**Verification of Qualification**  
This form is a request to verify your TAE40110 Certificate IV in Training and Assessment qualification and Statement of Attainment/s (SoA) you may have from the TAE10 Training Package. As part of the transition to the new TAE40116 Certificate IV in Training and Assessment qualification, we need to contact your previous Registered Training Organisation (RTO) to confirm that you have completed the qualification or units of competency (UoC).

You may also have extra units as a SoA for the two units on another transcript, so please double check:

TAELLN411 / TAELLN401A Address adult language, literacy and numeracy skills  
TAEASS502A/ TAEASS502B Design and develop assessment tools

You will need to have your original transcript of results and testamur (certificate) with you.

**If you have completed your certificate and SoA from different RTOs than your TAE40110 qualification you will need to complete separate Verification Forms.**   
  
NTM will also need to sight the original certificate and transcript of results**, please provide a copy of your TAE10 results**. If you have misplaced your transcript and certificate, please contact your issuing RTO. If the RTO is no longer operating contact ASQA <https://www.asqa.gov.au/students/applying-copy-student-records>. You may also be able to access transcripts from [www.usi.gov.au](http://www.usi.gov.au) for qualification issued after 2015.

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| **Personal Details** | | | | | | | | |
| **First Name** | |  | | | **Last Name** | | |  |
| **Date of Birth** | |  | | | **Mobile** | | |  |
| **Email** | |  | | | | | | |
| **Certificate details from issuing RTO, select all that apply** | | | | | | | | |
| **Qualification** | | TAE40110 Certificate IV in Training and Assessment | | | | | | |
| **Unit/s of Competency** | | TAELLN411 Address adult language, literacy and numeracy skills  TAELLN401A Address adult language, literacy and numeracy skills  TAEASS502A Design and develop assessment tools  TAEASS502B Design and develop assessment tools | | | | | | |
| **Name of RTO** | |  | | | | | | |
| **RTO Code** | |  | | | | | | |
| **Student number** | |  | | | | | | |
| **Certificate number** | |  | | | **Date of issue** | | |  |
| **Authority to Release Information** | | | | | | | | |
| **I declare**   * the information I have provided on this form is complete and correct. * I give my consent for National Training Masters to provide the personal information as authorised on this form, to the issuing RTO to verify my qualification and/or units of competencies from the TAE10 Training Package.   **I understand that**   * this authority remains valid for the period of verification purposes only, unless revoked by me * The *Privacy Act 1998* applies to this request and I may view the form by contacting NTM | | | | | | | | |
| **Name** | |  | | | **Signature** | |  | |
| **Date** | |  | | |  | | | |
|  | | | | | | | | |
| **Office use only** | original sighted | | verified with RTO | | | unable to verify | | Statutory Declaration |
| **Officer** |  | | **Date** |  | | **Signature:** | |  |