# Skills and Employment Portal – Access Request

**New Access Request** – complete all sections

**Vary Access Request** – complete all sections

**Deactivation Request** – complete sections 2 & 6

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| **SECTION 1: Organisation Details** | | | | |
| Legal name: | | | | |
| Trading name: | | | | |
| Postal address: | | | | |
| Suburb: | | State: | | Postcode: |
| Telephone: | Email: | | | |
| **Organisation Category** | | | **RTO Code**  ***(as per training.gov.au)*** | |
| RTO | | |  | |
| Proponent (Non-RTO) | | | n/a | |
| TAFE SA | | | 41026 | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SECTION 2: Applicant Details** | | | | |
| Title (Mr/Mrs/Miss/Ms): | First name: | | Surname: | |
| Location address: | | | | |
| Suburb: | | State: | | Postcode: |
| Telephone: | | Email: | | |

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| **SECTION 3: Access Level Required *(refer to User Role Matrix on Page 2 for further information)*** |
| RTO Primary Contact |
| RTO Contact |
| RTO View |
| Proponent - Projects *This will enable your users to view Remittance Advice/RCTI Reports for Projects*  *(e.g. Training Priority Projects). If your organisation is an RTO delivering Projects, please request dual access roles (Proponent & RTO Primary Contact).* |

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| **SECTION 4: Training** |
| Would you like to be contacted to receive Skills and Employment Portal training?  Yes  No  *(e.g. creating participants and Training Accounts)* |

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| **SECTION 5: User Declaration** | | |
| I have read and understood the terms and conditions of the Skills and Employment Portal User Agreement and I will observe and be bound by the conditions of the policy at all times. | |  |
| I certify that all information provided in this form is accurate and agree to the following:  I will ensure that my PASSWORD is kept confidential and acknowledge that unauthorised use of my personal Portal USER-ID may result in the integrity of the system being compromised. I further accept that I am responsible for ensuring my personal Portal USER-ID is not shared and is only used for proper and authorised activities. | |  |
| Signature of applicant: | | |
| Print name: | Date:      /     / | |

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| **SECTION 6: Account Authorisation** | | |
| As Executive Officer or Organisation Delegate, I accept responsibility for all Portal accounts issued for this organisation and authorise the creation of a Portal account for the above user. | |  |
| Signed: | | |
| Print name: | | |
| Position title: | Date:      /     / | |

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| **On completion and authorisation of this form, please email to:** [**skillscontracts@sa.gov.au**](mailto:skillscontracts@sa.gov.au) |

***User Role Matrix***

Table 1 - Matrix of system user role permissions

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Security Role** | **RTO Primary Contact** | **RTO Contact** | **RTO View** | **Proponent** | **Proponent and RTO Primary Contact** |
| Create Participant Profile | X | X |  | X | X |
| Search & View Participant Profile | X | X | X | X | X |
| View Participant History | X | X | X |  | X |
| Create Training Account | X | X |  |  | X |
| Search & View Training Account | X | X | X |  | X |
| Edit Training Account | X | X |  |  | X |
| Search & View Accredited Training Claim | X |  |  |  | X |
| Search & View Project |  |  |  | X | X |
| Add Participant to Project |  |  |  | X | X |
| Search & View Reports (Remittance Advice/RCTI Reports for Projects) |  |  |  | X | X |
| Submit & Edit Participant Outcome Form |  |  |  | X | X |