

Co-Provider Application Form

If you held a contract to deliver under another RTO, please provide details as to why you are leaving the RTO or why your contract was cancelled.

Units or qualifications you wish to deliver under this agreement.

Qualification/Unit	✓	Qualification/Unit	✓
SIT20322- Certificate II in Hospitality		HLT21020 Certificate II in Medical Service First Response	
HLT31220- Certificate III in Basic Health Care		HLT31120 Certificate III in Non-Emergency Patient Transport	
RII30719- Certificate III in Emergency Response and Rescue		ICT30419 Certificate III in Telecommunications Network Build and Operation	
BSB41419 Certificate IV in Work Health and Safety		CPP20319-Certificate II in Technical Security	
HLTAID009 Provide CPR		HLTINF006 Apply basic principles and practices of infection prevention and control	
HLTAID010 Provide basic emergency life support		HLTINFCOV001 Comply with infection prevention and control policies and procedures	
HLTAID011 Provide First Aid		UETDRMP007 Perform rescue from a live low voltage panel	
HLTAID012 Provide an Emergency First Aid Response in an Education and Care Setting		UETDRMP010 Provide first aid in an ESI environment	
HLTAID013 Provide first aid in remote situations		UEECD0007 Apply work health and safety regulations, codes, and practices in the workplace	
HLTAID014 Provide Advanced First Aid		UEERL0001 Attach cords and plugs to electrical equipment for connection to a single phase 230 Volt supply	
HLTAID015 Provide advanced resuscitation		UEERL0003 Conduct in-service safety testing of electrical cord connected equipment and cord assemblies	
HLTAID016 Manage first aid services and resources		TLID0020 Shift materials safely using manual handling methods	
BSBMED301 Interpret and apply medical terminology appropriately		SITHFAB021 Provide responsible service of alcohol	
CPCWHS1001 Prepare to work safely in the construction industry		SITHFAB024 Prepare and serve non-alcoholic drinks	
CPCWHS2001 Apply WHS requirements, policies, and procedures in the construction industry		SITHFAB025 Prepare and serve espresso coffee	
CPPFES2005 Demonstrate first attack firefighting equipment		SITXFSA005 Use hygienic practices for food safety	
TLID0020 Shift materials safely using manual handling methods		SITXFSA006 Participate in safe food handling practices	
MSMPER200 Work in accordance with an issued permit		PUAFER005 Operate as part of an emergency control organisation	
MSMPER202 Observe permit work		PUAFER006 Lead an emergency control organisation	
MSMPER300 Issue work permits		PUAFIR207 Operate breathing apparatus open circuit	
MSMWHS201 Conduct hazard analysis		PUAFIR210 Prevent injury	
MSMWHS217 Gas test atmospheres		PUASAR022 Participate in a rescue operation	
PUAEME008 Provide pain management		RIIRIS201E Conduct local risk control	
RIIWH204E Work safely at heights		RIIWH202E Enter and work in confined spaces	
ICTCBL246 Install, maintain, and modify customer premises communications cabling: ACMA Restricted Rule*		ICTWHS204 Follow work health and safety and environmental policy and procedures	
ICTCBL247 Install maintain and modify customer premises communications cabling: ACMA Open Rule*		ICTCBL301 Install, terminate, and certify structured cabling installation	
ICTTEN208 Use electrical skills when working with telecommunications networks		ICTCBL322 Install, test and terminate optical fibre cable on customer premises	
ICTTEN202 Use hand and power tools		ICTCBL303 Install and terminate coaxial cable	



Co-Provider Application Form

Please enter the names and details of the trainers facilitating on behalf of your organisation.
Each trainer must also submit a Trainer Approval form.

First Name	Last Name	Mobile	Email

The principle or nominated representative of the co-provider organisation must have the following (Any item not currently held will need to be obtained prior to final approval)

Item	✓	Item	✓
Employment Working with Children Check		TAE40116 Qualification and transcript or equivalent	
National Police Check		Current CV (must show your vocational experience in your area of teaching)	
Equipment to deliver the requested units #		ABN	
Public/Product Liability Insurance (\$10 million for most units, \$20Million for high risk units)*		Professional Indemnity Insurance (\$5 Million)*	

Please contact us for the minimum equipment list for the unit being delivered.

Declaration

I, _____ being the authorised representative of _____ do confirm that the information being submitted in this application is, to the best of my knowledge, true and correct.

I agree to abide by the policies and procedures set out in the Co-Provider agreement.

Applicant:

Witness

Printed name: _____

Printed Name: _____

Signed:

Signed:

Date: ___/___/___

Date: ___/___/___

