

NSW Apprenticeship/Traineeship – Training Plan Proposal

Apprentice/Trainee Personal Details

Training Plan Proposal	<input type="checkbox"/> New	<input type="checkbox"/> Amended	Date:		
TCID		At School	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Given Name		Surname			
Date of Birth		Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Address					
Suburb		State		P/code	
Phone		Mobile			
Email					
Aboriginal or Torres Strait Islander origin?	Yes <input type="checkbox"/>		No <input type="checkbox"/>		

Employer Details

Legal Name					
Trading Name				ABN	
Address					
Suburb		State		P/code	
Contact Name		Tel		Mob	
Email				Fax	
Host Employer	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Trading Name		
Workplace Training Address					
		State		P/code	

Training Details

Contract Type	<input type="checkbox"/> Apprentice	<input type="checkbox"/> New Entrant Trainee	<input type="checkbox"/> Existing Worker Trainee
Employment Type	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	Hours per week
TC Start Date		TC End Date	
Vocation Title			
Qualification Title			
Qualification Level		NTIS Code	
Mode of Delivery	<input type="checkbox"/> Classroom based <input type="checkbox"/> Electronic Based <input type="checkbox"/> Employment based <input type="checkbox"/> Other Delivery (e.g. distance) <i>specify:</i>		
RTO Training Address (if applicable)			
		State	P/code
RTO Start Date		RTO Completion Date	
Funding Source	<input type="checkbox"/> Employer (fee for service)	<input type="checkbox"/> Public Funding (ATTP/PPP)	<input type="checkbox"/> TAFE
DAAWS	<input type="checkbox"/> Application pending	DAAWS approval date	

Australian Apprenticeships Centre

AAC			
AAC Signature		Print Name	
Contact Numbers	Tel:	Mob:	Fax: Date:

Registered Training Organisation

RTO Legal Name				RTO Code	
Trading Name					
Contact Name		Tel		Mob	
Email				Fax	

Acceptance of Agreement

I the undersigned agree that:

- the RTO nominated on this form has been selected to deliver training to this apprentice/ trainee.
- a Training Plan will be developed by the RTO in consultation with the employer and apprentice/ trainee within 12 weeks of approval of the Training Contract and a copy provided to the employer and apprentice/trainee.
- delivery of training and assessment services will be in accordance with the AQTF, the Training Package, the Apprenticeship & Traineeship Act 2001, and the terms and conditions of State Training Services' Apprenticeships and Traineeships Training Program (ATTP) and Training Plan Guidelines.

RTO Signature		Print Name	
Position			Date:
Employer's Signature		Print Name	
Position			Date:
Apprentice/Trainee's Signature			Date: