



Worker Eligibility Questionnaire

Name: _____ Workplace: _____

Date of Birth: ____/____/____ Date Employment Commenced: ____/____/____

Qualification & Level to be signed into: **Cert IV Medical Practice Assisting (HLT 43307)**

1. Are you interested in undertaking an Australian Apprenticeship? Yes No

2. Are you currently employed: Full time Part time Casual

3. How long have you been employed by your employer? Years _____ Months _____

4. Are you:

A Australian Citizen
B Permanent Resident
C Temporary Visa Holder
D NZ passport holder?

↳ If yes to D, have you been a resident of Australia for 6 months or more? Yes No

5. Have you ever **commenced** a Traineeship or Apprenticeship before? Yes No

If yes, qualification name and year commenced _____

6. Have you **completed** any qualification?

No

Yes → Year Completed: _____

↳ Name and level of the Qualification: _____

↳ Year you left school (eg 2004): _____

7. Are you **currently** undertaking any other study? Yes No

If yes, what is the name and level of the qualification? _____

8. Are you 45 years old or over? Yes No

9. Do you fall into any of the following categories?

Indigenous or Torres Strait Islander

You are an Intensive Support Customised Assistance Client

You have a previous qualification which cannot be used because of an injury or disability

You are in receipt of Disability Support Income

Thank you for your participation, please fax this completed questionnaire as soon as possible to:

Attention: Lindsay Yeaman at MEGT. Email: lindsay.yeaman@megt.com.au

Note: The preliminary advice of eligibility to access Commonwealth Incentives provided herein is subject to MEGT undertaking a full assessment of eligibility criteria. A full assessment can only be made upon receipt by MEGT of fully completed and correct assessment documentation, and when requested by MEGT, additional information may be required. MEGT makes no representation about the accuracy or suitability of the information provided. All information is provided 'as is' without express or implied warranty. **Australian Apprenticeship Incentive Program Guidelines are subject to change at any time without notice.**