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Pre-Training Review Form

CALL 1800 FED UNI WEB federation.edu.au CRICOS Provider Number 00103D | RTO 4909

ABN 51 818 692 256

Instructions for Applicant:

EMAIL

- 1. Please complete sections 1, 2, 3 and 4 and bring to your pre-training interview.
- 2. Please attach copies of your certified academic transcript certificate if you are applying for Credit Transfer. (Please bring the original documents with this completed form to your pre-training interview).
- 3. Sections 5, 6 and 7 (where applicable) of this form will be completed at the pre-training interview by a Federation TAFE representative. To complete this section you will need to have completed the language, literacy and numeracy (LLN) review and received feedback prior to the interview. If you are unsure about how to access this test, contact a Federation staff member on 1800 FEDUNI (1800 333 864).

This pre-training review form will assist in determining your eligibility and suitability to enrol in the program/course that you have applied for.

Instruction for University Representative:

Please ensure **ALL** sections are completed.

| SECTION 1: Persona | al Details | | Notes: |
|--------------------------------|------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------|
| Title O Mr | | ther: | Vour legal family name/surname |
| First name | | | Your first legal given name |
| Other name | | | Your other legal name |
| Family name | | | |
| Date of birth | Gender | Male O Female O Other | |
| Email address | | | If yes, RTO is to complete the 'Employer Pre-Training Review' on page 5 with the |
| Are you a Registered Appren | tice or Trainee? | No | Employer. |
| SECTION 2: Course | Information | | |
| 1: What Course/Qualification | have you applied for? Course Code | | |
| Course Title | | | |
| 2: Have you ever completed | any of the following? | | |
| O Year 12 or equivalent | Traineeship Apprenti | iceship 🔿 Other I N/A | < Please tick all applicable |
| O VET in Schools Program | ○ TAFE programs/course ○ Universit | y degree | |
| List any TAFE or university p | rograms/ courses you have completed. | Not Applicable | |
| Date Completed | Program/Course Title | | Organisation/Institution |
| 04/2010 | CERTIFICATE III IN INDIVIDUAL SUPPORT | | NMIT (FOR EXAMPLE) |
| M M / Y Y Y | | | |
| MM/YYYY | | | |
| M M / Y Y Y | | | |
| 3: Do you wish to apply for ' | Credit Transfers'? | 🔿 Yes 🔿 No | Credit transfer is a process that provides |
| | fied copy of an academic transcript certificate or s units of competency you wish to apply for Credit T | | credit for an equivalent unit of competency previously achieved. |
| Warning – Uncontrolled when pr | inted! The current version of this document is kept on the | ne Federation website. | |
| | ellor (VET) and Chief Executive TAFE | Original Issue: 26/11/2014 | |
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Pre-training review form: Applicant Section continued...

SECTION 3: Skills Recognition

Do you wish to apply for RPL?

If yes, you will be required to complete *Part A* – *RPL Self-Assessment* for each course to determine your eligibility to proceed with RPL. You should discuss the RPL process with the teacher at the pre-training interview.

Relevant Employment/Work Experience

Recognition of Prior Learning (RPL) is an assessment process that recognises the skills and knowledge you have already gained. If you have completed other courses, if you have relevant work experience and work-based training or life experience, you may be able to apply for RPL for some or all of the units in the course you are applying for.

| Relevant Employment/Work Experience | | | | | |
|------------------------------------------------------|------------------|------------|-----------------------------------------|-------------------|--|
| Have you any relevant employment or work experience? | | ◯ Yes ◯ No | If Yes, please complete the table below | | |
| Dates | Position | Company | Duties | Hours per week | |
| APR 2010 TO JUL 2012 | CUSTOMER SERVICE | SERVICE | EG. SERVE CUSTOMERS, CASHIERING | 10 | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

 \bigcirc Yes \bigcirc No

| IChieve new skills and knowledge? EG. INTERESTED IN MAKEUP AND WOULD LIKE TO GET A QUALIFICATION IN THIS AREA) | Being shown how to do something, and then trying it myself with some supervision Researching, reading and discussing A mix of being shown how to do something, trying it |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | |
| | \bigcirc A mix of being shown how to do something trying it |
| | out, and talking to someone who has done it |
| Vhat existing knowledge do you have of the industry you are applying to study in? EG. VOLUNTEER IN AGED CARE FACILITY) | Working with others on the same problem – I don't lingoing it alone |
| | Finding information on the Internet at a time and plac that suits me, so learning can fit in with my lifestyle |
| | Where do you prefer to learn? |
| | Outside, doing practical things with an end result that can see |
| What do you hope to achieve from this qualification? Tick one or more of EG. SKILLS AND KNOWLEDGE TO GET A JOB IN THE FIELD) the following: | In libraries, lecture theatres and places where I can discuss, read and research ideas |
| Explain: O Job ready | In a relaxed environment with lots of discussion, when I can ask the teacher when I need help or guidance |
| Undertake furthe education Promote/enable | In a family-friendly environment where I learn from others' life experiences |
| access to training for disadvantaged | At my laptop or home computer, in an online/blended environment and at a time that suits me |
| learners | |

