

EXPRESSION OF INTEREST

Applicant's Details														
First Name:	Middle Name/s:													
Surname:	Date of Birth:													
List all Previous Surname/s:	Phone:													
	Email:													
I am interested in enrolling into the following Course/Qualification: <input type="checkbox"/> CHC30113 Certificate III in Early Childhood Education and Care <input type="checkbox"/> CHCSS00072 Building Inclusive Practices in Early Childhood Education and Care – Skill Set <input type="checkbox"/> CHC50113 Diploma of Early Childhood Education and Care <input type="checkbox"/> CHC50113 Early Childhood Teacher Bridging Program														
Are you of Aboriginal and/or Torres Strait Islander Origin? <input type="checkbox"/> Yes <input type="checkbox"/> No														
Are you an Australian Citizen/ Permanent Resident that resides in Queensland? <input type="checkbox"/> Yes <input type="checkbox"/> No If <u>no</u> , please provide your VISA SUB CLASS NUMBER:														
Do you hold a current concession card? <input type="checkbox"/> Yes <input type="checkbox"/> No If <u>yes</u> , please provide your CONCESSION CARD NUMBER:														
Are you currently undertaking any other study? <input type="checkbox"/> Yes <input type="checkbox"/> No If <u>yes</u> , provide details of study:														
Have you successfully completed one of the following qualifications (select your highest qualification)? <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Certificate I or II <input type="checkbox"/> Certificate III <input type="checkbox"/> Certificate IV </div> <div style="width: 45%;"> <input type="checkbox"/> Diploma (or Associate Diploma) <input type="checkbox"/> Advanced Diploma or Associate Degree <input type="checkbox"/> Bachelor Degree or Higher Degree </div> </div>														
Applicants MUST provide one form of ID from each of the below categories: <table border="0" style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="width: 33%;">Photo ID and Date of Birth:</th> <th style="width: 33%;">Proof of QLD Residency:</th> <th style="width: 33%;">Proof of Citizenship/Permanent Residency:</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Front of Drivers licence</td> <td><input type="checkbox"/> Front & Back of Drivers licence</td> <td><input type="checkbox"/> Birth Certificate</td> </tr> <tr> <td><input type="checkbox"/> Passport</td> <td><input type="checkbox"/> Current Utility Bill</td> <td><input type="checkbox"/> Passport</td> </tr> <tr> <td><input type="checkbox"/> Proof of Age card</td> <td><input type="checkbox"/> Bank Statement with current address</td> <td><input type="checkbox"/> Green or Blue Medicare Card</td> </tr> </tbody> </table>			Photo ID and Date of Birth:	Proof of QLD Residency:	Proof of Citizenship/Permanent Residency:	<input type="checkbox"/> Front of Drivers licence	<input type="checkbox"/> Front & Back of Drivers licence	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Passport	<input type="checkbox"/> Current Utility Bill	<input type="checkbox"/> Passport	<input type="checkbox"/> Proof of Age card	<input type="checkbox"/> Bank Statement with current address	<input type="checkbox"/> Green or Blue Medicare Card
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Required for enrolment in the Teacher Bridging Program <input type="checkbox"/> Current Teacher Registration <input type="checkbox"/> Certified copy of Primary Teaching Qualification	Required for enrolment in CHCSS00072 Skill Set <input type="checkbox"/> Letter of engagement <input type="checkbox"/> Certified copy of Early Childhood Qualification													
In providing this information you are giving permission for C&K College of Early Childhood to conduct an Apprenticeships Info Self Service (AISS) Search. AISS is a tool that enables us to search for vocational training related information retained by the Department of Employment, Small Business and Training in order to assess funding eligibility.														
Signature:		Date:												