



## SUPPLEMENTARY SKILLS PROGRAM CLAIM FORM – EMPLOYERS

### EMPLOYER DETAILS

Business Name		
Address		
Suburb/Town	Post Code	ABN No.
Contact Person		Phone
Description of Business		

### COURSE DETAILS

Course	
Course Training Provider	
Course Commencement Date	Duration
Qualification Attained	
Cost Per Head \$	(as per attached receipt)

### CONSTRUCTION TRAINING FUND SUBSIDY

Construction Training Fund Subsidy Rate \$	Number of Participants
<b>Total Claimed \$</b>	<b>Plus GST (10%) \$</b>

**Nominate the building and construction sector in which you are primarily involved - Please Circle**

HOUSING      COMMERCIAL      ENGINEERING      MINING/RESOURCES      OTHER .....

I declare that the information detailed in this claim form and in the attached Course Participant Schedule form is a correct record of the training undertaken.

Name	Date
Signature	

BCITF subsidies will only be paid on successful completion of the course.

**Please check the following before sending your application.**

- Employers Claim Form (must be signed)**
- Course Participants Schedule (signed by each participant)**
- Copy of the Training Providers Paid invoice / receipt for the course fees**
- GST compliant Tax invoice FROM your company TO the Construction Training Fund – Subsidy rate PLUS GST**

**(Please contact the Fund to obtain the subsidy amount before sending in your claim)**

Post these documents to:

**Construction Training Fund  
PO BOX 746  
WEMBLEY WA 6913**

**TO BE COMPLETED IF EMPLOYER IS MAKING  
CONSTRUCTION TRAINING FUND CLAIM.**

**SUPPLEMENTARY SKILLS PROGRAM  
COURSE PARTICIPANTS SCHEDULE**



Course:		Course Date:			*Sector should be nominated as HO for Housing, CO for Commercial or EC for Engineering		
Name of Participant	Trade	* Residential Address	Suburb	Post Code	Contact Number	Sector	Signature of Participant
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							

*\*The residential address of course participants is required to enable the Fund to undertake satisfaction surveys of skills training courses which is an annual reporting requirement. The Fund does not maintain a database of individual course attendees nor does it retain any personal information on individual attendees who respond to satisfaction surveys*

- To be eligible for funding under the Supplementary Skills Program participants must be currently employed in the building and construction industry in Western Australia; or if unemployed be able to demonstrate that they were directly employed in the building and construction industry in Western Australia on a full time basis within the previous 3 months. **People employed in the resources sector are not eligible for subsidies under the Supplementary Skills Program.**

We confirm that the eligibility requirements for all course participants have been checked and meet the policy guidelines contained in the general conditions of the Construction Skills Schedule of Support, and they are eligible for the training subsidy.

Signed \_\_\_\_\_ Position \_\_\_\_\_ Company \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# WORK HISTORY



<b>CLAIMANT NAME:</b>	<b>CONTACT NUMBER:</b>
<b>EMPLOYER NAME (if applicable):</b>	<b>CONTACT NUMBER:</b>

*\* Work Done on-site during construction phase*

Project Owner Details	Project Location	Brief Job Description	*	Date
<i>Example Only:</i>				
<i>Joe Blogg's Homes - Tel: 9876 6532</i>	<i>123 Hay Street, Perth</i>	<i>Electrical wiring to new home</i>	<i>Y/N</i>	<i>February 2004</i>

**Note: Project Owner details and telephone contact details are required for each work history record. The Construction Training Fund reserves the right to the final determination of employer eligibility for subsidies under any of the Funds training programs.**