



Australian Government

Department of Climate Change  
and Energy Efficiency

# Training Assistance Scheme for Accredited Home Sustainability Assessors

Attach  
receipts  
here

## Application Form

Please use this form to lodge an application for partial reimbursement for tuition fees for the accredited Certificate IV in Home Sustainability Assessment. The Training Assistance Scheme for Accredited Home Sustainability Assessors will provide assistance in the form of a refund of 50 per cent of the tuition fees (up to \$2,500 (GST inclusive)) for eligible assessors.

Eligibility requirements for the Scheme are contained in the Training Assistance Scheme Guidelines, which also define the key terms used in this application form. You should read the Scheme Guidelines prior to completing this form. The Guidelines and more information can be found at

<http://www.climatechange.gov.au/en/government/programs-and-rebates/green-loans/training-assistance.aspx>

Only one claim can be accepted per person and subsequent claims by the same individual will not be processed. Accordingly, it is in your interest to only submit your Application Form once you have paid the amount of tuition that would maximise your reimbursement.

Applicants should refer to section 13(1) of the Scheme Guidelines regarding taxation implications prior to completing this form.

### Lodgement

**Your application must be received by the Department on or before Wednesday 2 May 2012.** After this date, your Training Assistance Scheme Application Form will not be accepted. The Department will not accept emailed, faxed or scanned applications.

Your completed application form should be sent to:

Training Assistance Scheme  
PO Box 1001  
Tuggeranong ACT 2901

Please keep a copy of your application form and all supporting documentation for your records as this information will not be returned to you.

### 1. Your details

|  |                             |                              |                               |                             |                            |
|--|-----------------------------|------------------------------|-------------------------------|-----------------------------|----------------------------|
| Title  | Mr <input type="checkbox"/> | Mrs <input type="checkbox"/> | Miss <input type="checkbox"/> | Ms <input type="checkbox"/> | Other <input type="text"/> |
| First name   | <input type="text"/>        |                              |                               |                             |                            |
| Last name  | <input type="text"/>        |                              |                               |                             |                            |
| Registered business name/trading name (if any)                       | <input type="text"/>        |                              |                               |                             |                            |
| Previous name* (if name has changed since ABSA accreditation)        | <input type="text"/>        |                              |                               |                             |                            |
| HO Number  | <input type="text"/>        |                              |                               |                             |                            |
| Residential address  | <input type="text"/>        |                              |                               |                             |                            |
| Suburb/town  | <input type="text"/>        |                              |                               | State                       | Postcode                   |
| Postal address (write 'as above' if the same as Residential address) | <input type="text"/>        |                              |                               |                             |                            |
| Suburb/town  | <input type="text"/>        |                              |                               | State                       | Postcode                   |

\* Where the name on the receipt provided is different to the name on this application due to a change of name, you must provide evidence that verifies that you incurred the costs under the name identified in the receipt (e.g. marriage certificate).

I have attached evidence of change of name  Not applicable

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## 2. Contact details

Please provide your contact details below. Providing us with a telephone number and e-mail address means that we can contact you during business hours should we have any questions and may assist us in processing your claim. Not being able to contact you may mean that your application will be assessed on the available information only.

|   |        |
|---|--------|
| Daytime telephone number<br>(include area code) | (    ) |
| Mobile number                                   |        |
| E-mail address                                  |        |

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## 3. Course details

Training Assistance is only available for the Certificate IV in Home Sustainability Assessments course (National Training Information Service course code CPP41110).

Please attach the receipt from your Registered Training Organisation (refer to section 6.2(d) and Proof of enrolment (refer to section 6.2(e)).

|  |  |  |  |
|--|--|--|--|
| Course provider                                      |  |  |  |
| Registered Training Organisation registration number |  |  |  |
| Total costs of tuition fees \$ (GST inclusive)       |  | Claimed amount \$ (GST inclusive) (maximum \$2500) |  |
| Course starting date                                 |  | Expected/Actual completion date                    |  |

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## 4. Photo identification

Please attach a clear and readable certified copy of one of the following forms of photographic identification. Please tick the appropriate box below for which a certified copy is attached:

|  |                          |
|--|--------------------------|
| Current photo driver's licence or permit issued by a State or Territory government | <input type="checkbox"/> |
| Photo ID proof of age card issued by a State or Territory government               | <input type="checkbox"/> |
| Current passport (or expired within last 2 years) issued by the Commonwealth; or   | <input type="checkbox"/> |
| Current ABSA identification.   | <input type="checkbox"/> |

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## 5. Bank account details

Your reimbursement can only be paid directly to **your** personal Australian bank account (i.e. the nominated account must be held in your name).

|                               |  |
|-------------------------------|--|
| Name of account holder(s)     |  |
| Name of financial institution |  |
| BSB number                    |  |
| Account number                |  |

## Required documentation

- Proof of enrolment
- Receipt from Registered Training Organisation
- One type of Photo Identification
- Proof of change of name\* (if applicable)

Originals or clear and readable certified copies are required. Please keep a copy of all supporting documentation for your records as this information will not be returned to you.

\* Where the name of the receipts provided is different to the name on this application due to a change of name, you must provide evidence that verifies that you incurred the costs under a former name (e.g. marriage certificate).

## 6. Declaration

I declare that:

- all information provided on this form, including attachments, is true and correct.
- I have personally paid the costs that I have claimed for tuition fees for the Certificate IV in Home Sustainability Assessment and I have not been nor will I be in the future, reimbursed by a third party for any of the costs.
- I have read and understand the Scheme Guidelines.

I understand and acknowledge that:

- the Commonwealth may recover the Training Assistance that it has paid to me if:
  - I do not complete the course or I do not provide, when requested, satisfactory evidence that I have completed the course;
  - I provide false or misleading documentation or information;
  - I receive a refund or reimbursement of my tuition fees; or
  - the Department otherwise determines that I am not entitled to the assistance in accordance with the Guidelines for the Scheme;
- neither receiving payment under this Scheme nor completion of the Certificate IV HSA is a guarantee, or warranty of any kind by the Commonwealth that:
  - I can expect employment in the home sustainability assessment field or further Commonwealth assistance to find employment in the field;
  - I am qualified to engage in a State or Territory home sustainability program;
- providing false and misleading information is an offence under the *Criminal Code Act 1995*.

I consent to the Department using and disclosing information about my claim, including this application in accordance with the privacy notice on this form.

Printed name

Signature

Date

### Privacy Notice

The information on this form (including its attachments) and any other information or documents generated as a result of your application will be used to assess your eligibility to receive a partial reimbursement under the Training Assistance Scheme and may be used for related purposes in connection with the Scheme. That information may be disclosed by the Department, or a delivery agency it engages, for those purposes within the Department and the delivery agency and to the Department's or delivery agency's contracted advisors, other government agencies, training organisations, ABSA, and any other third party that may assist to verify the claim and ensure compliance with the Guidelines for the Scheme. Your financial institution account details will be used to facilitate payment of your claim.

The Department and delivery agency may also use and disclose the abovementioned information for any other governmental purpose including reporting on the Training Assistance Scheme or related research and policy development purposes. Application, claim and payment information may also be disclosed to the Australian Taxation Office for compliance purposes and to the Australian Federal Police in the event of suspected fraud.