

**SMART AND SKILLED (If applicable)**

SMART AND SKILLED  Student Contribution (fee) \$ \_\_\_\_\_

On signing this document, I understand and agree that I am obliged to pay Contour College the student fee as specified by the Department of Education under the Smart and Skilled entitlement arrangement. Instalment arrangements will be advised prior to commencement by invoice. Failure to pay fees within 14 days of invoice date, may result in suspension of training.

**PRIVACY DECLARATION**

I have read and understand the Privacy Declaration within the Enrolment form.

Student Name:..... Student Signature:..... Date: .....

Note: If under 18years of age at the time of giving consent, then the consent of the guardian is required.

Guardian Name:..... Guardian Signature:..... Date.....

**Smart & Skilled Provider Calculator Student enrolment Questionnaire**

Are you living in NSW social housing Or are you or your household on the NSW Housing Register?  Yes  No  
**Evidence will be required**

Are you registered or intending to be registered in an apprenticeship or traineeship for this qualification in NSW?

Yes, registered  Yes, intending to be registered  No

If Yes, which type

New Entrant Traineeship  Existing Worker Traineeship  Apprenticeship  
 School Based Apprenticeship  School Based Traineeship

Have you undertaken any other Smart and Skilled qualification this calendar year?  Yes  No

Indicate disability status **Evidence will be required**

Student has a disability  Student is dependent child or spouse of a person in receipt of a disability support pension  
 No disability

Please indicate disability assessment type

Recipient of disability support pension  Assessed by specialist support professional as a student with disability

Indicate welfare status **Evidence will be required**

Student is a welfare recipient  Dependent child or spouse of a welfare recipient  Not a welfare recipient

If yes, please specify

<input type="checkbox"/> Age Pension	<input type="checkbox"/> Sickness Allowance
<input type="checkbox"/> Austudy	<input type="checkbox"/> Special Benefit
<input type="checkbox"/> Carer Payment	<input type="checkbox"/> Veterans' Affairs Pensions
<input type="checkbox"/> Exceptional Circumstance Relief Payment	<input type="checkbox"/> Veterans' Children Education Scheme
<input type="checkbox"/> Family Tax Benefit Part A - Maximum Rate	<input type="checkbox"/> Widow Allowance
<input type="checkbox"/> Farm Household Allowance	<input type="checkbox"/> Widow B Pension
<input type="checkbox"/> Newstart Allowance	<input type="checkbox"/> Wife Pension
<input type="checkbox"/> Parenting Payment (Single)	<input type="checkbox"/> Youth Allowance

**OFFICE USE ONLY**

Staff member has copied welfare evidence  
and the copy taken is clear and has been sighted  
for the student file:

Staff Initial:.....

Have you been referred by an Employment Service Provider?  Yes  No

Employment Service Provider Organisation/ID \_\_\_\_\_

Employment Service Provider Client ID \_\_\_\_\_

Employment Service Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Do you have appropriate evidence of long term unemployed status (if required)?  Yes  No **Evidence will be required**

LEARNER SIGNATURE

PARENT/GUARDIAN  
SIGNATURE (if applicable)

CONTOUR COLLEGE  
AUTHORISED SIGNATURE