

## Application for Course Endorsement

<b>SECTION 1: Applicant Details</b>			
<b>Legal Name of Applicant:</b>			
<b>Trading Name:</b>		<b>ABN:</b>	
<b>Organisation name to appear on Endorsement Certificate:</b>			
<b>Chief Executive /Legal Signatory Name:</b>		<b>Job Title:</b>	
<b>Name of person responsible for application: (if not same as above)</b>		<b>Job Title:</b>	
<b>Head Office Address:</b>			
	<b>State:</b>		<b>Post Code:</b>
<b>Telephone of person responsible for this application:</b>			<b>Mobile:</b>
<b>Email address of person responsible for this application:</b>			
<b>Main Website URL:</b>			
<b>Is your organisation an RTO?</b>	<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>	<i>If yes, please complete fields below.</i>
<b>RTO Code:</b>			
<b>TEQSA Registration Number (for Higher Education Providers):</b>			<b>CRICOS Number (if applicable)</b>
<b>Initial registration date:</b>			<b>Registration end date:</b>
<b>Is your organisation a non-registered training provider (third-party arrangement) applying for the endorsement of a VET qualification?</b>	<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>	<i>If yes, please complete fields below and refer to <b>Section 4</b>.</i>
<b>Name of the RTO issuing the qualifications and statements of attainment:</b>			
<b>Code of the RTO issuing the qualifications and statements of attainment:</b>			
<b>Does your organisation have a written agreement with the RTO issuing the qualifications and statements of attainment (as required by Clause 2.3 of the Standards for RTOs 2015)?</b>	<b>YES</b> <input type="checkbox"/>		<b>NO</b> <input type="checkbox"/>
<b>Does your organisation cooperate with ASQA and provide accurate responses to requests about delivery of services?</b>	<b>YES</b> <input type="checkbox"/>		<b>NO</b> <input type="checkbox"/>
<b>Do you require AIPM to sign a Confidentiality Agreement?</b> If yes, please forward your Confidentiality Agreement to AIPM with your Application for Course Endorsement.	<b>YES</b> <input type="checkbox"/>		<b>NO</b> <input type="checkbox"/>

## SECTION 2: Agreement

By signing this form you acknowledged that, as the delegated representative of the organisation, you:

1. Have read, understood and agree to comply with AIPM's Guide to Endorsement.
2. Understand that AIPM reserves the right to withdraw or suspend endorsed course status when a course provider's conduct is reasonably likely to negatively impact the reputation of AIPM or the endorsed course program.
3. Will notify AIPM of any significant changes to the content, course materials, assessment or course title during the period of endorsement.
4. Will maintain the reputation and integrity of the Endorsed Course Program by ensuring that course/s quality is maintained to the highest standard during the period of endorsement.
5. Declare that the organisation has the capability to deliver the course as described in this application.
6. Declare that the course/s submitted for endorsement will be presented by qualified facilitators with relevant PM experience, PM qualifications and appropriate academic educational qualifications
7. Will promote the AIPM by providing AIPM marketing material to students at the commencement or during the course (*AIPM will provide these materials*).
8. Will ensure that trainers and facilitators are aware of AIPM Certification and are able to confidently answer students' questions about AIPM Certification, AIPM membership and the AIPM.
9. Declare that the organisation currently meets all the requirements of the Standards for RTOs 2015 and has met the requirements of the Standards for all Australian Qualifications Framework AQF certification documentation (for registered vocational education and training providers delivering these courses); and/or the Higher Education Standards Framework (for institutions delivering higher education qualifications).
10. Declare that the non-registered training provider (third-party arrangement) applying for the endorsement of a VET qualification has a written agreement with the RTO issuing the qualifications and statements of attainment, cooperates with ASQA and provides accurate responses to requests about delivery of services as required by the Standards for RTOs 2015.
11. Will ensure that prior to enrolment or commencement, the RTO informs learners about any third parties who are involved in the training, assessment and/or related services. Learners must also be provided with the contact details of the third party (Clause 5.2 of the Standards for RTOs 2015).
12. Will provide AIPM with evidence of course quality such as student satisfaction throughout the period of endorsement.
13. Will provide any additional information reasonably necessary for the Endorsed Course assessor or AIPM to be assured that the course is of a suitably high standard for AIPM endorsement.
14. Understand that the course endorsement remains valid for three (3) years at which time the training provider must apply for Re-endorsement to maintain the Endorsed Course status.

