

## Adult Community Education Provider List Application Form

This form is used to apply to join the list of Adult Community Education (ACE) providers currently kept by the Department of Trade, Employment and Training.

Please return the completed form via email to <u>gld.ace@desbt.gld.gov.au</u>

Organisation details				
Name of your organisation:				
Trading name of your organisation (if applicable):				
Type of organisation:		<ul> <li>Community-owned, not-for-profit</li> <li>Government-owned</li> <li>Privately owned</li> <li>Other (please specify):</li></ul>		
Is your organisation a registered tr		raining organisation?		🗆 Yes 🛛 No
Your contact details				
Contact person:				
Address:				
Telephone:				
Email:				
Website:				
ACE provider information				
Locations and postcodes where you provide ACE services:				
Overview of ACE learning opportunities provided by your organisation: (50 words max)				
Would you like your organisation included in a list of Queensland-based ACE providers made available through a departmental website?			🗆 Yes 🛛 No	
Warranty You warrant that all information provided is correct and you agree to notify the department if any of the above information changes.			□ I agree □ I do not agree	
Signature:			Date:	
Name (please print):				

## Disclaimer:

By completing and returning this form, you agree to release, discharge and indemnify the State of Queensland acting through the Department of Trade, Employment and Training and its officers and employees from and against any claim (including any action, proceeding, demand, liability, obligation, costs, legal costs, losses, damages and expenses, including those arising out of the terms of any settlement) that may be brought against or made upon or incurred by any of them in connection with the department's use and/or publication of the information you have provided.

