

**OFFICE USE ONLY**

Trainee ID No: ..... Program .....

Exempt Status ..... Assess date ...../...../.....

Re-assess date ...../...../..... Eligibility Status .....

## Application for Exemption

### Application to establish exemption from eligibility criteria, for a government subsidised 'Skills Deepening' place in an Innovative Business Training Diploma Program

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#### Assessment of Exemption from Eligibility Criteria

To be eligible for a subsidised government place in an Innovative Business Training (IBT) Diploma or Advanced Diploma Program you must meet Skills Victoria criteria as follows, and as specified in the **Enrolment Information Sheet** (please refer)

- (1) Meet citizen residency requirements AND
- (2) Meet age requirement OR
- (3) Apply for a course at a higher level than the highest qualification already held
- (4) Individual Exemption

If you **do not** meet the Victorian government's eligibility criteria, but fall into one of the following categories, you may be eligible for exemption from the eligibility criteria. Exemptions to the above criteria include:

- Critical Skills shortage (as defined by Skills Victoria)
- If you are unemployed as a result of redundancy or retrenchment
- Is disadvantaged in the labour market because of factors that constitute a barrier to employment or re-employment.

Applications for exemption will be assessed by IBT on a case-by-case basis.

#### Supporting Evidence

Your application must be accompanied by appropriate documentation to support your documentation. Please contact IBT to discuss the type of supporting information you will need to submit with your application. Evidence may include, for example, a letter from Centrelink or your current or past employer.

In some exceptional circumstances, IBT may accept an Applicant's signed self-declaration.

#### Timeframe

Please allow sufficient time prior to course commencement to allow for assessment of your application for eligibility exemption.

#### Application

Please complete and send your application for exemption to:

Postal address: Innovative Business Training  
49 Morrah Street  
Parkville  
Melbourne  
VIC 3052

Or contact us to discuss

Telephone: (03) 9347 0252

Website: [www.ibtraining.com.au](http://www.ibtraining.com.au)

Innovative Business Training will contact you on receipt of your application to discuss further as required and/or upon assessment of your submitted application, prior to the commencement of the program you wish to enroll in.



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## Application for Exemption

### Personal Information (Please print clearly)

Title: ..... Given Name ..... Surname .....

Home Address .....

Suburb ..... State ..... Postcode .....

Mobile: ..... Email .....

Gender  Male  Female

Date of Birth ...../...../.....

I wish to be considered for as an exempt applicant for enrolment in Course .....

Course Code (refer website) .....

### Exemption Details

1. Please advise why you do not meet eligibility criteria AND why you are applying for exemption

Please be clear and concise

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3. Please advise what documentation you have attached to support your request for exemption, as detailed in question 2 above. Note: If you are unable to provide supporting documentation, you will need to complete a *Self-declaration form* – please refer to *IBT*.

**Applicant's Declaration**

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I \_\_\_\_\_ would like to participate in the training program specified in my application for exemption.

I acknowledge that:

- The information supplied regarding this application is **true and complete** to the best of my knowledge.
- The provision of incorrect information and/or the withholding of relevant information relating to my academic or employment records or citizenship status will result in Innovative Business Training's immediate decline of my exemption request application, or withdrawal from the program at any stage, should exemption have been granted.
- Relevant information may be released to government and non-government agencies or other third parties (e.g. Department of Education Employment and Workplace Relations (DEEWR); the Department of Immigration and Citizenship; Skills Victoria; Centrelink; and the Australian Taxation Office), for the purpose of confirming my identity, and to verify my entitlement to become an enrolled student and receive government support (if applicable).

I give permission for IBT

- To obtain further information with respect to my application from other organisations and through 'QualSearch' for the purpose of determining eligibility (e.g. Confirm study and results from previous or current study)
- To communicate with me by electronic means (e.g. Email)
- Provide information to government, educational, health and any other relevant institutions, in conjunction with my application for training.

**Applicant certification**

I have read and understood the above statements and accept its conditions

Signature ..... Date ...../...../.....