

Assessor/Facilitator Training Support Strategy 2019 Application Form (Individual)



Application Process

To complete the application process, please follow the instructions below:

1. Save the downloadable application form to your computer.
2. Complete the application form and ensure the word limit for each section is adhered to. The form can be partially completed, saved, reopened and edited as often as required until you are ready to submit.
3. Submit your application by e-mailing vetgrants@surflifesaving.com.au and attaching a quote obtained from the training provider
4. You will receive an automated response acknowledging receipt of your submission. Please only contact Surf Life Saving NSW to check that we have received your submission if you do not receive an automated response (remember to check your junk email folder).
5. Application outcomes will be advised by email to the contact details you provide on the application form. Applications are usually processed within 21 working days of being received (if all information is complete and correct), please refrain from enquiring about your application progress during the processing period.

Please do not post a hard copy of your application. Additional information beyond what is requested in the steps above is not required. Should further information be required we will contact you.

Eligibility

You must meet the following eligibility criteria or your application will not be considered.

- Be at least 18 years of age on the date of application
- Have been an active SLS member for at least two years
- Be endorsed by your Club
- Be endorsed by your Branch
- Be able to provide details of your intended course of study
- Agree to complete the training prior to or by the end of 2019

General Information

First Name _____ Last Name _____
 Male Female Date of Birth _____ Branch / Club _____
Address _____
Suburb _____ State _____ Postcode _____
Phone (Mobile) _____ Email _____

Training Provider Organisation Details

Registered business (trading) name _____

RTO Code (4-5 digits) _____

Please be aware that a verification check will be conducted to confirm RTO scope of registration and status

Course Details

Select the qualification/skillset that the candidates have chosen to complete

Description/Course Details

Pricing information – total quoted amount and any other relevant information regarding pricing.

Please be aware that a verification check will be conducted to confirm RTO scope of registration and status

Delivery method(s)

Proposed commencement and completion dates

Commencement date _____ Completion date _____

Endorsement

Please ensure that you have the appropriate endorsements completed.

Club				
Club Contact	Name			
	Position		Date	
	Phone		Email	
Comments				

Branch				
Branch Contact	Name			
	Position		Date	
	Phone		Email	
Comments				

Declaration and Consent

I declare that:

The information supplied to Surf Life Saving NSW is, to the best of my knowledge, accurate and complete.

Yes No

The Club and Branch support this application, the proposed course outlined, and is aware of, and agrees to, the terms and conditions that will apply (outlined in the Assessor/Facilitator Training Support Strategy 2019 - Information Pack).

Yes No

Surf Life Saving NSW will be notified of any change to details provided and will be advised of any circumstances that may affect the accuracy of the application submitted.

Yes No

I agree to allocate sufficient time/resources to complete all course and assessment requirements within the specified timeframe.

Yes No

I agree to provide SLSNSW my Statement(s) of Attainment upon successful completion.

Yes No

I understand that the submission of this application does not guarantee funding.

Yes No

I consent to Surf Life Saving NSW contacting any relevant persons listed in this application about the application and to providing copies of the application to such third parties as may be necessary from time to time.

Yes No

Name _____

Date _____