

Employer Trading Name	
Apprentice/Trainee Name	
RTO Name	
TCID	

ABOUT THE TRAINING PLAN

- The Training Plan describes what training is to be undertaken, who provides the training and conducts the assessments, and how, when and where this will occur.
- The Training Plan is developed by a Registered Training Organisation (RTO) in consultation/negotiation with the employer and apprentice/trainee. Under user choice arrangements, the employer and apprentice/trainee have the right to decide which RTO will deliver their training, the units of competence and the sequence they will be delivered, and how, when, where and by whom training and assessment will be delivered.
- The Training Plan is a working document to be used for the duration of the Training Contract and must be updated as necessary to reflect the current status of training.
- A copy of the current Training Plan, including any updates, must be kept by the RTO, employer and apprentice/trainee, with a copy always accessible in the workplace and to Training Services NSW.
- Upon completion of this Training Plan the apprentice/trainee is eligible to be issued with the appropriate qualification.
- The RTO issues the qualification when the employer has verified that the apprentice/trainee is competent in the vocation to the required industry standard.

For further information on how to develop, implement or monitor a Training Plan, see Vocational Training Guideline - Training Plan at www.training.nsw.gov.au

PARTS TO THE TRAINING PLAN

- Cover Provides basic information about training plans and details obligations and undertakings by each party to the Training Plan.
- Part 1 Provides essential employer, learner and RTO details for the apprenticeship/ traineeship.
- Part 2 Identifies the units of competence (training) being undertaken, and how, when and by whom, training and assessment will be delivered/undertaken.
- Part 3 Identifies support (eg. training materials, resources, facilities, supervision, etc.) that will be necessary to successfully undertake and complete the training.
- Part 4 Is an addendum used to capture additional information required for school based apprenticeship and traineeship arrangements.
- Part 5 Is an addendum used to record the employer's endorsement of competence.

OBLIGATIONS AND UNDERTAKINGS

Registered Training Organisation (RTO) I, the undersigned, on behalf of the nominated RTO, confirm that:

- a. This Training Plan was developed in consultation with both the employer and apprentice/trainee.
- **b.** This Training Plan will be kept up to date and a copy regularly provided to parties.
- Formal training and assessment will be undertaken in accordance with the requirements outlined in the Apprenticeship and Traineeship Act 2001, Vocational Training Guideline – Training Plan, and relevant Vocational Training Order and Training Package.
- d. Regular updates will be provided to the employer and apprentice/trainee on the progress of training.
- e. Training Services NSW will be notified of any issues that may jeopardise the successful completion of the training within 21 days of the matter arising, including any failure by the employer to allow apprentice/trainee to participate in training.
- **f.** Employer endorsement that a learner is competent to industry standards in the vocation will be obtained BEFORE issuing a qualification for this apprentice/trainee.
- g. Training Services NSW will be notified within 28 days when the apprentice/trainee is eligible to be issued with the appropriate qualification.

RTO 1 Signature	Date	
Print Name	Position	
RTO 2 Signature	Date	
Print Name	Position	

Employer I, the undersigned, on behalf of the nominated employer, agree to:

- The employer responsibilities as outlined in this Training Plan.
- b. Provide work and on the job training consistent with formal training provided under this Training Plan.
- **c.** Provide this apprentice/trainee with the appropriate level of support and supervision.
- Withdraw my apprentice/trainee from routine work duties, with pay, for a minimum of 3 hours per week, averaged over a 4 weeks period, for the purpose of undertaking formal training/assessment.
- The RTO providing information to Training Services NSW as specified in (e) and (g) above.
- f. Report/confirm learner competence in the vocation to the RTO as appropriate.
- g. Information provided by the RTO in (f) above possibly being used to initiate competency based completion of the apprenticeship/traineeship.

Employer Signature	Date	
Print Name	Position	

Apprentice/Trainee I, the undersigned, agree that:

- a. I am aware of and agree to my responsibilities as outlined in this Training Plan.
- **b.** I will make every effort to successfully complete the training outlined in this Training Plan.
- The RTO may provide information to Training Services NSW as specified in (e) and (g) above.
- **d.** Information provided by the RTO in (g) above may be used to initiate competency based completion of the apprenticeship/traineeship.

