

Training and Skills Support/Job Search Support - Application form

Please note: Receipt of this subsidy/assistance may affect Commonwealth Support Payments (either in full or in part). It is the applicant's responsibility to make enquires with Centrelink on the impact of payments under the Workers Assistance Scheme <u>prior</u> to applying for assistance

Eligibility requirements

- Proof of employee or employees partner identity (acceptable forms of ID are drivers licence or birth certificate as well as Medicare card)
- Proof of course details or support, including, dates, costs and provider
- Proof of ordinary time earnings (payslips) and Sibelco leave approval, if claiming compensation for unpaid leave to undertake approved training prior to retrenchment

Training must meet the below definition of approved training:

Training that provides links to career options for affected workers. This training should align with the eligible worker's individual employment goals, as discussed and approved with the Employment Services Manager (ESM).

Job Search Support is immediate, direct and tailored services to support affected workers find alternative employment. Support can include: career counselling, job referral, resume writing, interview skills and literacy and numeracy support.

Applicant information				
Office use only - ESM to complete Case number:		Sibelco employee number:		
Title:	Surname:	Given name(s):		
Date of birth:				
Home address:				
Home phone:		Mobile:		
Email:				
_	_			

1 Training and Skills Support				
Qualification :		Cost:		
Course title:				
Start date:	End date:			
Provider name:				
Provider address:				
Provider phone:	Provider email:			
Office use only - ESM eligibility assessment	Yes	No		

 $North\ Stradbroke\ Island\ -\ Workers\ Assistance\ Scheme\ \textit{Training and skills support and job search support\ -\ Application\ form\ Stradbroke\ Scheme\ S$

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Compensation for unpaid leave to undertake approved training prior to retrenchment					
Compensation is available for unpaid leave to attend approved training. A maximum of four weeks ordinary time earnings per worker may be claimed.					
Are you claiming compensation for required leave without pay training prior to being made redundant by Sibelco?	to undertake Yes	No			
Has unpaid leave to undertake training been approved by Sib	elco? Yes	No			
Has a Training and Skills Support or Job Search Support applica training been approved? Please provide details below	tion for this Yes	No			
Office use only - ESM eligibility assessment	Yes	No			
Leave dates:	Hours of leave:				
Ordinary hours worked per week:	Hourly rate:				
Compensation amount: \$					
Applicant or provider payment details					
Account name:					
BSB:	Account number:				
2. Job Search Support					
Job search support Information:					
Type of support (i.e. resume assistance, career counselling, course):					
Provider:					
Provider address:					
Provider phone:	Provider email:				
Date (if applicable):					
Cost: \$	·				
Office use only - ESM eligibility assessment	Yes	No			
Applicant or provider payment details					
Account name:					
BSB: Ac	count number:				

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Account number:

Applicant declaration
Privacy Statement: The Department of Employment, Small Business and Training collects your personal information in order to provide assistance under the North Stradbroke Island Workers Assistance Scheme (WAS) for the purpose of administering the WAS. Your information may also be provided to other Queensland agencies, agencies of other States, Australian Government agencies, local government and non-government organisations including business entities, for the purpose of administering, monitoring, auditing, evaluating and promoting the WAS. Your personal information will be managed in accordance with the Information Privacy Act 2009.
I, (applicant's full name) hereby declare
that the information I have provided is true and correct and that I have not previously applied for or received the same assistance measure under the WAS. I understand giving false or misleading information to obtain a benefit from the Queensland Government is fraudulent and may contravene section 408C of the Queensland Criminal Code.
Lunderstand that the receipt of this subsidy/assistance may affect Commonwealth Support Payments (either in full or in

I understand that the receipt of this subsidy/assistance may affect Commonwealth Support Payments (either in full or in part) and it is my responsibility to make enquires with Centrelink on the impacts of payments under the WAS prior to applying for assistance.

I understand that payments will be made within 14 days of the submission of application form and supporting documentation by the Employment Services Manager.

Applicant Signature

Applicant Name

I agree to repay any subsidy/assistance or overpayment made as a result of my providing incorrect information or being found to be ineligible and the Queensland Government may refer cases of suspected fraud to the Queensland Police Service for investigation.

Date

Employment Services manager (ESM)	ESM Signature		Date			
OFFICE USE ONLY: ESM Checklist	No	N/A				
Proof of payment, if course or support undertaken and payment is in arrears						
Case number assigned						
Copy of drivers licence or birth certificate attached						
Copy of medicare card attached						
Is the applicant a partner of an affected worker?						
Does training or support meet the approved definition?						
Copy of invoice from provider attached						
Has the employee been made redundant by Sibelco?						
Is compensation for leave without pay to undertake training being claimed?						
Copy of payslip attached						
Copy of Sibelco approval attached						
NOTES (office use only)						

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