

CTA Participant Referral Form - Referring to SYC

Note 1: Referrals must be made by jobactive Providers to CTA Providers in the form of Attachment A regardless of whether the CTA Provider is the same legal entity as the relevant jobactive Provider.

Note 2: For each Participant Referred to a CTA Element, the jobactive Provider must provide details of the Referral as described below, to the CTA Provider prior to an Initial Meeting. Use of this Attachment A is **mandatory** and includes details as provided under the relevant agreements, guidelines and deeds.

Disclaimer: Notwithstanding any information provided in this Attachment A, jobactive Providers and CTA Providers must ensure that they adhere to all obligations under the relevant agreements, guidelines, deeds and reference material issued by the Department of Jobs and Small Business.

Participant Name: _____ JSID: _____

Participant Referral		Details
1	Which CTA Element has the Participant been referred to?	Tailored Career Assistance Element <input type="checkbox"/>
		Functional Digital Literacy Element <input type="checkbox"/>
		Both CTA Elements <input type="checkbox"/>
2	Contact details of the Participant	Phone: _____
		Mobile: _____
		Email: _____
3	Details of reduced capacity or part-time Mutual Obligation Requirements	_____
4	Any other circumstances or information relevant to the Participant that may assist the CTA Provider to better deliver the Services	_____
5	Physical location of the CTA Element(s) (address(es) for service)	_____

Completed by: _____ Organisation: _____ Date: _____

please email completed form to cta@syc.net.au or press