Migration Skills Assessment Application Form
Document publishing date (July 2015)
Important Information
This version of the TRA Migration Skills Assessment Application is unable to be completed electronically and should be printed and completed by hand.

## **Migration Skills Assessment Application Form**

#### What can I apply for using this form?

Use this form to apply for a **TRA Migration Skills Assessment** of your qualifications and employment to determine whether you have the skills and experience required for a skilled worker in your nominated occupation in Australia.

The TRA Migration Skills Assessment Applicant Guidelines (Guidelines) provide information about the eligibility requirements and process of applying for a TRA Migration Skills Assessment. These Guidelines are available on the TRA website (http://tradesrecognitionaustralia.gov.au). It is strongly recommended that you read the Guidelines before completing this form. A document checklist is also available on the TRA website.

Please answer all questions and tick the relevant boxes.

Fields marked with a # must be completed.

Leaving a question blank may delay the processing of your application or result in an unsuccessful outcome..

#### PART 1 - ABOUT YOUR APPLICATION

Have you previously applied to Trades Recognition Australia? <b>★</b>	☐ Yes, please write your TRA Reference number ☐ No below			
	TRA Reference Number			
INFORMATION ABOUT YOUR NO	MINATED OCCUPATION			
What occupation are you seeking a migration assessment for? *	Title:  ANZSCO Code:  For more information about skilled occupations refer to Skilled Occupation List (SOL) or Consolidated Sponsored Occupation List (CSOL) on the Department of Immigration and Border Protection website.			
INFORMATION ABOUT YOUR PAS	SSPORT AND AUSTRALIAN VISA			
Passport Number *				
Country of Passport Issue *				
What visa-sub-class are you intending to apply for? *				
Do you have a current Australian visa? *	□ Yes □ No			
If yes, what is your Australian Visa				

# Part 2- YOUR PERSONAL DETAILS

First Name	*				
Middle Name					
Family Name	*				
Date of Birth	*	Day	Month		Year
Gender		□ Male		□ Fema	le
Home/Resider	ntial Address *				
City/Suburb	*				
State *				Postco de	
Country	*				
Do you want y different addres Address)?*	our mail sent to a ess (Postal	□ Yes		□No	
Enter your pos if different to y for example a	our home address				
City/Suburb	*				
State *				Postco de	
Country	*				
Telephone Nu	mber				
Mobile Number	r				
EMAIL NOTIF	ICATION				
Please enter y here *	our Email Address				

# Part 3 – INFORMATION ABOUT YOUR AGENT OR REPRESENTATIVE

Do you authorise an agent or	☐ Yes	□ No
representative to act on your behalf?		
Name of your agent/representative		
Business/organisation (if applicable)		
Agent/representative's address		
City/Suburb		
State		Postco de
Country		
Telephone number		
Mobile number		
PLEASE NOTE: All correspondence	will go to your Agent or Re	presentative.
EMAIL NOTIFICATION		
If you nominated an agent, would you like your agent or representative to receive your TRA correspondence by email?	□ Yes	□ No
Please enter your agent or representative's email address here		

# Part 4 – YOUR RELEVANT VOCATIONAL QUALIFICATION DETAILS

How many years of <b>general education</b> have you completed? *						
Have you completed a period of vocational training? *	☐ Yes			□ No		
If yes, was the training part time or full time?	□ Part	Time	□ Full T	ime	Average Week	Hours Per
If yes, was the training part of an apprenticeship?	□ Yes			□ No		
Date Training Started	Day		Month		Year	
Date Training Finished	Day		Month		Year	
Qualification(s) Obtained * (Name on certificate)						
Name of training institution * (Name on certificate)						
Name of authority that issued the qualification * (If not the training institution)						
Institution address *						
City/Suburb *						
State				Postcod	е	
Country *						
Telephone number						
Institution website *						
Have you completed any other relevant vocational training? *	☐ Yes			□ No, g	o to part 5	
If yes, was the training part time or full time?	□ Part	Time	☐ Full T	ime	Average Week	Hours Per
If yes, was the training part of an apprenticeship?	□ Yes			□ No		
Date training started	Day		Month		Year	
Date training finished	Day		Month		Year	

Qualification(s) obtained	
Name of training institute	
Institute \address	
City/Suburb	
Country	Postcode
Telephone number	
Institution website	
	ICENCES2
Part 5 – DO YOU HAVE ANY OCCUPATIONAL L	ICENSES!
	No
Have you been issued with an ☐ Yes occupational licence for your	
Have you been issued with an	
Have you been issued with an	
Have you been issued with an coccupational licence for your nominated occupation? *  Licence obtained	
Have you been issued with an coccupational licence for your nominated occupation? *  Licence obtained  Name of licensing organisation	
Have you been issued with an coccupational licence for your nominated occupation? *  Licence obtained  Name of licensing organisation	
Have you been issued with an occupational licence for your nominated occupation?  Licence obtained  Name of licensing organisation  Organisation address	
Have you been issued with an occupational licence for your nominated occupation?  Licence obtained  Name of licensing organisation  Organisation address  City/Suburb	] No

### Part 6 – YOUR EMPLOYMENT AT THE REQUIRED SKILLS LEVEL

#### **Details of relevant employers**

IMPORTANT Note: You must provide an employment statement for all periods of employment claimed in this application form. Refer to Section 2.8 of the TRA Migration Skills Assessment Applicant Guidelines for documentary evidence requirements for all employment claims.

At what age did you start your employment in your nominated occupation? *						
Most recent employer's company name *						
Employer's address *						
City/Suburb						
Country			Р	ostcode		
Telephone number						
Your occupation with this employer*						
Date employment started /finished*	Month	Year	/ Mo	nth	Year	
Second employer company name						
Employer's address *						
City/Suburb						
State			Pos	tcode		
			F 03	icode		
Country						
Telephone number						
Your occupation with this employer*						
Date employment started /finished*	Month	Year	/ Mo	nth	Year	

	P	ostcode	
Month	Year /	Month	Year
		Employed	Employed to
employer	<u></u>	from	Limployed to
	Month		
	Year		
Occupation wire	h	Employed from	Employed to
	Month		
	Year		
Occupation wi	:h	Employed from	Employed to
	Month		
	Year		
	Occupation witemployer  Occupation witemployer  Occupation witemployer  Occupation witemployer	Month  Year  ANT EMPLOYMENT  Occupation with employer  Month Year  Occupation with employer  Month Year  Occupation with employer  Month Year  Occupation with employer  Month Month	ANT EMPLOYMENT  Occupation with employer  Employed from  Month Year  Occupation with employer  Employed from

### PART 8 – DESCRIPTION OF YOUR WORK

In your own words describe the work you have done over the past three years as a skilled worker in your nominated occupation, explaining:

- duties or tasks you have undertaken
- how often did you do each task/duty (e.g. daily, weekly, monthly);
- what types of machines, equipment, tools, instruments and materials you have used and the frequency with which you use them;
- details of any supervisory responsibility you have had;
- whether you were self-employed or employed by an organisation.

If the	space	provided	is not	sufficient	please	attach	additional	pages.
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YOUR ORIGINAL SIGNATURE AND THAT OF YOUR AGENT/REPRESENTATIVE (where applicable) IS REQUIRED IN PART 10 PRIVACY CONSENT AND DECLARATION

#### **PART 9 – PRIVACY STATEMENT**

All personal information collected by Trades Recognition Australia (TRA) is protected by the Privacy Act 1988 (Privacy Act). Schedule 1 of the Privacy Act contains the Australian Privacy Principles (APPs), which prescribe the rules for handling personal information.

The Privacy Act defines 'personal information' as:

'information or an opinion about an identified individual, or an individual who is reasonably identifiable:

- (a) Whether the information or opinion is true or not; and
- (b) Whether the information or opinion is recorded in a material form or not'

#### **Privacy information**

Under the APPs, the Department of Education and Training (Department) is required to have a clearly expressed and up to date policy about the way the Department manages personal information. This policy contains information about how you may access the personal information the Department holds about you, and how you may correct any inaccuracies in that information. We will correct your personal information if it is inaccurate (subject to restrictions on such access/alteration of records under the applicable provisions of any law of the Commonwealth).

It also includes information as to how you may make a complaint about a breach of the APPs, and how the Department will respond to such a complaint.

