COURSE SUITABILITY DISCUSSION

PURPOSE & INSTRUCTIONS

To determine the suitability of a program of study for a candidate interested in enrolling in training with ABV Australian Business & Vocational Training (RTO 52592), the RTO is committed to ensuring that all students who enroll in training can make an informed choice regarding the suitability of the course.

The Training Alliance Group, a third-party provider acting on behalf of ABV RTO staff, will record the candidate's responses below, or the candidate may record their own responses to be reviewed with Training Alliance Group staff upon completion. All sections must be completed in full.

CANDIDATE NAME:

Course of interest (please tick)

☐ RII20720 Certificate II in Civil Construction
☐ RII30820 Certificate III in Civil Construction Plant Operations (Roller)
☐ RII30820 Certificate III in Civil Construction Plant Operations (Grader)
☐ CPCWHS1001 Prepare to work safely in construction industry
☐ BSBSS00102 Micro Business Skill Set
☐ CHC32015 Certificate III in Community Services
☐ CHC42021 Certificate IV in Community Services
☐ CHC41115 Certificate IV in Employment Services
☐ BSB30220 Certificate III in Entrepreneurship and New Business
☐ BSB40320 Certificate IV in Entrepreneurship and New Business

☐ Other (please list) _____

Please briefly explain why you are interested in studying this course:

What learning outcomes are you hoping to achieve if you complete this course?

Have you ever undertaken any formal or informal training in any field of study? ☐ Yes ☐ No
If you answered Yes above, please list the skills, knowledge, or experience you gained below.

Do you have any work experience in any field, or have you ever been involved in community activities such as volunteering or mentoring? ☐ Yes ☐ No
If you answered Yes above, please list the skills, knowledge, or experience you gained below.

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If you completed this course, what job outcomes or career opportunities would you hope to achieve?

_____

Please number the methods below in the order that you believe you achieve the best learning outcomes (1-4):

☐	Reading material e.g., books	☐	Visual material e.g., videos, images
☐	Listening e.g., speech, audio	☐	Practical experiences e.g., hands on activities

Please tick each point below to indicate that you have been fully informed about specific course requirements:

☐ Course entry requirements including information on funding (if applicable)
☐ Course expectations and attendance requirements including course duration, class times, and delivery mode
☐ Learning environment, location/s, and student participation and engagement
☐ Requirements for navigating the internet for self-study and research purpose
☐ Requirements for working with digital documents and managing files
☐ Ability to handle emotionally charged or sensitive situations
☐ Ability to remain calm and empathetic when working with distressed individuals
☐ RTO policies and procedures as outlined in the Student Handbook

Please tick each point below to indicate that you have been fully informed on the typical work environment and conditions that students of this course might encounter upon completion:

☐ Typical hours of work
☐ Industry expectations
☐ Type of workplace environment
☐ Specialised workwear or equipment

Are there any barriers that may prevent you from completing certain physical components of this course?

☐ Yes   ☐ No   ☐ N/A

If you answered Yes above, please briefly describe here. If you wish to disclose a disability, please request a disability form.

_____

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I believe that this course is suitable for my personal and career goals based on my judgement, knowledge, and existing skills and capabilities.	Candidate Signature:

Have any barriers or support requirements been identified?   □ Yes   □ No

If you answered Yes above, please describe options for rectification or support requirements.

Based on my interaction with this candidate, I believe that,

□ They have the interest, aptitude and abilities necessary to successfully undertake and complete this course

□ They have the interest in undertaking this course but may need additional support

□ This course is not currently suitable

Staff Member Name:

Signature:	Date of Review: