

Indigenous Development & Employment Program

**Instructions for Participant:** Please complete this form to request approval to use Professional Development (PD) Allowance for a device.

 $\ast$  The approving authority for this request is NIAA & all steps must be completed prior to submission  $\ast$ 

## **Instructions for Mentors:** Guide your mentee through each step, ensure each step is completed prior to submitting through to <u>idep@jyaustralia.com.au</u>

Section A: Participant Information					
Name:	Date:				
Cohort:	Department Name:				
Section B: Professional Development Device Request Plan Details					
Type of device:	Cost:				
Quote/Invoice attached: Yes	(Mandatory)				
*Please ensure a quote/invoice or screen shot of pricing, is a	attached for payment.(JB Hi-Fi is a preferred vendor)				
Step 1: Details of the request (supporting documents car	be added as an attachment)				
Please describe the challenge/s that you are facing with stu	dying, add how the device can improve this:				
Do you currently have the means to study and own a device? Yes / No					
Explain what efficiencies a new device will provide & what i	s <u>specific</u> about this device that will assist you:				
To apply for a device, you must be:					
<ul> <li>Enrolled or enrolling into a course (Diploma/Course/University or equivalent)</li> <li>Please describe how the course benefit you within the workplace and how it aligns with your IDEP PD plan:</li> </ul>					
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## Professional Development Device Request Form Indigenous Development & Employment Program

Step 2: Engage with local IT Department							
Do you have a device that your department has loaned yo	u? Ye	s /	No				
If yes, are you able to use your work device to access & con	duct your st	udies?	Yes	/ N	10		
If you cannot access the required websites, please email and ask your IT Department to have these sites unblocked. (Attach response - mandatory)							
Other comments:							
Step 3: Reminder*Participant to complete, attach any email correspondence. (Mandatory)							
Step 4: Mentor Endorsement (Completed by Mentor)							
Mentor name:		Endorsec	l:	Yes	/ No		
Comments (required):							
Comments (required):	1						
Comments (required):	I						
Comments (required): Mentor signature:	Date:						
	Date:						
	Date:						
Mentor signature:	Date:						

Step 6: Outcome from:	JY Australia	/	NIAA				
Approv	/ed		Not Approved				
Name:			Date:				
Signature:							
If request is not approved, provide reasons for request not being approved:							
Step 7: Participant & Mentor informed of outcome   JY Australia IP CDO   GM   ADMINMAN							
Emailed on (date):							