Change in Control – Key Personnel Contract Management

IMPORTANT

Completion of this form by a Supplier does not constitute the Department's consent to the change in control. Consent is <u>only</u> provided **if and when** the Department provides written consent.

Unless or until written consent is provided by the Department, consent has not been provided to appointment the Key Personnel.

The Department and the Supplier entered into Vocational Education and Training (VET) Skills Assure Supplier (SAS) Agreement/s identified in Section A of this form.

Pursuant to clause 28 of the SAS Agreement/s, prior written consent must be obtained by the Department for any change in control of a Supplier

The Supplier has notified the Department of changes to Key Personnel, identified in Section A below, under the VET SAS Agreement.

The Supplier and the Key Personnel acknowledge and understand that the Department will consider its consent to the Change in Control.

Definitions

ASQA means the Australian Skills Quality Authority.

Change in Control means the appointment of the individual identified in Section A.

Supplier means the Supplier identified in Section A of this form

VET SAS Agreement/s means the Vocational Education and Training (VET) Skills Assure Supplier (SAS) Agreement between the Department and the Supplier identified in Section A of this form.

Key Personnel means the individual named in Section A who:

- a) is concerned in, or takes part in, the management of the Supplier; or
- b) is an employee or agent of the Supplier with duties of such responsibility that his or her conduct may fairly be assumed to represent the Supplier in relation to their business;
- c) exercises a degree of control or influence over the management or direction of the Supplier, including those who participate in making decisions that affect the business of the Supplier;
- d) has the capacity to significantly affect the future operations and financial standing; or
- e) has the ability, or capacity, to determine the outcome of decisions about the financial and operating policies of the Supplier.



The individual named below must complete all details in this form and sign the declaration. The Department may consider any other relevant matter when assessing whether a person meets the requirements.

Section A – Individual and Skills Assure Supplier Details

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Legal Name of Supplier:	
Business / Trading Name of Supplier:	
RTO code:	
Queensland VET Investment Agreement Number:	
User Choice Program Agreement Number:	
Full Name of incoming Key Personnel	
Position title:	
Appointment date to position:	

Section B - Questions	Yes	No
Part A: Legal Information		
Are you currently an undischarged bankrupt or subject to a personal insolvency agreement under the <i>Bankruptcy Act 1966 (Cth)</i> where the terms of the agreement have not been complied with?		
Have you been a company officeholder of any organisation declared bankrupt in the last five (5) years?		
Have you ever been disqualified from managing a corporation pursuant to the provisions of the <i>Corporations Act 2001 (Cth)</i> ? (The <i>Corporations Act 2001 (Cth)</i> provides that persons are disqualified from managing corporations including undischarged bankruptcy).		
Are you subject to any legal action (commenced or anticipated to commence) relating to any organisation you have been involved with, within the three (3) year period prior to, or from, the date of this application?		
Have you been in a management role within any organisation that experienced events covered in questions one (1.1) to four (1.4) above?		
Have you ever been convicted of a criminal offence relating to the conduct of any organisation? (You are not required or asked to disclose any offence if the request or disclosure would breach the Criminal Law <i>Rehabilitation of Offenders Act 1986</i> or <i>Juvenile Justice Act 1992</i> .)		

Part B: Covenants with the Departmen	t	Yes	No	
You acknowledge that you have read and understand the Suppliers obligations under the VET SAS Agreement/s.				
You acknowledge that the Supplier is bound by	the VET SAS Agreement/s.			
You agree to use your best endeavours to ensure that on and from the date you are appointed as Key Personnel that the Supplier performs, observes and abides by the requirements of the VET SAS Agreement. The Departments Policies for Skills Assure Suppliers and the applicable Programs are current and as may be amended, including any new Departmental Policies notified to the Supplier from time to time.				
Part C: Warranties with the Department		Yes	No	
In your position stated on this form, you w	varrant and affirm to the Depa	rtment t	hat:	
You are a fit and proper person in accordance with the Fit and Proper Person requirements made by the Minister pursuant to section 186(1) of the <i>National Vocational Education and Training Regulator Act 2011</i>). You have provided ASQA with a fit and proper person declaration and have provided the Department with a copy of the said Declaration.				
The Supplier will notify/has notified ASQA of the change in control, including your appointment to the position stated in this form, and have provided the Department with a copy of the notification of the change in control to be given to ASQA.				
Part D: DECLARATION BY THE KEY PERSONNEL				
I declare that the information I have provided is true and accurate and agree to abide by the covenants set out in Part B on and from the position appointment date outlined in part A of this form.				
SIGNED BY THE INDIVIDUAL:	WITNESSED BY:			
Name:	Name:			
Signature:	Signature:			
Date:	Date:			
Part E: CONSENT BY THE DEPARTMENT				
IMPORTANT **Unless or until you receive written consent from the Department, the Department does not consent to the appointment of the Key Personnel**				
In reliance on the Warranties outlined in Part B and the declaration of the Key Personnel in part D, the Department hereby consents, upon signing, to the Change in Control of the Supplier on the condition that the Key Personnel abides by the Covenants outlined in Part C of this form. SIGNED BY THE DEPARTMENT: WITNESSED BY:				
Name:	Name:			
Signature:	Signature:			
Date:	Date:			