APPLICATION FOR APPROVAL OF CPD ELECTIVE ACTIVITY

Training providers are **required** to provide a completed and signed copy of this form along with training material for assessment.

**Please complete ALL sections**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| DETAILS OF TRAINING PROVIDER | | | | | | |
| Individual/Company name  (please provide ACN for company) | |  | | | | |
| Contact person’s name and phone number | |  | | | | |
| Email address | |  | | | | |
| Website address | |  | | | | |
| Are you a Registered Training Organisation (RTO)? | | Yes ⮷  Registration number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | No |
| **CPD ELECTIVE LEARNING CATEGORIES** (please tick the relevant learning category) | | | | | | |
| **Elective learning category and Description** | **Delivered by** | | | **Allocation of CPD points spent on activity** | **Required evidence of attendance** | |
| **1.**  A training activity aligned with a National Training Package (other than a qualification or part of a qualification) prescribed for the grant of a licence/registration). | * a Registered Training Organisation (RTO). | | | One CPD point per hour (to a maximum of seven per activity). | Statement of Attainment issued by the RTO. | |
| **2.**  A training activity tailored to the real estate industry. | * a RTO; * a professional (i.e. lawyer, accountant) engaged by a RTO to conduct the training; * a recognised industry association approved by the Commissioner; * a government or regulatory body; or * a firm of legal practitioners. | | | One CPD point per hour (to a maximum of seven per activity). | * Certificate of Attendance, or * a Record of Completion (if an assessable component is included). | |
| **4.**  A training activity tailored to the real estate industry delivered by entity other than those in Categories 1 and 2 above. | * in‑house agency training; * seminars and distance learning; and/or * videos, DVDs, multi-media training and/or online learning. | | | One half of one CPD point per hour (to a maximum of three per activity).  Metropolitan and regional participants can claim up to a maximum of three CPD points per year from this category.  Remote participants can claim up to a maximum of six CPD points per year from this category. | * Certificate of attendance,   or   * email confirmation of completion from the training provider. | |
|  |  | | |  |  | |
| DETAILS OF CPD ACTIVITY | | | | | | |
| Title of Course / Activity | | |  | | | |
| **Qualification Code or Unit of Competency Code (if applicable)** | | |  | | | |
| Date/s activity will be offered | | | Session date / Commencement from: | | | |
| Duration of activity in hours  (excluding breaks) | | |  | | | |
| Mode of delivery | | | Face to Face:  Online:  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| The purpose of the CPD programme is to increase levels of consumer protection, increase public confidence and raise industry standards. Therefore, the content of the course should be focused on increasing the agents' / sales representatives' knowledge of:   * relevant legislation (e.g. *Real Estate and Business Agents Act 1978*, Australian Consumer Law, *Fair Trading Act 2010*, *Residential Tenancies Act 1987*, etc.); * avoiding, minimising and/or managing risk (e.g. fraud, employee dishonesty, audit qualifications); * industry best practice (e.g. trust accounting; identity verification; conflict of interests); * complaint resolution (e.g. internal practices; service standards); and/or * business environments that are productive, innovative, fair and safe. | | | | | | |
| Brief Activity description | | |  | | | |
| Please describe below how the course meets **at least one** of the Objectives of the CPD Programme.  [Not all Objectives need to be met by each course.] | | | | | | |
| OBJECTIVE | | | **HOW PROPOSED COURSE MEETS OBJECTIVE** | | | |
| Relevant legislation (e.g. *Real Estate and Business Agents Act 1978*, Australian Consumer Law, *Fair Trading Act 2010*, *Residential Tenancies Act 1987*, etc.) | | |  | | | |
| Avoiding, minimising and/or managing risk (e.g. fraud, employee dishonesty, audit qualifications). | | |  | | | |
| Industry best practice (e.g. trust accounting; identity verification; conflict of interests). | | |  | | | |
| Complaint resolution (e.g. internal practices; service standards). | | |  | | | |
| Business environments that are productive, innovative, fair and safe. | | |  | | | |
| **Please provide, with your application, a detailed agenda of the course.** | | | | | | |

If this course application is approved:

I/We (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(name of company director or authorised representative)

agree to

* log attendees’ participation onto the Department’s CPD Online System within 14 days after the course has been delivered;
* issue participants with evidence of their participation containing the following details: course title, CPD approval number, participants’ name, surname and registration/licence number and the date the course was completed; and
* obtain approval from the Commissioner for Consumer Protection before altering the structure, content, title or time of the course.

Signature/s \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_