Upfront Assessment of Need – Suitability and Support Needs Assessment

Student Information

Student Name: _____

USI Number: _____

Date of Birth: _____

Course Enrolling _____

1. Knowledge About the Course

Why do you want to study this course?

What are your career goals and/or study pathways upon completion?

What are the vocational placement requirements for this course?

Are you willing and able to complete all vocational placement requirements? (Yes/No): _____

If No, please explain:

2. Previous Experience and Knowledge

Have you completed any work experience, attended info sessions, or undertaken studies related to this course? (Yes/No) _____

If Yes, provide details:

3. Attendance and Course Delivery

Do you understand this course is delivered face-to-face and requires regular attendance? (Yes/No): _____

If No, please explain:

4. Potential Barriers

Do you foresee anything that may prevent you from attending classes or completing placement (e.g., transport, family, health)? (Yes/No): _____

If Yes, please explain:

5. Employer Expectations and Working Conditions

Do you understand the expectations and working conditions in this field (e.g., shifts, uniforms, clearances)?

6. Interpersonal Skills

What interpersonal skills are necessary for this course and employment success (e.g., communication, empathy)?

7. Potential Barriers to Study

Are there any personal, academic, financial, or health barriers that could affect your study? (Yes/No): _____

If Yes, provide details:

8. Additional Support Requirements

Do you require additional support (e.g., tutoring, technology, language assistance)? (Yes/No): _____

If Yes, describe:

9. Existing Support Plans

Do you currently have any support plans from a school or training institution? (Yes/No): _____

If Yes, provide details:

10. Additional Questions

Do you have any questions regarding enrolment, course structure, or requirements?

Student Declaration

I declare that I have read the course information provided by Queensford College and fully understand the course requirements and expectations.

Student Name: _____

Student Initials: _____

Date: _____

Office Use Only

Student has adequate literacy & numeracy skills to commence training & work placement (Based on SRNI/CSPA Assessment):

☐ Yes ☐ No

Assessor's Name: _____

Assessor's Initials: _____

Date Assessed: _____