Authorised by: Pro-Vice Chancellor (VET) and Chief Executive TAFE

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TAFE

| SECTION 5: C | | | burden Endeur | | | te the c | | | |
|--------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--------------------------------|-------------------------|
| All parts of Sec | ction 5 to de | e completed | by the Federa | ation TAFE rep | resem | tative | | | |
| 5a Literacy ar | nd Numerac | cy Review | | | | | | | |
| This allows for a com may require. VetAsse | nparison of their s ess manage the L ian Core Skills Fr | skills with the entr Iniversities LLN re amework (ACSF) ب | y level literacy/num view process. The s | neracy skills for their student will be resul | ^r desired ted as 'A | tudent's literacy (reading course and an indicatio cchieved ACSF Level' or dult literacy and numera | n of the types of sup 'Working towards AC | port that the CSF Level'. T | student his score is |
| | | | | Reading | | Writing | Nume | eracy | |
| Applicant's ACSF leve Alternative Pathway | | arning Support Re | commended / | | | | | | |
| Recommended ACSF | level for Course | (refer to TAS) | | | | | | | |
| Refer to Appendix | l of pre-enrolm | ent review for gu | iidance on suitabi | lity to enrol into th | e cours | e. Please tick most rel | evant outcome: | | |
| Applicant's ACSF le | evels are suffici | ent to enrol into | the course | | | | ○ Yes (proc | eed to 5b) | \bigcirc No |
| i. It is recommend | led that the appli | cant enrol but will | require additional l | LN support. | | | | ⊖ Yes | \bigcirc No |
| lf yes, please no | te the additional | support services | hat will be provided | d to the applicant: | | | | | |
| | | | | | | | | | |
| | | | | n prior to enrolling in | nto this c | ourse. | | ⊖ Yes | \bigcirc No |
| | | | Is as listed in the Ta ake study without s | | | | | ⊖ Yes | ⊖ No |
| If yes, the traine | r/assessor must | provide a rational | 9: | | | | | | |
| | | | | | | | | | |
| 5b Identify di | gital capabi | lity | | | | Funding Entitle | ments | | |
| It is expected that stu evaluations online. P | | | | urces and course | | The applicant has been provided with current information on Victorian Yes N Training Guarantee (VTG) funding: | | ○ No | |
| Computer access | ⊖ Home | ○ Work | ○ None | \bigcirc Fed campus | | · · · · | | | |
| Internet access | ⊖ Home | ○ Work | ○ None | \bigcirc Fed campus | | The applicant has be current information of | | ⊖ Yes | ○ No |
| Digital capability | | \bigcirc Capable | ○ Advanced | | | Loans (Diploma cours | | | |
| 5c Course Pre | e-requisite l | Requirement | ts | | | | | | |
| Does the course the If yes, answer the f | | olling in require | industry placeme | nt? | | | | ⊖ Yes | ⊖ No |
| Requirements | | | | | | | Required? | Student | holds? |
| Working with Child | ren's Check (WV | VCC) | | | | | ◯ Yes ◯ No | ⊖ Yes | 🔿 No |
| Satisfactory Police | Check | | | | | | ◯ Yes ◯ No | ⊖ Yes | ⊖ No |
| Meet Prescribed im | munisations re | quirements set t | y placement orga | inisations | | | ◯ Yes ◯ No | ⊖ Yes | 🔿 No |
| Other (please detail): | | | | ○ Yes ○ No | ⊖ Yes | ⊖ No | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| NURSING STUDENTS ONLY | | | |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------|------------------------------|
| Have you provided the student with the information from the NMBA reg | arding the English Language Skills Regis | tration Standard? | \bigcirc Yes \bigcirc No |
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Pre-training review form. Federation TAFE Representative Section, continued...

