



ORIC training

APPLICATION FORM

Please complete and fax to (02) 6281 2739

WORKSHOP

Please identify which workshop (date and location) you are applying for:

PERSONAL INFORMATION

Name: _____
(Mr, Mrs, Ms, etc) (First name) (Last name)

Postal address: _____

Town/suburb/community: _____ Postcode: _____

Telephone (work): _____ Telephone (home): _____

Mobile: _____ Fax: _____

Email: _____

Date of birth: _____

- I am Aboriginal I am Torres Strait Islander
 I am both Aboriginal and Torres Strait Islander I am neither Aboriginal or Torres Strait Islander

I speak English as my first language yes no

If **no**, what is your first language? _____

Employment status:

- full time part time unemployed student pensioner

Level of schooling completed:

- primary year 7-9 year 9-10 year 10-12

Post-secondary qualifications:

- certificate diploma degree

CORPORATION INFORMATION

Name of your corporation: _____

What is your position in your corporation?

director secretary staff (please specify e.g. CEO) _____
 contact person other (please specify) _____

I have been a director for _____ years and _____ months.

What are the objectives of your corporation, and/or what are the services you deliver?
(e.g. health, education, welfare)

TRAVEL AND ACCOMMODATION

Do you need help with travel to and from the workshop? yes no

If you are driving and seeking travel assistance please attach copies of your:

- drivers licence
- car registration
- car insurance

Do you need accommodation during the workshop? yes no

Do you have a disability or health concerns?
(e.g. dietary requirement, mobility issues, etc) yes no

If **yes** what do you need to make your stay more comfortable?

Please note: ORIC does not pay travel allowance or sitting fees.

REASONS FOR APPLICATION

Please select the reasons for your application from the list below.

- I want to learn more about stores corporate governance.
- I want to be better at representing my community store.
- I want to understand the roles and responsibilities of a store committee.
- I want to learn more about the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*.
- I want to learn more about meetings and agenda items.
- I want to learn more about conflict management and risk assessment.



JOINT LEARNING AGREEMENT

Please complete and fax to (02) 6281 2739

This agreement is between _____ (write your name)
 and the Office of the Registrar of Indigenous Corporations (ORIC).

I agree to:

- attend all the sessions of the training workshop, by being there for the whole day on all training days
- fully participate in the workshop in a professional manner
- inform the ORIC training team if I cannot attend a session due to ill health/other reasons
- cooperate fully in all travel and accommodation arrangements.

ORIC agrees to do all that is possible to provide:

- a positive learning environment
- high quality training
- relevant course materials, readings and resources
- participant support for travel, accommodation and meals.

DECLARATION

I have read the agreement and will fulfil the obligations to the best of my ability.

I understand that a statement of attendance will only be given to people who attend all sessions, every day.

I understand that to qualify for the ORIC funded Certificate IV and Diploma courses I need a statement of attendance from this workshop.

If I don't observe this agreement I may be asked to leave the workshop. If this happens my corporation will have to pay for my travel and accommodation costs.

Course participant

ORIC trainer

Signed: _____

Signed: _____

Date: _____

Date: _____

CORPORATION ENDORSEMENT (for staff applications only)

I, _____ (write name of CEO or director) endorse the nomination of this participant in ORIC's training workshop. I will support the participant to complete the workshop and follow this joint learning agreement.

CEO or director

Signed: _____

Date: _____