



CQMA Office Building 36, CQUniversity , Northside Campus
PO. Box 5535 Redhill North Rockhampton QLD 4701
E-mail: cqma_inc@hotmail.com
Phone: 07 49306857 Mobile:0438751974



**STRENGTHEN YOUR JOB
OPPORTUNITIES**

LEARN TOGETHER

MEET OTHERS

CREATE A CARING TEAM



Skilling Queenslanders for Work FULLY FUNDED TRAINING COURSES

Course 1. FSK20113 Certificate II in Skills for Work and Vocational Pathways

This qualification is designed for individuals who require further *foundation skills development* to prepare for workforce entry or vocational training pathways.

Course 2. CHC33015 Certificate III in Individual Support

This course is nationally recognised under the Australian Qualifications Framework and upon completion you could gain employment in many different types of positions to suit your needs and personal goals.

Potential career outcomes: Residential Aged Care, Home and Community Care, Accommodation Support Worker, Care Assistant, Community Care Worker, Disability Support Worker, Residential Care Officer.

Course 1. Date of Commencement: To be advise at Information Sessions (see below for dates & time.

Course 2. Date of Commencement: Tuesday 4 October (as Monday is a public holiday)

Please fill out the attached Expression of Interest [EOI] **then scan** and send to cqma_inc@hotmail.com

OR

Drop your paper copy into CQMA Office – Building 36 CQUniversity, Northside Campus, Rockhampton between 10am-2pm Monday, Wednesday and Friday or phone: 0438751974 for more information.

Expressions of Interest [EOI] for **both courses** must be **received prior** to attending the following **Information Sessions.**

Information Sessions:

Dates: Fri 9 Sept 2016 **or** Fri 16 Sept 2016 **or** Fri 23 Sept 2016

Time: 9.30 am to 11.30 am

Address: Middle Hall, 263 Agnes Street, The Range, Rockhampton 4701

This training is proudly funded and supported by the Queensland Government through its *Skilling Queenslanders for Work* initiative.



Registered Training Number: 31994



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Skilling Queenslanders for Work

EXPRESSION OF INTEREST

Identify the Course/s that you would like to study (Tick applicable box).

Course 1. FSK20113 Certificate II in Skills for Work and Vocational Pathways.

Course 2. CHC33015 Certificate III in Individual Support -

PLEASE PRINT

Full Name:.....
 Date of birth:.....
 Email Address
 Postal Address.....
 Home Phone:Mobile Number:

1. Current employment status (Tick applicable box)

Full Time Part Time (average weekly hrs) Casual

Current Position/ Occupation
 Current Employer if you have one:
 Contact details: Phone:.....Email:.....

2. Employment Dates (commenced)

Full time...../..... Part time...../..... Casual...../.....

3. Citizenship (Tick applicable box)

Australian Citizen or permanent resident
 New Zealand passport holder who has been resident in Australia for 6 months or more

Other – Please list you visa type:.....

4. Education

What is your Highest completed School Year?.....
 When did you leave school? (month & year) /
 Are you currently undertaking any study? Yes No
 If yes, give details.....



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5. Prior Qualifications

Have you successfully completed any formal Qualifications? Yes No
 Name & Level of Qualification Held
 Month & Year Qualification Commenced: /
 Month & Year Qualification Completed:/
 How was this qualification obtained:
 (i.e) self-funded, skills voucher, other government funded program)

6. Have you previously worked as an apprentice or trainee? Yes No
 If yes, please give details:
 Qualification
 State..... Year of Commencement

7. Are you of Aboriginal or Torres Strait Islander origin? Yes No

8. Do you have a recognised disability? Yes No

9. Are you from a Non English Speaking Background? Yes No

10. Do you hold any form of concession card? Yes No
 (Concession card refers to pension card or healthcare care)

Signature..... Date

**NOTE ALL INFORMATION YOU PROVIDE WILL BE HELD IN THE STRICTNESS CONFIDENCE AND
 WILL NOT BE SHARED WITHOUT YOUR CONSENT**

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