

ACMi Suitability Assessment & Student Advice Form

SECTION A – GENERAL INFORMATION

| | |
|-----------------------------|--|
| Date of Assessment: | |
| Assessor Name: | |
| Student Name: | |
| Student ID: | |
| Qualification Code & Title: | |

SECTION B – SUITABILITY ASSESSMENT RUBRIC

Instructions: For each criterion, select a rating from 1 to 5 and provide comments/evidence. Use the rating scale below:

- 1 – Significantly below standard or non-compliant
- 2 – Some basic indicators present but not yet suitable
- 3 – Meets most criteria but needs structured support
- 4 – Suitable with minor or no support
- 5 – Exceeds expectations

| CRITERIA | RATING (1-5) | COMMENTS/EVIDENCE |
|--|--|-------------------|
| Language, Literacy, Numeracy, and Digital (LLND) | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |
| Previous Qualifications & Experience | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |
| Motivation & Commitment | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |
| Independent & Collaborative Ability | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |
| Attitude Towards Learning | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |
| Support Needs | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |
| Suitability for Practical/Work Placement | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |
| Compliance with Entry Requirements | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 | |

SECTION C – OVERALL OUTCOME (ASSESSOR)

Overall Rating: ___ / 5

Final Decision (tick one):

- Accepted – Student is suitable to enroll
- Conditional Acceptance – Support plan required
- Additional Development Required – Actions to be completed before proceeding
- Not Accepted – Does not meet requirements

Comments (Assessor): _____

Section D – Student Suitability Advice

1. Strengths:

2. Areas for Improvement:

3. Recommendations (with Action & Timeline):

| Area | Action Required | Timeline |
|--------------------------------------|-----------------|----------|
| LLND Support | | |
| Additional Qualifications/Experience | | |
| Motivation & Commitment | | |
| Support Needs | | |
| Practical Skills Development | | |
| Pre-Requisite Requirements | | |

FINAL RECOMMENDATION (STUDENT-FACING OUTCOME)

- Accepted – You are fully suited to the program and can proceed without additional support.
- Conditional Acceptance – You are suitable but will need support in specific areas.
- Additional Development Required – You must complete recommended actions before starting/continuing.
- Not Accepted – You do not currently meet the suitability criteria for this program.

Section E – Sign-Offs

ASSESSOR DECLARATION

- I confirm that this assessment and advice reflect my professional judgement.

Assessor's Name: _____

Assessor's Signature: _____

Date (dd/mm/yyyy): _____

STUDENT ACKNOWLEDGEMENT

- I understand the outcomes of the assessment and the advice provided.

Student's Name: _____

Student's Signature: _____

Date (dd/mm/yyyy): _____

Document History

| Version No. | Issue Date | Nature of Amendment |
|-------------|-----------------|--|
| V.1.0 | 01 October 2025 | Initial version created and aligned with Student Handbook. |