



## Course in Applied Vocational Study Skills (CAVSS) Request Form

### APPLICANT DETAILS

RTO name:

### COURSE DETAILS

Delivery region:

Parent qualification national code:

Parent qualification name:

Parent qualification hours (as listed on TAMS):

Student places:

**If you intend to partner, please provide the name of the RTO registered to deliver CAVSS:**

RTO national ID:

Legal name:

Trading name:

**Please provide details for the person the Senior Literacy Officer can contact to discuss CAVSS delivery:**

Contact name:

Contact position:

Contact phone:

**Please complete the below fields to provide a brief description of your teaching program for the parent qualification.**

1. Start date:

2. Finish date:

3. Proposed duration of the course in weeks:

4. Scheduled number of class-based teaching hours per week:

5. Scheduled number of other face to face teaching hours per week:

6. Estimated number of work placement days to be provided per student:

Additional details:

**Describe the Units of Competence and/or industry concepts that are the most demanding of students' literacy/numeracy skills:**

**Describe teaching/learning/assessment strategies and/or materials that create additional literacy/numeracy demands on students:**

**Briefly describe the steps you have taken to ensure that your vocational lecturer understands and accepts the CAVSS team-teaching model:**

**Please indicate in the table below the CAVSS modules you will use in your program by entering in the module hours as defined in TAMS, in the appropriate column. (Maximum of 100 hours across all units per 6 month period)**

Title of CAVSS module	Hours	
	First six month period	Second six month period
Applied English Language Oracy		
Applied Writing Techniques: Study		
Applied Writing Techniques: Workplace		
Applied Reading Techniques: Study		
Applied Reading Techniques: Workplace		
Applied Mathematics: Fractions, decimals and percentages		
Applied Mathematics: Measurement		
Applied Mathematics: Using formulae		
Applied Mathematics: Spatial skills		
Applied Mathematics: Computation		
<b>Total hours:</b>		

**If the CAVSS hours exceed 20% of the 'parent' qualification nominal hours, please provide a justification.**

**Completed forms must be submitted via email  
to: [training.markets@dtwd.wa.gov.au](mailto:training.markets@dtwd.wa.gov.au)**