

Prime Skills

Specialising in Staff Training and Management Development in Your Workplace

5 Everage Street Moonee Ponds Victoria 3039

Office: 03 8371 0077 Mobile: 0407 840 730 Facsimile: 03 9740 2588 Email: info@primeskills.com.au Web: www.primeskills.com.au

ABN: 44 878 937 249

PRIME SKILLS ONLINE PRINTABLE ENROLMENT FORM:

How to enroll: Complete the next page and return the form along with your payment directly to Prime Skills. Payment can be accepted as cheque, money order or Credit Card (a tax invoice will be supplied in all cases once funds have been cleared and assessments completed). Please read the following points or call our offices directly to discuss any issue that may affect your ability to complete the training and assessment.

Fees and Charges: The fee in most cases is non refundable however in exceptional or mitigating circumstance such as severe illness a refund will be considered (Proof may be requested ie doctors certificates etc). If you elect to complete the assessments via electronic mail there will be NO postage fee. If you choose to use land mail where we send you the assessment pack and then your certificates etc the \$5.00 postage and handling fee will be applied. If you take more than 30 days to complete your assessments a \$10.00 processing and administrative fee will be applicable.

Recognition of Prior Learning/ Current Competence: Participants with extensive industry background or who have completed similar programs or training in the past or who have gained the skills and knowledge via other experiences may be able to have their prior learning or current competence assessed without completing the program(s). Please call our offices to discuss this option further.

Grievances and Appeals: Should you ever have any grievances relating to the delivery and assessment of any program you are entitled to a fair hearing. Prime Skills have policies and procedures in place to deal with any such issues. Should you have any complaint or concerns please contact our offices to discuss these directly.

Compliance with Relevant Legislation: Prime Skills have relevant policies and procedures available that outline our approach to meeting all relevant legislative requirements including OH&S, harassment, anti discrimination, VET and access and equity polices. Prime Skills and the trainee will meet all requirements and should you have any complaint or concerns please contact our offices to discuss these directly.

Mutual Recognition: Prime Skills has a mutual recognition policy regarding statements of attainments issued by other RTO's. If you have completed the program or competencies with another RTO please send, email or fax us a copy your certificates.

Client Support: We here at Prime Skills want you to find this learning and assessment a pleasant and rewarding experience, should you have any personal or professional issues that may affect your ability to complete the program, including language and literacy assessments or assistance, please contact our office directly.

Privacy: The information we collect is information as required by the registering body and no other personal information other than where we are required by law will be provided or sold to any third party.

Participant Responsibilities: By signing the enclosed application, you agree to meet all requirements as set out by law and agree to accept responsibility for your own actions. You agree to complete in a professional and honest manner all work and assessments for the competencies. You accept that Prime Skills may withhold any information and certificates until all outstanding monies are paid in full. You agree that Prime Skills may not allow you to complete the program or training if you do not meet these responsibilities.

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Full Name: _____

Address: _____

Date of Birth: / /

Sex: Male - Female

Phone: _____

Mobile: _____

Email: _____

Name of Competency or Program: EG Food Hygiene THHGS01B -

How did you find out about the program?

What is your level of education? eg Trade Cert/ Degree?

Is English your first language? Y / N – If NO how would you rate your English Very good/ good/ fair/ poor

Do you suffer from any conditions or disabilities that may require consideration during assessment?

Is your Employer paying for this training? Y / N Employer Details and contacts:

Please list anything that may affect your ability to complete the program-

PAYMENT DETAILS

Cheque:

Money Order:

AMOUNT BEING PAID: \$.....

Credit Card Payment:

Visa

Mastercard

Bankcard

Name on Card:

Card Number:

Signature:

Expiry Date:

Please allow up to 28 days for assessment and certificate processing. A tax invoice will be issued with your certificate once assessments have been completed and funds cleared.

I have read and understood the terms and conditions of enrolment and agree to abide by them:

Signed: _____

Date: / /

PLEASE RETAIN A COPY OF THIS PAGE FOR YOUR RECORDS

March 2005