



Covid-19 Essential Worker Training Form

All students engaging in training with Start Training from 11.59pm Wednesday 5th August 2020 are asked to complete this form with their employer and provide it to a member of staff prior to training.

To assist in reducing the spread of COVID-19 Stage 4 restrictions have been enabled in the metro Melbourne area from 11.59pm Wednesday 5th August 2020. Under guidance released by the Victorian State Government *Education and Training* including *Assessments for safe work practices and infection control* are still permitted for those who are deemed essential workers.

This form is intended to assist essential workers and provide justification for their enrolment.

Student Details	
Full Name:	
Home Address:	
Telephone Number:	
Email Address:	
Date of Birth:	
Date of Training Course:	
Location of Training Course:	

Essential Worker Details (Employer to complete)	
Permitted Industry / Activity (Refer to Victoria State Government Stage 4 Restrictions List):	
Permitted Role:	
Does this employee have a Permitted Worker Permit issued and signed?	Y / N
If you answered No to the above question, please list the reasons why there is not a Permitted Worker Permit:	
I declare that this course is essential for my employee to complete within the Stage 4 restrictions.	Signature of company representative:



Health History (Student to complete)	
Have you travelled to and from interstate or overseas in the last 14 days?	
Have any of your immediate family or household members travelled to or from interstate or overseas in the last 14 days? If "YES" where did they travel?	
Have you been identified in the last 14 days as a close contact of someone who has COVID-19?	
If you answered "YES" to any of the above questions, have you completed 14 days of self-isolation?	
If so, where and when? Please specify the address and contact details of where you completed your self-isolation.	
Have you been tested for COVID-19? If "YES" please state when and any subsequent action taken	
Have you had any COVID-19 symptoms in the past 48hours? (i.e. cough, fever, sore throat, loss of sense of taste and smell) If "YES" please describe them	

Please note: this is not an official Permitted Worker Permit as authorised by the Victoria State Government.

Completing this document with false or misleading information may cause you to be in breach of the Stage 4 restrictions and liable to penalties up to \$19,826.40 (individuals) and \$99,132 (bodies corporate).

I acknowledge that the above information is correct:

Signature:

Date: