

Concession fee / Fee exemption application form



i Please read the Fees, Charges and Refund Policy before completing this document a copy of which is available by contacting head office.

Your application must be supported by evidence of your entitlement to an exemption to course fees and/or a concession fee however applicable. Information relating to required evidence for exemption and/or concession payments is contained in this policy.

Privacy Notice

Allara collects personal information solely for the purpose of operating as a Registered Training Organisation under the VET Quality Framework administered by the Australian Skills Quality Authority who is the National VET Regulator (NVR). The requirements of the NVR may mean the release of personal information for the purposes of an audit. Information collected will not be provided to anyone unless Allara has been granted permission by you or is specifically required to provide the information by law. Further information regarding your Privacy rights can be viewed in the Privacy and personal information policy.

Section A – Personal details

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
First name	<input type="text"/>			Middle name	<input type="text"/>		
Family name	<input type="text"/>			Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>
Employment	<input type="text"/>			<input type="text"/>			<input type="text"/>
	<i>Company name</i>			<i>Position/Department</i>			<i>Manager/Supervisor</i>
Phone	<input type="text"/>	(<input type="text"/>)	<input type="text"/>	(<input type="text"/>)	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Mobile</i>		<i>Home</i>		<i>Work</i>		
Email	<input type="text"/>						

Section B - Postal address

Unit number	<input type="text"/>	Street number	<input type="text"/>
Street name	<input type="text"/>		
Suburb	<input type="text"/>	Postcode	<input type="text"/>
		State	<input type="text"/>

Section C – Application type and eligibility

Application Type	Enrolment Fee Exemption (complete part a) <input type="checkbox"/>	Concession Fee (complete part b) <input type="checkbox"/>
Eligibility - Exemption	To be eligible for an exemption from the Enrolment Fee you must meet one of the eligibility criteria listed in the fees, charges and refund policy. You must be receiving the relevant entitlement at time of enrolment or no later than the date of the first participation in training.	
Eligibility - Concession	To be eligible for a Concession fee you must meet one of the criteria listed in the fees, charges and refund policy and be receiving the entitlement at time of enrolment or no later than the date of the first participation in training.	
Part A - I seek a full-exemption from the course / tuition Fee. (Please tick box A, B or C below)		
A. I am an Australian Aboriginal and/or Torres Strait Islander [ABIN] Definition of Australian Aboriginal or Torres Strait Islander: A person of Australian Aboriginal and/or Torres Strait Islander descent, who identifies as an Australian Aboriginal and/or Torres Strait Islander and is accepted as such by the community with which s/he is associated.	<input type="checkbox"/>	
B. I am currently receiving a Disability Support Pension (Centrelink/Veterans' Affairs) [DSP1]	<input type="checkbox"/>	
C. I am a dependent child, spouse or partner of a recipient of the Disability Support Pension (Centrelink/Veterans' Affairs)	<input type="checkbox"/>	
Part B - I seek application for a Concession Fee (Please tick Box A or B below)		
A. I am currently receiving an eligible government entitlement(s) <i>Note: eligible Entitlements are listed in the Fees, Charges and Refunds Policy</i>	<input type="checkbox"/>	
B. I am currently a dependent child, spouse or partner of a recipient of an eligible entitlement	<input type="checkbox"/>	

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Section E – Declaration

I _____ hereby declare that the information provided in is true and correct.	
Signature	<input type="text"/>
<i>Signature of declarant</i>	
Date	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>

OFFICE USE ONLY – the below section is to be completed by the RTO Representative processing the application

RTO participant enrolled in	<input type="text" value="Tactical Training Group"/> <input type="checkbox"/>	<input type="text" value="WG Learning"/> <input type="checkbox"/>
	<small>National Provider No. 91054</small>	<small>National Provider No. 91178</small>
Supporting evidence was supplied:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p>Proof of entitlement must be sighted and verified before approval is granted.</p> <p>Child, Spouse or Partner of a Beneficiary refers to participants who are dependent on a person who is currently receiving one of the listed entitlements. They are eligible for a fee concession only on showing proof of their dependency status.</p> <p>Child, Spouse or Partner of a Disability Support Pension Beneficiary refers to participants who are dependent on a person who is currently receiving the Disability Support Pension (Department of Human Services (Centrelink) or the Department of Veterans' Affairs). They are eligible for one full fee course exemption only per year on showing proof of their dependency status.</p>		
Application Approved	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If yes, New fee amount</i>	<input type="text"/>	
<i>If NO, provide reason</i>	<input type="text"/>	
Name	<input type="text"/>	Position <input type="text"/>
	<small>Name of authoriser</small>	<small>Position title</small>
Signature	<input type="text"/>	Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
	<small>Signature of authoriser</small>	