Apprentice/Trainee	Date	

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1.1 Apprentic	ce/Trainee Pers	onal Det	ails				
Training Plan	New	Amen	ded [Date:			
TCID							
Given Name		Sui	name				
Date of Birth		Ge	nder	☐Male [Female	☐ Not spe	ecified
Street Address							
Suburb						State	
Postcode	Те	lephone		1	Mobile		
Email							
Aboriginal or Torres	Strait Islander origi	n?			Yes		
1.2 Training l	Details						
Contract Type	Apprentice	New E	ntrant Tra	ainee 🗌	Existing \	Worker Tra	ainee
	Full Time	☐ Part	Time	Hours per week			
Employment Type	School Based	☐ 50% SBA	model	SBAT HSC Year			
TC Start Date	тс	End Date		HEAP			Yes
Vocation Title						VTO ID	
Qualification Title							
Qualification Level		Na	tional Co	ode			
	Classroom b	ased	Elec	ctronic	Em	ployment l	pased
Mode of Delivery	Other e.g. c	orresponder	ice				
RTO Classroom							
Training Address (if applicable)		Sta	ite		Po	ostcode	
Funding Source	Fee for Serv	rice Gov	ernment	subsidised	Sch	ool sector	
Disability	Yes No	0 0	DAAWS			Yes	No

1.3				Emp	loye	er Detail	s			
Legal Name										
Trading Name								ABN		
Street Address										
Suburb					S	State			Poste	code
Contact Name	<u> </u>						Fax			
Phone					N	Mobile				
Email										
Workplace Training										
Address					s	State	NSW		Post	code
Name of workplace su	uperviso	ır						Contact No		
Host Employer	☐ Ye	es 🗌 No	Tra	ding N	Name		•			
Regulated Trades – Di Supervisor Name	irect		Lic No					lo		
1.4	į.	Registere	ed T	rain	ing (Organisa	ation (RTO)	1	
RTO Start Date				Г	Estim	ated RTO E	nd Date	9		
RTO Name										
Contact Name							Fax			
Phone					Mok	bile				
RTO National Code				Email	ı					
1.5	ŀ	Register	ed T	rain	ing (Organisa	ation (RTO)	2	
RTO Start Date					Estim	ated RTO E	End Date	e		

Mobile

Email

Fax

RTO Name

Contact Name

RTO National Code

Phone



PART 2

Apprentice/Tr	ainee's Name:		T	CID:				Ve	rsion I	No:		Date:			
RTO Contact:				l	Phone: Mobile:										
	Units of Competency				Formal	Training	g Deta	ails			As	ssessment Detai	s		
Unit Code	Unit Name	Unit Type *	RPL, RCC, CT Δ	Unit Training Start Date�	Unit Training End Date�	Training Modes #	SBAT HSC Prog	Responsibility for Training				Responsibility for Training		Employer confirmation of competencies (signature)	Date deemed competent by RTO

Legends

Legenas
* Unit type
C: Core
E: Elective

Δ Skills Recognition									
RPL	Recognition of Prior Learning								
RCC	Recognition of Current Competency								
ст	Credit Transfer								

# Training Modes								
1. Classroom	2. Employment based							
3. Electronic	4. Other							

Λ Λεσοσί	smont Mothods									
^ Assessment Methods										
Q	Questions (tests, interviews, case studies, questionnaires, self assessments etc)	wo	Workplace Observation (observed whilst doing job, set tasks, role play, scenarios or simulations)							
RP	Review of Products (samples of work, products etc)	P	Portfolios demonstrating experience (workplace documents, journal/log books etc)							
TPF	Third Party Feedback (testimonials, supervisor reports/interviews etc)	SA	Structured Activities (projects, presentations, activity sheets, off-the-job role play, scenarios or simulations etc)							

^{\$}Unit Training Start and End Date should indicate when formal training will be delivered in the identified competency, NOT the Training Contract start and end date.



