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| **Traineeship/ Apprenticeship Eligibility Check Permission Form** | landscape_mono |

This eligibility check permission form ***must*** be completed; if it is not completed **in full** your application will not be accepted. The information that you provide will be given to an Australian Apprenticeship Centre to confirm your eligibility to undertake an apprenticeship or traineeship with Clarence Valley Council.

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| **Personal Details** | | |  | | | | |
| Title: | ❑ Mr | ❑ Mrs | | ❑ Ms | ❑ Miss |  | ❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| First name: | | |  | | | | |
| Family name: | | |  | | | | |
| Previous names known by: eg maiden name | | |  | | | | |
| Date of birth: | | |  | | | | |

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| **Education** |  | | | | |
| In what year did you complete high school? | | | |  | |
| What was the highest year of school completed? | | | |  | |
|  | | |  | | |
| Have you completed a previous Apprenticeship or Traineeship?  If YES, please provide the following information: ❑ YES ❑ NO | | | | | ❑ YES ❑ NO |
| Apprenticeship / Traineeship title: | | |  | | |
| Qualification received: | |  | | | |
| Date of completion: | | |  | | |
|  |  | | | | |
| Have you completed any other qualifications eg Certificate levels I, II, III or IV; Diploma; Advanced Diploma or a university degree?  If YES, please provide the following information: ❑ YES ❑ NO | | | | | ❑ YES ❑ NO |
| 1. Qualification name: |  | | | | |
| Date of completion: |  | | | | |
|  |  | | | | |
| 2. Qualification name: |  | | | | |
| Date of completion: |  | | | | |
|  |  | | | | |

I hereby give Clarence Valley Council permission to provide an Australian Apprenticeship Centre my personal information and education details. I confirm that all the information I have provided is true and correct to the best of my knowledge at the time of submission

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| Name: |  | Signature: |  | Date: |  |

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| **P&C Use Only** |  |

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| ❑ Confirmation of eligibility requested: | Signature: |  | Date: |  |
| ❑ Confirmation of eligibility received | Signature: |  | Date: |  |
| ❑ Approval given for interview | Signature: |  | Date: |  |