A copy of the Department's privacy policy is available on the Department's website at: <a href="https://education.gov.au/privacy-policy">https://education.gov.au/privacy-policy</a>

More information about the Privacy Act, including a copy of the full text of the APPs, can be obtained from the Office of the Australian Information Commissioner's website at: www.oaic.gov.au

#### Collection

TRA collects personal information from applicants for the purposes of:

- Processing applications, verifying evidence provided with applications, and assessing whether an applicant has suitable skills in a nominated occupation;
- Confirming authorisation by an applicant of his or her representative or migration agent, and to provide contact details for that representative or migration agent;
- Allowing you to make a payment of fees to TRA so you can lodge an application;
- Allowing TRA to confirm payment and processing refunds as applicable.
- Conducting investigations and ensuring compliance with relevant laws, awards or standards; and
- Ensuring compliance with the Commonwealth Fraud Control Guidelines (2011).

Personal information collected by the Department will only be used for the purposes outlined above. If TRA is not able to collect your personal information, your application will not be able to proceed.

In the course of assessing your application, TRA may receive unsolicited personal information about you from a third party. If TRA would normally have been able to collect that information or it forms a part of a Commonwealth record, it will be treated in accordance with the APPs. If not, TRA will destroy or de-identify that information.

#### **Disclosure**

TRA may give some or all of the information it collects from applicants or third parties to the Department of Immigration and Border Protection, the Migration Review Tribunal, the Australian Federal Police, your employer/s, your supervisor/s, your nominated agent or representative, the organisations that issued your qualifications, TRA approved registered training organisations, agencies providing advice to TRA on qualifications such as UK NARIC, organisations or individuals providing in-country verification services, the Australian Skills Quality Authority, the Reserve Bank of Australia, your banking institution, contractors, the Fair Work Ombudsman and other Australian and state/territory government agencies.

TRA may disclose your personal information to these entities for the reasons that are listed above in the collection section.

As part of the application process, TRA may be required to disclose your personal information to an overseas recipient to verify information in your employment and training claims. Typically, this personal information will be your name and date of birth. These overseas recipients are likely to be located in the country or countries from which you are making your employment or training claims.

Personal information collected by TRA will not be disclosed to any other third parties without your consent, except where authorised or required by law.

#### **Complaints**

Please note, applicants are responsible for ensuring the accuracy and validity of all information provided to TRA.

Complaints about breaches of privacy should be referred to:

Privacy Contact Officer
Legal and Compliance Group
Department of Education and Training
GPO Box 9880
CANBERRA ACT 2601
AUSTRALIA

Email: privacy@Education.gov.au

#### PART 10 - PRIVACY CONSENT AND DECLARATION

Please sign below to confirm you agree with the statements listed.

I hereby acknowledge that I have been provided with a Trades Recognition Australia (TRA), Australian Privacy Principle 5 Notice by the Department of Education and Training. I understand that by providing my consent in this form, I am acknowledging that I have read and understood the contents of this Notice.

#### Collection

I understand that by providing my consent in this form, I am authorising TRA to collect my personal information for the purposes of:

- Processing applications, verifying evidence provided with applications, and assessing whether an applicant has suitable skills in a nominated occupation;
- Confirming authorisation by an applicant of his or her representative or migration agent, and to provide contact details for that representative or migration agent;
- Allowing you to make a payment of fees to TRA so you can lodge an application;
- Allowing TRA to confirm payment and process refunds as applicable,
- Conducting investigations and ensuring compliance with relevant laws, awards or standards; and
- Ensuring compliance with the Commonwealth Fraud Control Guidelines (2011).

I consent to TRA collecting my personal information for these purposes. I understand that if I do not give my consent to TRA collecting my personal information, my application will not be able to proceed.

I understand that TRA may collect unsolicited personal information about me from third parties. I consent to TRA collecting unsolicited personal information from third parties where TRA is authorised by law to do so.

#### **Disclosure**

I understand that by providing my consent in this form, I am authorising TRA to disclose my personal information to any of the entities listed in the APP 5 notice, for any of the purposes listed above. I understand that TRA may disclose my personal information to overseas recipients, for the purposes of verifying my employment, training information and processing refunds. I consent to my personal information being disclosed by TRA to overseas recipients for this purpose. I understand that by providing my consent to disclose my personal information to the overseas recipients for this purpose, APP 8.1 will not apply.

#### **Declaration**

APPLICANT SIGNATURE

I confirm that information supplied on this application form and in support of claims made on this application form is true and correct.

I understand that giving false or misleading information is a serious offence

If an agent or representative has assisted me, I declare I have not provided false or misleading information to the agent or representative for the preparation of this application.

DATE (DD/MM/YY)

If an agent or representative has assisted in the representative must complete the declaration by	e preparation of your application your agent or pelow. Agent/Representative, please sign below to
confirm you agree with the statements listed.	
I prepared the application in accordance with the ir	nformation supplied by the applicant;
I understand that giving false or misleading information	ation is a serious offence;
I am authorised by the applicant to give the information	ation in this application to TRA.
AGENT/	
REPRESENTATIVE SIGNATURE	DATE (DD/MM/YY)

# PLEASE ATTACH THIS PAGE TO THE FRONT OF YOUR APPLICATION

APPLICANT DET	AILS		
Name		Date of Birth	
TRA Reference number		Agent	
PAYMENT FOR Y	OUR APPLICATION		
Amount Paid			
How are you paying for you application fee?	ur □ Visa	☐ Master	Card
	Visa or MasterCard, please contact TRA on form until we have advised you how to		payments methods.
For further information regardulations.	arding the fees, refer to the TRA Migration	on Skills Assessr	nent Applicant
<b>DECLARATION A</b>	AND PRIVACY STATEMEN	т	
Have you (and your agen Privacy Statement in Par	nt/representative, if applicable) signed t 10 of your application?	the Declaration	and Pes
IMPORTANT Note: If you may return your applicat	u and your agent/representative have i ion to you not assessed.	not signed your	application TRA

#### ATTACH PAYMENT RECEIPT HERE

# PAYING FOR YOUR MIGRATION SKILLS ASSESSMENT

Fees and Charges	The fee for this service is:	AUD \$ 1	•	the fees pursuant 15.01 of the A Ne (Goods and Servi Regulations 1999	w Tax System ces Tax) .)	
Pay Online	Application fees are paid by Visa or MasterCard using TRA's Online					
	Portal. When you are ready to pay, access the Online Portal at:					
	https://extranet.deewr.gov.au/trades/Interface/Pages/Security/Logon.aspx Signing in					
	You will need a username and password to sign in and make a payment. If you do not already have a username and password, register for an account by selecting					
	the relevant service under the Register section and follow the on screen					
	instructions. After registering, a username and password will be provided to you.					
	Making your payment					
	Enter your username and password to sign in. Follow the on screen instructions					
	Important information					
	<ul> <li>△ Payments by Visa or MasterCard are processed in Australian Dollars (AUD) only. You may incur banking and currency conversion fees. Transactions use encrypted security through the Government EasyPay service operated by the Reserve Bank of Australia. TRA does not have access to and will never store your full card details.</li> <li>△ After signing in to the Online Portal, make sure you select the correct service so that you pay the correct amount.</li> </ul>					
Print and attach a copy of your payment receipt to this application form.						
Can't print or lost your payment receipt?	Your payment receipt should be printed and attached to this form before submitting the form to TRA. If you cannot print your payment receipt or have lost it, please print a copy of your receipt sent to the email address linked to your account when payment is made.  If you still cannot provide a copy of your receipt, complete as much information as you can below. If TRA is unable to find your payment using these and other details on this form, you may be required to provide additional proof of payment, such as a bank statement. TRA will contact you by email if additional proof is needed.  Customer  Reference  Number					
	Date and Estimated Time of Payment		Last Four Digits or Card Used		Do <b>NOT</b> provide the full card number	

Need help	? Please contact us for further assistance with making payments.				
		Online <sub>.</sub>	Refunds		
		www.tradesrecognitionaustralia.gov.au/	The TRA Refund		
		Email trafinance@education.gov.au	Policy is available from		
			the TRA website.		
	)	<b>Phone</b> +61 2 6240 8778 (outside Australia)	Migration agents		
		, ,	paying on behalf of an		
		Phone 1300 360 992 (within Australia)	applicant are strongly advised to review this policy		
			before making a payment.		