

Application for Nominated Representative -Boat Driving Licence Training Provider

	ck applicable):		
 Conduct general boat licence practical training (Practical Traine Conduct general boat and PWC driving licence knowledge testi and may conduct theory course (Examiner) Provide administration assistance on delivering general boat ar (Assistant) 	ing and check customer proof of identity (POI) Yes No		
Details of Boat Driving Licence Training Provider	Contractors/Sub-contractors		
Registered business name	Business/Company Name		
Trading name/Organisation name	ABN/ACN		
Business address	Contractors/Sub-contractors must also provide: • A letter from the provider requesting authority to sub-contract services		
	 A copy of the Certificate of Registration for a business or corporation 		
Postal address (if different from above)	 A copy of appropriate insurance cover (\$20m Public Liability, Marine Hull, \$5m Professional Indemnity) A copy of the Certificate of Operation and Survey for the vessel being used for training 		
	The Nominated Representative must meet the following criteria and provide evidence:		
Business phone number	Evidence Official Use checklist Only		
Business email address	Be 18 years of age and provide Proof of Identity certified by an authorised witness		
etails of the Nominated Representative			
Details of the Nominated Representative	Hold a current First Aid Certificate (HLTAID003 Provide First Aid equivalent or above)		
Details of the Nominated Representative First name	(HLTAID003 Provide First Aid		
First name	(HLTAID003 Provide First Aid equivalent or above) ■ Hold a Working with Children Check		
-	(HLTAID003 Provide First Aid equivalent or above) Hold a Working with Children Check clearance Hold a National police check clearance (dated within the last three months of		
First name	(HLTAID003 Provide First Aid equivalent or above) Hold a Working with Children Check clearance Hold a National police check clearance (dated within the last three months of the date of this application)		
First name Surname	(HLTAID003 Provide First Aid equivalent or above) • Hold a Working with Children Check clearance • Hold a National police check clearance (dated within the last three months of the date of this application) Additionally, Examiners and Practical Trainers must: • Hold a current and valid Certificate IV in 'Training and Assessment' qualification (equivalent or above) • Hold a current and valid General Boat Driving Licence and have held that licence for a minimum of 3 consecutive years without conditions, or a higher		
Surname Position	(HLTAID003 Provide First Aid equivalent or above) • Hold a Working with Children Check clearance • Hold a National police check clearance (dated within the last three months of the date of this application) Additionally, Examiners and Practical Trainers must: • Hold a current and valid Certificate IV in 'Training and Assessment' qualification (equivalent or above) • Hold a current and valid General Boat Driving Licence and have held that licence for a minimum of 3 consecutive		
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Boat Driving Licence Training Provider Declaration	Official Use Only	
I declare that the Nominated Representative specified in this form is appropriately qualified and experienced to meet the requirements of the Boat Driving Licence Training Provider Scheme in relation to:	Proof of Identity Record	
Provider name	Stand alone or primary proof Secondary	oroof
Name and position of providers authorised representative	Document number/Expiry date Document n	umber/Expiry date
Signature	Approval	
Date	Has the Nominated Representative previously been suspended or terminated by Transport for NSW from delivering any licencing components under the Boat Driving Licence Training Provider Scheme.	Yes No
Day Month Year	Code of Conduct completed	Yes No
Privacy Statement	Nominated Representative Induction completed	Yes No
Transport for NSW is collecting your personal information in connection with your application to become a Nominated Representative under the Boat Driving Licence Provider Scheme	Criteria met and application approved	Yes No
and we may retain and use it for marine legislation purposes. Providing this information is voluntary but we may not be able to assess your application unless you provide it. We may disclose	Manager or delegate name	
your personal information in order to assess your application or		
verify the information you provide. We may also share your information in respect of inquiries regarding marine accidents, and	Manager or delegate signature	
to other agencies responsible for marine management or vessel registration and licencing. Otherwise we will not disclose your personal information without your consent unless authorised by law.	3 3 3	
Your personal information will be held and managed by Transport for NSW in accordance with the Privacy and Personal Information Protection Act 1998. To access or amend your personal information	Date	
please use the access and amendment application forms available at www.transport.nsw.gov.au/about-us/transport-privacy	Day Month Year	
Name of Nominated Representative (Examiner/Practical Trainer/Assistant)		
Signature		
Cignature		
Date		
Day Month Year		

Please submit completed form to: boatlicenceprovider@transport.nsw.gov.au