| | CTION 6: Determination of Appropriateness of Course: parts of section 6 to be completed by the Federation TAF | E representative | | |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|------------|-------|
| | following checklist provides a final determination of the applicant's suitability and ϵ justions with an asterisk* must be answered as yes in order to determine appropr | | | |
| Pre- | training evaluation and rationale for enrolment | | Yes | No |
| 1* | Does the applicant have sufficient experience, knowledge and understanding of | course requirements to undertake this qualification? | \bigcirc | 0 |
| 2* | Was RPL offered to the applicant? (If relevant). | | \bigcirc | 0 |
| 3 | Does the applicant's preferred learning style align to the delivery methods, propo | sed learning strategies and training materials for this course? | 0 | 0 |
| 4* | Was the applicant able to explain sufficiently why they are undertaking the progr | am/course? | \bigcirc | 0 |
| 5* | Was the applicant able to state what they hoped to achieve from this course? | | \bigcirc | 0 |
| 6* | Does the applicant have the required LLN skills to undertake this course? Or Is the applicant able to undertake this course with recommended LNSUPPORT? Refer to Appendix 1 of Pre-enrolment procedure for guidance in answering this question | | 0 0 | 0 |
| 7* | Does this applicant have the digital capability to undertake this qualification? | | 0 | 0 |
| 8* | Does the applicant have the pre-requisites (if relevant) listed for this course? | | \bigcirc | 0 |
| 9* | Which 'Skills First Program' objectives would this enrolment support (tick one) | Rationale: | | |
| | O A. Job ready | A. To improve employment outcomes and opportunity | | |
| | O B. Undertake Further Education | B. Re-engage, engage, re-skill or continue in lifelong learning | | |
| | C. Promote/enable access to training for disadvantaged learners | C. Opportunity to access education and training in a safe learn | ng enviro | nment |
| | Is the rationale aligned to the objective above? | | \bigcirc | 0 |
| | If not, please provide additional comment: | | | |
| 10* | Is this qualification the most suitable qualification for this student based on the s is in alignment with the intent of the Training and Assessment strategy? | tudents responses regarding their aspirations and interests and | 0 | 0 |
| | If not, which qualification would you recommend is more suitable for the student? | | | |
| Fede | ration TAFE Representative Recommendations | | Yes | No |
| Enrol | ment to proceed or | | 0 | 0 |
| Enrol | ment to proceed with adjustments | | 0 | 0 |
| Appli | cant has been provided with feedback on the outcome of this pre-training review | | \bigcirc | 0 |
| | | | 0 | |
| Fed | eration TAFE Representative Signature | | | |
| Nam | e Traine Asses | | | |
| Date | D D , M M , Y Y Y Y | ure | | |
| Арр | licant Signature and Declaration | | | |
| provis inden costs | are that I have read the instructions and that the information submitted on and wil sion of incorrect information may result in the withdrawal by Federation University nnify the University and its officers, employees, agents, partners and contractors fr) arising out of or in any way connected with the provision of incorrect information I acknowledge I have received a Statement of Fees I acknowledge I have received the VET Student Loans Information Sheet (if applica | Australia ('University') of any place which may be offered. I agree om and against any liability, claim, action, demand, loss or expen | to release | e and |
| Nam | | ant | | |
| Date | | | | |
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Pre-training review form. Employer Section.

Employer Pre-Training Review

| SECTION 7: Employer details | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------|
| Employer | | |
| Address | | |
| Contact name | Telephone | |
| Apprentice name | | |
| Qualification | | |
| Employer Information | | |
| Employer has trained apprentices previously | ◯ Yes ◯ No | |
| Business type | - | Notes: |
| | | Including specialisations and specialist equipment |
| Working environment | | |
| | | Eg: on/off site or combination |
| Total number of employees | Apprentices Trade qualified people | |
| Authorised supervisor/s | | |
| 1 | 2 | |
| | | |
| 3 | 4 | |
| 3 Customers and client types: Eg: domestic, commercial etc. | 4 Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | Any other details/concerns relevant to training |
| Customers and client types: | Hours of operation: | |
| Customers and client types: | Hours of operation: | |
| Customers and client types: Eg: domestic, commercial etc. | Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | |
| Customers and client types: | Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | |
| Customers and client types: Eg: domestic, commercial etc. Preferred method of contact to ver | Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | |
| Customers and client types: Eg: domestic, commercial etc. | Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | |
| Customers and client types: Eg: domestic, commercial etc. Preferred method of contact to ver Email: Fax: | Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | |
| Customers and client types: Eg: domestic, commercial etc. Preferred method of contact to ver • Email: • Fax: • Post: • Visit: | Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | relevant to training |
| Customers and client types: Eg: domestic, commercial etc. Preferred method of contact to ver • Email: • Fax: • Post: • Visit: | Hours of operation: Eg: RD0s, breaks, shut downs, closed all of January etc. | relevant to training |
| Customers and client types: Eg: domestic, commercial etc. Preferred method of contact to ver Email: Fax: Post: Visit: Visit: I confirm that I have discussed the | Hours of operation: Eg: RDOs, breaks, shut downs, closed all of January etc. | relevant to training |
| Customers and client types: Eg: domestic, commercial etc. Preferred method of contact to ver • Email: • Fax: • Post: • Nisit: • Visit: • Uisit: • Loonfirm that Have discussed the Employer Name • Date | Hours of operation: Eg: RD0s, breaks, shut downs, closed all of January etc. | relevant to training |