

Application Form for Practice Management Course Approved Service Providers

Applicant details		*Mandatory fields
*Name of legal entity		
*Business name and number		
*Current ACN		
*Current ABN		
*Registered business address		
*Postal address		
		*Postcode
*Website address		

Contact details		*Mandatory fields
*Authorised contact person:		
*First name		
*Middle name/s		
*Surname		
*Title	<i>Mr, Mrs, Miss, Ms, Other (Please specify)</i>	
*Telephone number	<i>(Include area code)</i>	
*Facsimile	<i>(Include area code)</i>	
*Email address		

Companies must provide a copy of the company's Certificate of Incorporation, details of its registered office and details of its directors.

Trusts must provide a copy of the Trust Deed with information as to the trustee of the trust.

Registered businesses must provide a copy of its Certificate of Registration of Business Name.

Incorporated associations must provide a copy of its Certificate of Incorporation as an Association, details of its registered office and details of its management committee.

Training and assessment history

Describe the organisation's training and assessment history including the ability to deliver training, strategies to deliver training, assessment processes and procedures, and internal review procedures and other matters relevant to the organisation's historical reputation in delivering quality training. Include details regarding any registrations as a training provider under any Commonwealth or State legislation.

Ownership and management – Company

Provide details of all directors and the secretary of the company:

Name	Title	Address
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Does the individual have a role in day to day management of the company, or a role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Does the individual have a role in day to day management of the company, or a role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Does the individual have a role in day to day management of the company, or a role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Does the individual have a role in day to day management of the company, or a role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Does the individual have a role in day to day management of the company, or a role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Provide details of the management structure of the company:

Details of the day to day management (including personnel).	
Details regarding the board of directors and their role in the management of the company.	
Details of management's role in delivery of the training, assessment, internal review and conduct of the training.	

Ownership and management – Trusts

Provide details of the structure of the trust:

Does the trust have a corporate trustee? Does the trust trade under any other registered name? If the trustee is a corporate trustee, information required for companies set out above must also be supplied.

Provide details of the trustee(s) of the trust:

Name	Title	Address
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Do the trustees have day to day management of the trust, role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Do the trustees have day to day management of the trust, role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Do the trustees have day to day management of the trust, role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Do the trustees have day to day management of the trust, role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Name	Title	Address
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Do the trustees have day to day management of the trust, role in relation to the training organisation and delivery of the training? If so, provide details of these roles.

Provide details of the management structure of the trust

Details of the day to day management (including personnel).

Provide details of management’s role over:

Delivery of the training, assessment, internal review procedures and conduct of the training.

Ownership and management – Registered businesses

Provide details of the structure and ownership of the business:

Include details of all partners or other legal entities operating the business.
If the business partners comprise companies or trusts, information required for companies or trusts set out above must also be supplied

Provide details of all partners:

Name	Title	Address
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Do the partners have day to day management of the business, role in relation to the training organisation and delivery of the training?

Name	Title	Address
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Do the partners have day to day management of the business, role in relation to the training organisation and delivery of the training?

Name	Title	Address
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Name	Title	Address
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Name	Title	Address
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Do the partners have day to day management of the business, role in relation to the training organisation and delivery of the training?

Provide details of the management structure of the business:

Details of the day to day management (including personnel).

Provide details of management’s role over:

Delivery of the training, assessment, internal review procedures and conduct of the training.

Ownership and management – Incorporated association

Provide details of all office holders of the association and the management committee:

Name	Title	Address
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Do the office holders or management committee have day to day management of the association, any role in relation to the training organisation and delivery of the training?

Name	Title	Address
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Do the office holders or management committee have day to day management of the association, any role in relation to the training organisation and delivery of the training?

Name	Title	Address
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Do the office holders or management committee have day to day management of the association, any role in relation to the training organisation and delivery of the training?

Name	Title	Address
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Do the office holders or management committee have day to day management of the association, any role in relation to the training organisation and delivery of the training?

Name	Title	Address
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Do the office holders or management committee have day to day management of the association, any role in relation to the training organisation and delivery of the training?

Provide details of the rules of the association:

Details regarding the management and rules of the association.

Provide details of the management structure of the association:

Details of the day to day management (including personnel) and details regarding the management committee and their role in the management of the association.

Provide details of management's role over:

Delivery of the training, assessment, internal review procedures and conduct of the training.

Enquiries and completed payment details (if applicable) –

Records and Member Services, Queensland Law Society, GPO Box 1785, Brisbane Qld 4001
 p 1300 367 757 | f 07 3220 0616 | records@qls.com.au | For more information visit qls.com.au | ABN 33 423 389 441

Standards for teaching, learning and assessment

Provide details about how the organisation will meet the standards for teaching, learning and assessment set by the Council:

Provide details addressing all the matters contained in the standards and the guidelines for the PMC published by the Society and details as to how the organisation will maintain academic quality and integrity. Further details are to be provided about policies and practices implemented by the organisation to ensure the integrity of student assessment.

Staff, facilities, equipment and training and assessment materials

Provide details of staff who will be involved in the provision of the training, including staff who will be processing applications, providing administrative support for the PMC, providing training and undertaking internal reviews.

Name	Title	Address
Name	Title	Address
Name	Title	Address

Provide details of the facilities and equipment proposed to be used in the delivery of face-to-face programs:

Facilities and equipment proposed to be used in delivering the training.

Provide details of the facilities proposed to be used in the delivery of online programs:

Platform or learning management system or other facilities and equipment to be used in the delivery of online programs.

Provide details of the assessment methods proposed to be used in the delivery of the PMC:

Assessment methods and activities to be used in delivering the training and assessing the candidates, including details of internal review procedures and details of how these materials will meet the standards for teaching, learning and assessment set by the Council.

Qualifications and experience

Provide details of the qualifications of staff who will provide training or undertake internal reviews. Please attach academic references.

Name	Qualifications
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Name	Qualifications
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Name	Qualifications
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Provide details of any proposed external lecturers who will be engaged to deliver any part of the PMC, including details of their qualifications, references and brief history.

Provide details as to how those persons will maintain their qualifications to conduct a PMC.

Conduct and assessment of a PMC and internal review

How will the organisation conduct a PMC?
How will the organisation assess candidates in the PMC? Include detail of procedures for the internal review of decisions regarding assessment and completion of a PMC should a candidate seek review of a decision regarding their assessment.

The location and forms of delivery of the PMC to be delivered by the organisation. Include duration of the course, timing of the program and methods of assessment.

Support services for candidates

What support services will be offered to candidates for a PMC? Include details about the type of service, whether there are mechanisms in place for candidates with special needs, details about mentoring or other services for candidates, details about procedures for feedback and other services available to candidates.

Insurance

Provide details of public liability insurance held by the organisation and provide a copy of the certificate of currency.

Provide details of professional indemnity insurance held by the organisation and provide a copy of the certificate of currency.

Continuous delivery of PMC

Describe the ability of the organisation to deliver a PMC and to continue to deliver a PMC once a candidate has commenced a PMC and paid the fee.

Provide detail of any refund policy.

Enquiries and completed payment details (if applicable) –

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Financial viability and continued operation

Provide details about the financial viability and stability of the organisation:

Provide details of financial statements and information included in annual reports regarding financial accounts for the previous two (2) years.

Provide evidence that financial records are accurate and independently audited by an appropriately qualified auditor, evidence that the organisation meets government or other requirements in relation to financial viability, evidence that financial arrangements are well managed in accordance with legal requirements and Australian accounting standards and a history of the business operations.

Privacy

Queensland Law Society ('the Society') is authorised to collect your personal information under the *Queensland Law Society Administration Rule 2005* and the *Legal Profession Act 2007* for the purpose of carrying out the Society's statutory obligations and duties.

In addition, the Society intends to use the personal information you have provided in this form for a number of other purposes including:

- (a) processing your application to become an approved service provider;
- (b) assessing your suitability to become an approved service provider;
- (c) assessing the qualification and experience of persons who will conduct a PMC and checking references for those persons;
- (d) making inquiries of any relevant professional, law enforcement body or other relevant organisation when assessing whether a person is a fit and proper person to deliver the PMC; and
- (e) providing you with information about the PMC as determined by Council of the Queensland Law Society.

In accordance with the *Electronic Transactions (Queensland) Act 2001*, the Society may provide notices to you by electronic communication. By completing this application, your consent to this form of contact is taken to be given.

If you do not wish your details to be used for any one or more of the above purposes, you should advise the Society, GPO Box 1785, Brisbane Qld 4001 in writing.

In completing this form and providing details of individuals employed or otherwise engaged by your organisation, you certify that you have obtained the consent of those individuals to supply that information and that they consent to the use of their information as set out above.

Further details about the Society's Privacy Statement, Plan and Code of Practice and the collection of personal information may be found on the Society's website, qls.com.au.

Execution

I _____

an authorised representative of the organisation

declare that the information provided in this form and any accompanying documents in support of this application are true and correct in substance and in fact.

Signed

Dated

Witness

Witness Name

Payment form or Practice Management Course Approved Service Providers



This is not part of the QLS FORM 1 (AR) | version 2

Payment

Total payment (inc. GST) \$

Cash (must be made personally at 179 Ann Street, Brisbane)

Cheque (made payable to Queensland Law Society Inc and stapled to this form)

Credit card (Diners Club is **not** accepted)

Visa

Mastercard

Amex

Card number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Cardholder name

Expiry date

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Amount \$

Cardholder signature

This document will be a tax invoice for GST purposes when you make payment. Please retain a copy of this for GST records.

Completed application form

Please send the completed application form and accompanying documents and application fee to:

Queensland Law Society Inc.
GPO Box 1785, BRISBANE QLD 4001

Enquiries and completed payment details (if applicable) –

Records and Member Services, Queensland Law Society, GPO Box 1785, Brisbane Qld 4001

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