

AUSTRALIAN COMMUNITY WORKERS ASSOCIATION

Your partner in professional practice



Request for ANZSCO Skills Assessment Certificate

Full Name	
Date of Birth	
Address	
Contact No	
Email	
ACWA Reference No	
Have you attached a certified copy of the original Skills Assessment Certificate issued by ACWA (formerly AIWCW) with this request form?	Yes / No Please circle the appropriate option. This request for a new ANZSCO Skills Assessment Certificate cannot be processed until we receive a certified copy of the Skills Assessment Certificate issued to the applicant by ACWA. Please note that if you received a 'Suitable' assessment outcome under ASCO code by ACWA prior to 01/07/2010 and now require an ANZSCO skills assessment certificate, an additional charge of \$80 applies. Please attach a money order or Cheque payable to ACWA with this form.
Applicant's Signature	
Agent's Signature (Only for Agent nominated by the Applicant on original application)	
Date of Request	

Please complete and mail this form along with a certified copy of the Skills Assessment Certificate to ACWA P.O Box 42 Flinders Lane VIC 8009 Australia.