

**F14 – Student Eligibility Checklist**

**Privacy Disclaimer:**

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|  |
| --- |
| Personal Details |
| Surname: |  | Given Names: |  |
| Program: |  |
|  |
| Eligibility  |
| I can confirm that (Please tick) |
| [ ]  | I am 15 years of age or older and am no longer at school  |
| [ ]  | I am not currently enrolled in any other training at Certificate III lever or higher |
| [ ]  | I am a Queensland Resident (Australian Citizen, New Zealand Citizen or Permanent Resident) OR |
| [ ]  | I am a Refugee or humanitarian Visa holder in Queensland |
| [ ]  | I completed year 12 at the end of the previous calendar year and hold a Senior Statement from Queensland Studies Authority  |
| Previous Qualification  |
| Do you hold any Australian qualifications at Certificate III level or higher?  | Yes [ ]  | No [ ]  |
| Do you hold any overseas qualifications? | Yes [ ]  | No [ ]  |
| If yes, are those qualifications recognised in Australia? | Yes [ ]  | No [ ]  |
| If no, How has this been determined?  |
|  |
| Office Use Only |
| Concession: | Concession [ ]  | Non-Concession [ ]  | JSA Funded (NC) [ ]  |
| DET Connect: | Apprenticeships [ ]  |
| Eligible for: | [ ]  Year 12 Graduate Fee Free[ ]  Certificate III Guarantee[ ]  Certificate IV Higher Level Skills[ ]  Fee for Service |
| Payments and Refunds |
| Student’s contribution Fees are outlined in the Training and Assessment Plan, and are required to be paid prior to course commencement. Refunds may be issued in where a student withdraws from training, but ASMI must be advised in writing 7 days prior to withdrawal. Refund will be issued for all units that are not commenced by the student prior to the withdrawal. The student will be advised in writing what units are being refunded, and the refund will be issued via Electronic Funds Transfer (EFT) 7 days after the request has been received.  |
| Declaration  |
| [ ]  | I understand that I will no longer be eligible for a subsided training place under the Certificate III Guarantee Program or Higher Levels Skills Program once I have completed the course I am enrolled in |
| [ ]  | I understand that I will be required to complete a Training and Employment Survey on completion or discontinuation of my course |
| [ ]  | I understand the requirements for payment of the Student Contribution Fee and the refund policy outlined above for the Certificate III Guarantee Program or Higher Levels Skills Program |
| I acknowledge that, by signing below, I declare the information I have provided to be true and correct. |
| Signed: |  | Date: |  |
| Witnessed: |  | Date: |  |
|  |
| Office Use Only  |
| Administration: |
| Entered in VETtrak | Initial/Date: |
| Student ID issued  | Initial/Date: |
| Invoice issued | Initial/Date: |