**Signature of Delegated Representative:**

**Position:**

**Date of Application:**

**National Office**

Level 9, 139 Macquarie Street, Sydney NSW 2000 ABN 49 001 443 303  
p. (02) 8288 8700 f. (02) 8288 8711 e. info@aipm.com.au w. www.aipm.com.au



### SECTION 3: Course #1 Details

*If application is for more than one course please copy this page and lodge for each course*

<b>Full Name of Course:</b> <i>(Will appear on AIPM website – please include course code)</i>		<b>Previously endorsed by AIPM?</b>	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
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<b>URL to course details on applicant website:</b> <i>(Not Homepage -URL for page where AIPM logo will appear)</i>				
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<b>Name and Job Title of Course Contact:</b>		<b>AIPM Membership Number:</b>	
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*The person listed as the course contact on this form will be recorded in AIPM’s database as the person responsible for the course named on this form. He/she will be the first point of contact for all matters relating to this course during its period of endorsement. Course contacts may be different for each course. He/she may be the same as the person responsible for the application – or not.*

**Note: It is a requirement that Course Contact must be a financial Associate or Full Member of AIPM**

<b>Phone Number/s of Course Contact</b>		<b>Email:</b>	
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**Check box where course is delivered:**

ACT	NT	SA	VIC	NSW	QLD	TAS	WA	Available On-line
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please insert a summary of the course delivery method and other important information below e.g. length of course, how many days face to face and/or whether combined, how assessments are delivered etc.**

**Note: A link will be provided on the AIPM website to direct enquiries to the URL provided above.**



### SECTION 3: Course #2 Details

*If application is for more than one course please copy this page and lodge for each course*

<b>Full Name of Course:</b> <i>(Will appear on AIPM website – please include course code)</i>		<b>Previously endorsed by AIPM?</b>	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
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<b>URL to course details on applicant website:</b> <i>(Not Homepage -URL for page where AIPM logo will appear)</i>				
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<b>Name and Job Title of Course Contact:</b>		<b>AIPM Membership Number:</b>	
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*The person listed as the course contact on this form will be recorded in AIPM’s database as the person responsible for the course named on this form. He/she will be the first point of contact for all matters relating to this course during its period of endorsement. Course contacts may be different for each course. He/she may be the same as the person responsible for the application – or not.*

**Note: It is a requirement that Course Contact must be a financial Associate or Full Member of AIPM**

<b>Phone Number/s of Course Contact</b>		<b>Email:</b>	
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**Check box where course is delivered:**

ACT	NT	SA	VIC	NSW	QLD	TAS	WA	Available On-line
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please insert a summary of the course delivery method and other important information below e.g. length of course, how many days face to face and/or whether combined, how assessments are delivered etc.**

**Note: A link will be provided on the AIPM website to direct enquiries to the URL provided above.**



### SECTION 3: Course #3 Details

*If application is for more than one course please copy this page and lodge for each course*

<b>Full Name of Course:</b> <i>(Will appear on AIPM website – please include course code)</i>		<b>Previously endorsed by AIPM?</b>	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
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<b>URL to course details on applicant website:</b> <i>(Not Homepage -URL for page where AIPM logo will appear)</i>				
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<b>Name and Job Title of Course Contact:</b>		<b>AIPM Membership Number:</b>	
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*The person listed as the course contact on this form will be recorded in AIPM’s database as the person responsible for the course named on this form. He/she will be the first point of contact for all matters relating to this course during its period of endorsement. Course contacts may be different for each course. He/she may be the same as the person responsible for the application – or not.*

**Note: It is a requirement that Course Contact must be a financial Associate or Full Member of AIPM**

<b>Phone Number/s of Course Contact</b>		<b>Email:</b>	
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**Check box where course is delivered:**

ACT	NT	SA	VIC	NSW	QLD	TAS	WA	Available On-line
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please insert a summary of the course delivery method and other important information below e.g. length of course, how many days face to face and/or whether combined, how assessments are delivered etc.**

**Note: A link will be provided on the AIPM website to direct enquiries to the URL provided above.**

#### **SECTION 4: Non-registered Training Provider (third-party arrangement)**

The non-registered training provider (third-party arrangement) submitting an application for the endorsement of a VET qualification(s) should provide a signed confirmation letter from the RTO issuing the qualifications and statements of attainment as follows:

This letter is to confirm that <RTO name>, <RTO Code> has a written agreement with <Name of Non-Registered Training Provider>, <the start and end date of the agreement>, delivering the <Name of VET qualification> and has sufficient strategies and resources to systematically monitor any services delivered on the RTO's behalf, and uses these to ensure that the services delivered comply with the Standards for RTOs 2015 at all times. Under this agreement, the <RTO name> will issue qualifications and statements of attainment for the <Name of VET course> delivered by <Name of Non-Registered Training Provider>. We confirm that we have no open issues or complaints against us with ASQA. The date of our last successful ASQA audit was <date of audit>.

<RTO name> is aware of <Name of Non-Registered Training Provider> application for the course endorsement of <Name of VET qualification> and will cooperate with AIPM in responding to requests for additional information reasonably necessary for the Endorsed Course assessor or AIPM to be assured that the course is of a suitably high standard for AIPM endorsement.

<RTO name> will cooperate with AIPM in providing evidence of course quality such as student satisfaction throughout the period of endorsement.

<RTO name> agrees to have its name published on the list of AIPM Endorsed Courses on the AIPM website as the RTO issuing <Name of VET qualification> qualification for <Name of Non-Registered Training Provider> if this course application is successful.

**Please submit the letter together with your signed application for endorsement.**