

OXLEY TRAINING SERVICE PTY LTD



Application for Pre-Approval to Attend a Course not offered by Oxley

PLEASE NOTE:

Oxley may be willing to provide reimbursement to members for professional development courses or seminars not offered by Oxley. This form is your application to seek prior approval to attend a course not offered by Oxley. An approved pre-approval form is required **before attending a course** and seeking reimbursement from Oxley.

I, _____ (print full name) hereby apply for pre-approval to attend a course.

I understand that the course must be pre-approved by Oxley Nursing Service before reimbursement will be considered. Pre-approval must be obtained at least 4 weeks prior to attending the course.

Course Pre-approval & Reimbursement will be processed if I have:

OFFICE USE ONLY

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1. Current Membership with Oxley Nursing Service or Oxley HealthCare Recruitment | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. An approved "Application for Pre-approval to Attend a Course" | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Worked at least 20 shifts for Oxley in the last three months | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Must be currently working with Oxley at the time of each application. | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Hold a current Criminal Record Check within last 3 years. (Applies only to AIN's) | <input type="checkbox"/> | <input type="checkbox"/> |

Criteria applies only to reimbursement:

6. Provided a copy of the Course attendance / Competency certificate.
7. Provided the **Original** Course Receipt (for our records).
8. Written submission (a short statement) on the outcomes of the course

COURSE INFORMATION:

Designation (RN / EN / EEN/ AIN / Other) _____ (print designation)

Course Title: _____

Course Provider: _____

Course Date: _____ Course cost: \$ _____

Signature: _____ Date: _____

APPLICANT DETAILS FOR PRE-APPROVAL

Postal Address: _____

Postcode: _____

Note: Approval is subject to availability. Oxley reserves the right to accept or reject any "Applications for Pre-approval to attend a course". Oxley members will only be reimbursed when pre-approval has been obtained and minimum criteria met (as above). Courses must be directly related to professional development of the member.

OFFICE USE ONLY:

Course Pre-approval obtained?	<input type="checkbox"/> Yes Full \$ _____	<input type="checkbox"/> Yes Part \$ _____	<input type="checkbox"/> No	Initials:	
Member Advised:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Advised Date:		Initials:	
Computer Entry:	Initial Spreadsheet Entry:	Date:		Initials:	
	Fast Track Entry:	Date:		Initials:	
Mandatory Competencies Expiry Date:		Date:		Cost:	
Courses attended in last 12months:	Name:				
	Name:				
	Name:				