

SRG08 CHANGE OF OCCUPATION REQUEST FORM – SKILLS ASSESSMENT

Please complete using BLOCK letters



This form applies to applicants who have received a Skills Assessment and/or Points Test Advice, and wish to have their employment and/or qualification(s) reassessed under a different nominated occupation. Please note: If you require a change of occupation for an assessment currently being processed by VETASSESS, please see the SRG06 Change of Application Details request form.

If you wish to submit additional qualifications and/or employment, please complete the relevant sections of the SRG1 Application for a Skills Assessment form and attach the required documents as described in the SRG1 Application for Skills Assessment explanatory notes.

Change of Occupation fees: <i>Please tick the relevant box/boxes below</i>	Applying from within Australia (includes GST)	Applying from outside Australia (excludes GST)
<input type="checkbox"/> Qualification Assessment	AUD \$330	AUD \$300
<input type="checkbox"/> Skills Assessment	AUD \$550	AUD \$500
PLUS applicable fees for qualifications and employment positions you would like Points Test Advice on (see below)		
Qualifications		
<input type="checkbox"/> Overseas doctoral degree	AUD \$385	AUD \$350
<input type="checkbox"/> Other qualifications/s	no additional fees payable	no additional fees payable
Employment		
<input type="checkbox"/> 1 or 2 employment positions over the last 10 years	AUD \$88	AUD \$80
<input type="checkbox"/> 3 or 4 employment positions over the last 10 years	AUD \$165	AUD \$150
<input type="checkbox"/> 5 or more employment positions over the last 10 years	AUD \$330	AUD \$300
Total		

APPLICANT FAMILY NAME (surname): _____

APPLICANT GIVEN NAME/S: _____

DATE OF BIRTH: ____/____/____
DD MM YY

FILE No.

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I, _____, the above named applicant/the authorised agent for the above named applicant, hereby request a Reassessment of this case:

Newly nominated occupation: _____
(please include the full occupation title and ANZSCO code)

VISA Type: General Skilled Migration (GSM) Employer Nominated Scheme (ENS)
 Skilled Graduate (Temporary) Visa (Subclass 485)
(please check the DIAC website for occupation which may be nominated for the 485 visa)

APPLICANT/AGENT SIGNATURE: _____ DATE OF REQUEST: ____/____/____

AGENT NAME (if applicable): _____ (PLEASE PRINT)

Please include any additional information and/or evidence which may support your request.

Please confirm your current postal address and contact information:

TELEPHONE: _____ MOBILE: _____ FAX: _____

EMAIL: _____

ADDRESS FOR CORRESPONDENCE: _____



Mail to: Skills Recognition- General Occupations
VETASSESS
GPO Box 2752
Melbourne VIC 3001
AUSTRALIA
Fax: +613 9654 2773

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Payment must be made in Australian dollars. Bank cheques/drafts should be made payable to VETASSESS. Please complete the following payment section for Visa or MasterCard credit card payments. Please note that this fee is not refundable.

I, _____ authorise VETASSESS to debit my credit card in the amount of AUD \$ _____ for the payment of my Request for Reassessment.
Name of Cardholder: _____
Card Number: _____ Expiry Date: ____/____ Card Validation Code: _____
Signature of Cardholder: _____

**Please note that the applicant signature must match the signature as it appears on the original application.
Signature discrepancies can cause significant delays.**



Quality
ISO 9001

Mail to: Skills Recognition- General Occupations
VETASSESS
GPO Box 2752
Melbourne VIC 3001
AUSTRALIA
Fax: +613 9654 2773