ELIGIBILITY FORM – HIGHER QUALIFICATIONS BUILDING PROGRAM 25/26

Eligible participants are only able to complete one (1) Higher Level Qualification across the programs per contract term. Funding is not available for RPL or for any Units of Competency or Qualifications previously attained.

Please complete and email with supporting documentation to admin@coaltrain.com.au

CONTACT DETAILS				
First Name:	Surname:			
Email:	Contact Number:	Contact Number:		
Course:	Course Date:			
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ELIGIBILITY CHECKLIST – PLEASE TICK YES OR NO		YES	NO	
Are you an Australian or New Zealand citizen, or a permanent resident of Australia?				
Are you a VISA holder who has the right to work in Australia and have been employed in the Queensland building and construction industry for six (6) months or more?				
Are you currently enrolled and participating in a Queensland Secondary school program?				
Are you an active apprentice or trainee?				
Are you an employee or a contractor to a Registered Training Organisation?				
Are you an employee of an Authority?				
Are you currently enrolled in a Skill Set or Qualification? If yes, please provide details:				
Have you previously enrolled into the same Qualification under CSQ Funding?				
Are you seeking a Verification of Competency?				
Are you currently employed in the Building and Construction Industry in QUEENSLAND? If YES continue to Section A				
Have previously been employed in the Building and Construction Industry in Queensland and have been unemployed for no greater than six (6) months? If YES continue to Section B				
CURRENT EMPLOYMENT DETAILS (SECTION A)				
Name of Company:	Occupation:			
Company Contact:	Phone Number:			
Address:				
Email address:				
Period of Employment: Employment Status: Full Time Part Time Casual				
REQUIRED DOCUMENTATION (SECTION A) – MUST BE ATTACHI	ED TO PROCESS APPLICATION			
Copy of either your Australian Birth Certificate, Passport or Medicare Card				
Letter from employer on, company letterhead, confirming position of employment, detailing duties being undertaken.				
If self-employed, a copy of a invoices detailing work undertaken for a client and current ABN/ACN registration				

PREVIOUS EMPLOYMENT DETAILS IF CURRENTLY UNEMPLOYED (SECTION B)					
Name of Company:	Occupation:				
Company Contact:	Phone Number:				
Address:					
Email address:					
Period of Employment:	Employment Status: Full Time Part Time Casual				
REQUIRED DOCUMENTATION (SECTION B) – MUST BE SUBMITTED	WITH APPLICATION				
Copy of either your Australian Birth Certificate, Passport or Medicare	e Card				
Letter from employer confirming position and employment. or					
Statutory Declaration providing details of relevant employment including employer, role and details of duties within the Building and Construction Industry					
Declaration					
For the 2025/26 Training Plan year, CSQ is standardising co-contribution fees across all Building programs. Participants accessing CSQ funding will be required to pay a co-contribution fee, with CSQ covering the remaining course costs. I understand that I must pay a co-contribution fee of \$500 to enrol into this course. I give my consent to Coal Train Australia Pty Ltd to provide records and information to Construction Skills Queensland at their request. I acknowledge that Construction Skills Queensland may contact me for purposes including, but not limited to, undertaking reviews, conducting surveys, or providing information regarding Construction Skills Queensland products and services. I declare that all information provided is true and accurate. I hereby give my consent to Coal Train Australia Pty Ltd to provide records and information to Construction Skills Queensland at their request. I understand that Construction Skills Queensland can contact me for the purposes of including but not limited to a review and / or conducting surveys. I declare that all information provided is true and accurate.					
Applicants Signature:	Date:				

Funded amounts provided under Construction Skills Queensland are:

Approved:

OFFICIAL USE: Evidence Supplied:

QUALIFICATION CODE	QUALIFICATION TITLE	AMOUNT FUNDED
BSB41419	Certificate IV in Work Health and Safety	\$2,700.00
BSB40920	Certificate IV in Project Management Practice	\$2,826.00

Approving Officer:

Date: