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Dear Student Name: _

In order to make an informed decision about your course, please see below the relevant information. Should you have any further questions, please contact one of our training advisors.

Course Code & Title	CHC33021 – Certificate III in Indi	vidual Support	(Ageing and Disab	ility)	
Qualification Status	Current Release Number	: 1 R	Release Date:	23/11/20	22
RTO	ASH Pty Ltd trading as Ashley Ins	stitute of Trainir	ng TOID	20749	
Entry Requirements	Funded students must meet fun Refer to Practical Placement Che			۷.	
Delivery Locations	□ Beenleigh □	Ipswich	Logan Ce	entral 🗆	North Lakes
Tick ONE option & Write Location if Other	□ Helensvale □	Laidley	□ Oth	ner	
Practical Placement	120 Hours of practical placement – Please refer to Practical Placement Check Fees Section				
Course Fees This qualification is delivered in	Private – Full Fee Paving \$4000.00 (Includes a non-refundable deposit of \$400.00)				
conjunction with funding from he QLD Government as part of the Certificate 3 Guarantee, & also Specific Cohort-targeted programs	Non-Concession Holders \$30.00				
Course Fees Payable by		Employer *			
Tick ONE option	*(If ticked, please ensure Employer Declaration is signed.)				
Payment Terms		.			
	Payment to be made within 7 da	iys of receiving i			
	Qualification Level Amount (\$) per unit				
Recognition of Prior Learning	Cert III level		\$250.00		
(RPL) & Reassessment Fees Table	Cert IV level		\$270.00		
	Diploma level \$300.00				
	See P-057.2 Training and Assessment Policy & Procedure for more information.				
Student Non-Tuition Fees	Administration fees (\$0.00) Reso	ource fees (\$0.0	0) Reprint of Cert,	/Award (\$85.00)	
Practical Placement Check Fees You must apply for these as part of your practica	Qualification Name	Police Clearance (V, W \$54.90)	Blue Card (V, W \$101.30 or \$153 incl NDIS)	NDIS Worker Screening Check (V, W\$138)	Vax Status (Up to Date)
placement componen: V=Volunteer (No-Fee) W=Workers (\$)	CHC33021 - Certificate III in Individual Support (Ageing and Disability)	Yes	Yes	Yes	Yes
	Please tick the option that appli	ies to you			
Course Funding Eligibility Info	This training	IS 🗆	IS NOT provi Fund	ded with State Go ing.	overnment
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F-048.2.23 Statement of Fees CHC33021 (Ageing and Disability)

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	Acknowledgement of	Enrolling in this course may impact your enginity for future futuring.			
Obligations	By ticking all the below, this confirms that you are fully informed and understand your fee				
		obligations as a student and that ASH have provided you with the information to make a choice			
		to proceed if you are eligible for funding.			
		15 Years or over (no longer attending school)			
		Queensland Residency			
		 Australian/New Zealand Citizens OR Australian Permanent Residence OR Temporary residence on the pathway to permanent residency 			
		 MUST NOT hold or be enrolled in a Certificate III or Higher qualification at the time of enrolment (Certificates completed while still at school are accepted - checks are completed to confirm) 			
Other Information		 I understand my fee obligations have been discussed and details provided on this Statement of Fees 			
		 I have been provided access to the Student Information Guide which details all support services available to the students 			
		 I confirm that my signature and date below confirm the date that I was provided with this information 			
	Other Information	Ashley Institute of Training does not subcontract or use third party providers for the delivery, training or assessment of this course.			
	The student tuition fees are indicative only and are subject to change given individual circumstances at enrolment.				
		For detailed information on course fees and how they are handled (e.g., refunds, payment options and cooling off periods), please see P-033.2 Fees Charges and Refunds Policy and Procedure which can be accessed via the RTO Website.			

Student Name:	Date:	
Signature:		

Employer Declaration – This declaration is to be filled out if the employer is paying the Course Fees on behalf of the student.

- □ I understand my fee obligations as per the P-033.2 Fees Charges and Refunds Policy & Procedure on the RTO website.
- □ I understand that if the employment status of the student changes I must notify the RTO.

For Employers

□ I confirm I have read and understood the D-005.2 Employer Information Guide.

Employer Name:	Employer Position:	
Signature:	Date:	

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