LEARNING PROGRAM PLAN - TEMPLATE

Name of Trainer - Training organisation: *Your name / Name of your organisation*

Title of program: *Name of training program. E.g. OHS Induction*

Client (Name, organisation and contact details) *The clients name and contact details, if this is your own workplace training this will simply be the name of your workplace*

Purpose of the learning program: *Brief description of the purpose of the training: e.g. New employee, OHS induction.*

Learner(s)	*Target learner(s)* *Learners Name/s*	*Characteristics* *List their characteristics if known – e.g. hands on, slow reader, etc.*	
	Learner(s)with special needs *List learners names that have special needs*	*Description of need* *Describe the need: e.g. LLN difficulties*	*Management strategy* *e.g. Support with reading, oral questioning*
Benchmark information	*AQF level and name/ Workplace* *Is this a qualification level? Or simply a workplace task/standard? E.g. Cert II in IT or Induction training for Orchid Fashions*		
	Training Package Code and Name OR workplace area *e.g. BSB07 Business Services or / Cutting Room Department*		

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	Course Pre-requisites or special requirements *Detail any prerequisites e.g. Needs to hold white card; Nil. Etc*			
	Benchmarks/ competency standards	**Name of the Workplace Standard / Unit of competency** *e.g.: BSBOHS201A or if a workplace standard: OHS Induction*	**Description of the workplace skill to be demonstrated** *e.g. Safe work practices*	**Detail the performance required to show competence** *e.g.: Ability to work safely as per organisational requirements; complete hazard/risk control reports*
Content	**Overview of content** *Brief overview of the training: OHS induction including PPE, Policies and procedures legislative and organisational, etc.*			
	Structure of content *How is this going to be presented? E.g. class room induction of OHS policies and procedures as per organisation requirements. Intro to PPE: Reporting requirements, etc.*			

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Resources	**Existing resources** *List the resources you have on hand that you are going to use: e.g. Video: OHS in the workplace; hazard reporting records; OHS policies, etc.*	
	Required resources *What other resources are required that you do not have? e.g. fire department to present info session on how to use fire extinguishers.*	
Delivery and assessment	**Delivery strategy** *e.g. 1 x 3 hour session. To include questionnaire to ensure competency at the end of session*	
	Assessment/evidence gathering *How will you assess they are competent and understand training? e.g. questionnaire, observation, formative questioning, etc?*	
	Learning environment *Where is this going to take place? e.g. Training room 4; workshop, etc*	
	Timeframe *What is the time frame for training? e.g. 1 x 3 hour session Monday 0800 - 1100*	
	Coaching/mentoring arrangements after training *Detail who will be the mentor/coach for after the training is completed as well as how long this is expected for*	
	Summary of costs *What costs are involved? You can use the costings sheet provided below and transfer final costing to here*	

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DELIVERY PLAN: Overview of Training Sessions/learning outcomes

Order / Session No. *The amount of sessions here should agree with what is on your learning program*	**Unit code/name and/or Learning outcomes** *Unit code / name and/or Learning outcomes List in the order you are going to teach learning outcomes, these become your sessions*	**Delivery Method** *How are you delivering this session? e.g. face to face; workshop, etc.*	**Learning Activities** *What activities are you using for this session? e.g. Intro; Go over P & P for OHS'; video of OHS*	**Assessment Methods/** *How are you going to assess they are ready to go onto the next session? e.g. formative questioning / practical demonstration*	**Resources** *What resources do you need for this session? e.g. P & P handouts; video OHS*	**OHS requirements** *What OHS requirements are there for this session? Do you need any PPE, ergonomic overview?*	**Facilitator / Support persons** *Any support people required? e.g. Fireman to demonstrate use of fire extinguisher*
1							
2							
3							
4							
5							
6							

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PROGRAM SIGN OFF

Training Manager's endorsement: *Put the stakeholders name here who has authorised the program*	**Name** **Signature:** **Date:**
Feedback/comments *Any feedback that has been provided by stakeholders relating to the information provided*	
Learner or supervisors endorsement *Name and signature of the candidate or supervisor to ensure they have agreed on the learning program*	**Name:** **Signature:** **Date:**

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COSTINGS SHEET

Program Title: *What is the name of the program you are costing?*	
Program Dates: *What date is it being run?*	
Location: *Where is it being held?*	

Item	Quantity	Sub Total $
Calculate approx costs associated with your learning program		
Salary/Wages Staff		
• Trainers ($120 per hour)		
• Other		
Equipment & Resources		
• Equipment hire / purchase		
• Video/film hire / purchase		
• Resource books		
• Specialized resources / equipment		
• Other		
Materials/Consumables		
• Stationary		
• Photocopying / printing		
• Text/ booklets		
• Pens/markers pencils etc.		
Venue & Catering		
• Venue Hire		
• Meals - Morning/Afternoon teas		
Overall Total	**$**	0