am the dependent child OR spouse of a person receiving disability support pension   ☐ No |
| Is the student an Employment Service Provider client? Employment Services Providers are agencies funded by the Australian government that provide support for people looking for work. For example, Job Services Australia or Disability Employment Services providers. | | ☐ Yes ☐ No |
| **Enrolling student has appropriate evidence of  long term unemployed status?**  Student must have appropriate proof from the Commonwealth that they have been unemployed for 52 or more consecutive weeks at the time of enrolment as outlined in the Smart and Skilled Administration Policy. | | ☐ Yes ☐ No |

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| Proposed Study | | | | | | | |
| **Do you wish to apply for Recognition of Prior Learning?** | | | | | ☐ Yes ☐ No | | |
| **Proposed Commencement Date** | | / / | | | | | |
| Code | Qualification Name | | | Assessment Type | | | Maximum  Duration |
|  |  | | | ☐ RPL ☐ Training & Assessment ☐ Assessment Only | | | 6 months |
| **Fee Calculation** | | | | | | | |
| **Deposit** | $ 1500.00 | | **After Commencement** | | | $ | |
| **TOTAL FEE AMOUNT** | | | | | | $ | |
| **Please note: Any reissuing of Certificates will incur a fee of $55.00.** | | | | | | | |

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| **DISCLAIMER**  No obligation is created on EMH Industries until an official receipt is issued and the Agreement and Declaration below is signed. Once the Participant commits to the RPL assessment programme, paid fees are strictly **non-refundable**. Training and/or Assessment will commence only when there is no outstanding fee.  Participants are requested to declare at the time of enrolment anything that may prevent them from satisfactorily progressing through the programme, e.g. anything related to physical, mental and/or intellectual ability, cultural and/or educational background. The RTO will not accept liability for any issue not declared at enrolment that has a potential to prevent satisfactory progress. |

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| **Direct Deposit** | | | |
| **Payee** | EM Hauri Pty Ltd t/a EMH Industries | **Account Number** | 439 343 413 |
| **Financial Institution** | St. George | **BSB Number** | 112 879 |
| Payment can be made via direct deposit (EFT), cash or other methods. Payment will be discussed in person. | | | |

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| **AGREEMENT AND DECLARATION** |
| **RTO Declaration** |
| The information the Participant has provided on this application form will remain private and confidential.  World Tec College will provide:   1. training and/or assessment services to prospective Participants who have met their obligations including completion of the application form, agreement and declaration, and financial payments; 2. quality training and assessment services in a competent manner through the provision of quality resources and staff; 3. training and/or assessment services performed by qualified trainers/assessors with the required knowledge and aware of the needs of industry; 4. In the event that World Tec College cannot deliver a course or programme, the Payee will be issued a full refund of all monies paid to World Tec College for the corresponding course or programme. |
| **Participant Declaration** |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to undertake training and/or assessment with World Tec College in the following:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  I understand that my rights and obligations have been defined in detail in the Participant Handbook, and that these must be upheld at all times during the Training/Assessment programme. These include:   1. My obligation to conduct myself safely and in adherence to all relevant legislation; 2. I will actively attempt all training and assessment tasks with serious effort; 3. I will comply with all safe and lawful requests; 4. I will arrive on time and will return on time from all breaks; 5. I will not bully, abuse, vilify or fail to treat all people participating, associated with, or in the vicinity of World Tec College training venues with the utmost respect and courtesy; 6. I will be diligent in all theoretical and practical tasks and will be equipped with the appropriate Personal Protective Equipment (PPE) and wear the appropriate PPE onsite, on the grounds of World Tec College’s welding workshop, and during all practical tasks.   I understand that World Tec College may choose to terminate my training and/or assessment programme if I fail to uphold these conditions.  I hereby grant World Tec College permission to discuss my training progress and results with my employer (if applicable), Australian Skills Quality Authority (ASQA), NSW Department of Education, Training Services NSW and other appropriate parties as deemed necessary by World Tec College.  I give permission for World Tec College to record evidence of my participation and assessment in written, verbal, photographic (including video) formats. I also give permission for World Tec College to use any recorded evidence for future promotional, commercial and educational purposes.   ***I have read and accepted the fee schedule, terms and conditions, and refund policy as described in the Participant Handbook, Information Sheet and within this document.  I acknowledge that I have read the above and understand the information provided. I confirm that the information I have provided on this application form is true and correct.***  **Participant Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_ / \_\_\_\_\_\_ / \_\_\_\_\_\_  **Participant Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |