



PO Box 390  
 SEVEN HILLS NSW 1730  
 t: 9620 9172  
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 ABN: 54960560044

## FACILITATOR/TRAINER INFORMATION FORM FOR INCLUSION ON OUR ELIGIBILITY LIST.

LEAD usually schedules our Professional Development and Training events in advance in 6 monthly cycles. Generally, our facilitators and trainers are drawn from our regularly updated Eligibility List. It is helpful to have current contact details / information for all trainers on file as this allows us to include the sessions you offer for consideration in planning and to contact you quickly if work opportunities arise. If you are being considered for inclusion in our training calendar we will contact you to discuss this further.

If your details have changes since you originally completed this form, please advise us so we can update the information we have.

<b>Title</b>	<b>Facilitator/Trainer Name</b>
<b>ABN</b>	
<b>Business Name</b> (if applicable)	
<b>Parent Agency</b> (if applicable)	
<b>Contact Phone</b>	
<b>Mobile</b>	
<b>Email</b>	
<b>Biography</b> (This information will appear on our LEAD website and promotional material. Please advise us if you DO NOT want this to happen.)	
<b>Please list training topics / workshops you can deliver</b> (Please include details of training specifically relevant to Aboriginal or Culturally Diverse issues and/or training participants)	



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What insurance cover	Type of Insurance	Provider/Policy Number	Amount
Do you hold?	<input type="checkbox"/> Public Liability		
	<input type="checkbox"/> Professional Indemnity		
	<input type="checkbox"/> Accident/Work Cover		
Have you completed Cert IV in Assessment & Workplace Training	<input type="checkbox"/> No <input type="checkbox"/> Yes : Year Completed: _____ Provider Name: _____		
Please briefly detail your previous experience and/or qualifications relevant to the training you provide.  (Please also provide us with an electronic copy of your current CV)			
If you would like your photo on our flyers / website, provide us with a jpeg file.	<input type="checkbox"/> No <input type="checkbox"/> Yes, jpeg attached		
References: Please provide contact details of 2 referees who can comment on training you have delivered in the past 12 months.	1.  2.		
Any other relevant information you would like to provide?			

**Important Note: LEAD acknowledges the value of cultural knowledge and experience; this will be equally considered in all eligibility list applications.**

For more information and resources please visit [www.leadpda.com.au](http://www.leadpda.com.au)