The Australian Council for Private Education and Training’s (ACPET) National Disaster Scholarship Scheme is made available to individuals who are affected by major natural disasters occurring in Australia.

The course scholarships are made available to individuals who are in financial need, but can demonstrate the ability and motivation to pursue vocational education and training at certificate or diploma level.

To apply, please complete the application form below and attach any relevant documentation which supports your eligibility. Your application and support documentation will be treated in strictest confidence. Applications can be lodged at anytime. ACPET Member Colleges will make their scholarship offers as a result of applications submitted as part of a competitive process. Scholarship applications will be assessed based on the information provided in the application and supporting documentation. If you have any queries, please email: scholarships@acpet.edu.au

Please return this form and supporting documentation to:
National Disaster Scholarship Scheme
Australian Council for Private Education and Training
Suite 101. Level 1.
126 Wellington Parade
East Melbourne Vic 3002
PERSONAL/CONTACT DETAILS

Title: 
Given Name: 
Family Name /Surname*: 

*If your name has changed or differs from that on any of your supporting documentation, you must provide legal evidence of your official change of name, such as a Marriage Certificate or a Change of Name Certificate.

Address: 
State/Territory: 
Postcode: 

Date of Birth: /Day /Month /Year 

Country/Countries of Citizenship and Residency Status: 

*Attach a photocopy of your passport/s and if applicable your visa. It is your responsibility to ensure this visa allows you to study in Australia and covers the duration of the course for which you have applied.

Telephone: 
Area code: 
Mobile: 

Email address: 

STATISTICAL INFORMATION PURPOSES (tick as appropriate)

Gender 
☐ Male 
☐ Female 

Aboriginal or Torres Strait Islander 
☐ Yes 
☐ No 

Disaster Event: 
Disaster Location: 

Please supply a copy of your Centrelink Letter confirming your status as a resident affected by a major natural disaster (OR) If you are not an Australian resident, please supply a copy of your letter from your Embassy/High Commission confirming your need for assistance following a major Australian based natural disaster.

EDUCATION AND TRAINING HISTORY

An official certified copy of your academic results with an official explanation of the grading system must be provided as an attachment. If the documents are not in English, they must be accompanied by an official certified translation.

Secondary School Academic Record

Course/Qualification: 

Name of Institution (Secondary School): 

Year of Completion*: 
Highest level of schooling completed: 

# If not completed, please state “incomplete”

Previous Tertiary Education Academic Record

Course/Qualification: 

Name of Institution: 

Year of Completion*: 
Result: 

# If not completed, please state “incomplete”

CREDIT FOR PREVIOUS STUDIES (tick as appropriate)

Are you seeking advanced standing for units already undertaken? 
☐ Yes 
☐ No 

If yes, please attach: full documentation of studies completed; an official explanation of the grading system; an indication of the units you are enrolled in but have not yet completed, the subject content for each unit.
ENGLISH LANGUAGE PROFICIENCY (tick as appropriate)

☐ I am a native speaker of English
☐ I have completed senior secondary education in Australia

EMPLOYMENT HISTORY (last 3 positions)

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Are there any personal circumstances you would like to be considered as part of this application? (i.e. dependants, disability, financial, caring responsibilities etc)


PROPOSED PROGRAM OF STUDY
Please ensure that you have checked and satisfy the selection criteria of your nominated course/institution.

Name of Institution | Name of Course | Preferred Study Load
Full-time /Part-Time

1. 
2. 
3. 

Occupation you would like to be retrained in:


Please outline in the space below your interest or experience in this occupation/industry:


Have you sought career advice on your nominated course? (tick as appropriate)  ☐ Yes  ☐ No

Any other comments you would like to make in support of your application:
REFEREES
Referees must not be related to the applicant. Applicants must nominate a person who has known you for at least 12 months and who can confirm the accuracy of the statements you are making on your application and who may be asked for confidential advice about your suitability for the course.

Referee 1
Title: Dr/Mr/Mrs/Ms/Miss/Other
Name:

Position: Relationship to the Applicant:

Address:
Telephone: Email:

Referee 2
Title: Dr/Mr/Mrs/Ms/Miss/Other
Name:

Position: Relationship to the Applicant:

Address:
Telephone: Email:

FEEDBACK
To help our promotion and coordination efforts, please indicate how you heard about the scholarship scheme (tick as appropriate)
☐ ACPET Website  ☐ Other (please specify)

☐ Government Agency (Please supply name of agency)

APPLICATION FORM CHECKLIST
☐ I have completed all sections of the application form  ☐ I have included supporting documentation
☐ I have read understood and accept the terms of the scholarship scheme as outlined below

SCHOLARSHIP ACCEPTANCE
In accepting a scholarship, the recipient agrees to:
☐ Maintain satisfactory progress in their studies;
☐ Provide a brief progress report to ACPET at the end of each semester/term;
☐ Participate in career and course advice activities;
☐ Act as an ambassador for the ACPET National Disaster Scholarship Scheme.

DECLARATION & SIGNATURE
☐ I declare that the information in this application and attachments is correct to the best of my knowledge. I understand and accept that ACPET and its member colleges reserve the right to reverse or vary any decision regarding scholarships made on the basis of incomplete or false information. I acknowledge that all documents submitted become the property of ACPET and will not be returned. I understand that the personal information that I have provided in my application (or subsequently) will be released to ACPET member colleges and other donors participating in the scholarship scheme to help determine my eligibility for the scholarship and any subsequent support required to undertake the course of study.

Signature: Date:

Name: Witnessed by (full name):

Witness Signature: Date:

ACPET’S PRIVACY STATEMENT
ACPET has a statutory obligation to comply with the Information Privacy Act 200 (Vic). It holds information in both computer, and paper based records. It takes all reasonable steps to ensure that the information it holds is accurate and complete and that it is protected from misuse, loss, unauthorized access or disclosure. If you have an enquiry about your privacy rights in relation to the collection of information from scholarship applicants, please contact ACPET’s Privacy Officer at: acpet@acpet.edu.au  Printed May 2011