PART 2

Apprentice/Tr	ainee's Name:			TCID:				٧	'ersior	No:		Date:							
RTO Contact:				l	Phone: Mobile:														
	Units of Competency				Formal	Training	g Deta	ails			As	ssessment Detail	S						
Unit Code	Unit Name	Unit Type *	RPL, RCC, CT Δ	Unit Training Start Date�	Unit Training End Date�	Training Modes #	SBAT HSC Prog	Trainin		Responsibility for Training		Training				Training		Employer confirmation of competencies (signature)	Date deemed competent by RTO

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Q	Questions (tests, interviews, case studies, questionnaires, self assessments etc)	lies, questionnaires, self WO doing		
RP	Review of Products (samples of work, products etc)	Р	Portfolios demonstrating experience (workplace documents, journal/log books etc)	
TPF	Third Party Feedback (testimonials, supervisor reports/interviews etc)	SA	Structured Activities (projects, presentations, activity sheets, off-the-job role play, scenarios or simulations etc)	

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Apprentice/Tr	rainee's Name:			TCID:				Ve	rsion	No:		Date:																						
RTO Contact:					Phone:			М	obile:																									
	Units of Competency				Formal	Training	g Deta	ails			Assessment Details																							
Unit Code	Unit Name	Unit Type *	RPL, RCC, CT Δ	Unit Training Start Date�	Unit Training End Date�	Training Modes #	SBAT HSC Prog	Responsibility for Training		Training		Training		Training		Training		HSC Tra		Trainin		g Tra		Trair		Training		Training		Training		Assessment Methods	Employer confirmation of competencies (signature)	Date deemed competent by RTO
								Emp	RTO 1	RTO 2																								

Legend

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* Unit type
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Δ Skills Recognition								
RPL	Recognition of Prior Learning							
RCC	Recognition of Current Competency							
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# Training Modes							
1. Classroom	2. Employment based						
3. Electronic	4. Other						

^ Assess	ment Methods				
Q	Questions (tests, interviews, case studies, questionnaires, self assessments etc)	questionnaires, self WO doing job, set tasks, role			
RP	Review of Products (samples of work, products etc)	Р	Portfolios demonstrating experience (workplace documents, journal/log books etc)		
TPF	Third Party Feedback (testimonials, supervisor reports/interviews etc)	SA	Structured Activities (projects, presentations, activity sheets, off-the-job role play, scenarios or simulations etc)		

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Apprentice/Tr	ainee's Name:			TCID:				Ve	rsion	No:	D	ate:			
RTO Contact:					Phone:			Мо	bile:						
	Units of Competency				Formal	Training	g Deta	ails			Assessment Details				
Unit Code	Unit Name	Unit Type *	RPL, RCC, CT Δ	Unit Training Start Date�	Unit Training End Date�	Training Modes #	SBAT HSC Prog	Training		Training			Assessment Methods	Employer confirmation of competencies (signature)	Date deemed competent by RTO

Legends

Legenus				
* Unit type				
C: Core				
E: Elective				

Δ Skills Recognition							
RPL	Recognition of Prior Learning						
RCC	Recognition of Current Competency						
СТ	Credit Transfer						

# Training Modes					
2. Employment based					
4. Other					

^ Assessment Methods						
Q	Questions (tests, interviews, case studies, questionnaires, self assessments etc)	wo	Workplace Observation (observed whilst doing job, set tasks, role play, scenarios or simulations)			
RP	Review of Products (samples of work, products etc)	Р	Portfolios demonstrating experience (workplace documents, journal/log books etc)			
TPF	Third Party Feedback (testimonials, supervisor reports/interviews etc)	SA	Structured Activities (projects, presentations, activity sheets, off-the-job role play, scenarios or simulations etc)			



Apprentice/Trainee's Name:		TCID:			
3.1	Workplace Support	3.2	On-The-Job Training		
What learning materials and resources will be provided to the apprentice or trainee by the RTO?		List the workplace facilities and equipment necessary to support the delivery of this training.			
Does the apprentice or trainee need additional support to achieve the qualification? If	YesNo	List the training materials or other resources provided to the employer to support onthe-job training and ensure its integration with the formal or structured training delivered by the RTO.			
yes, indicate the issue/s identified and what support and assistance will be provided?		Are the above facilities available in this workplace? If not, indicate alternative arrangements being put in place to address this issue.	Yes No		
Where the employer is identified as delivering formal training on behalf of the RTO, what training materials and other support will be provided to the employer by the RTO?		Does this workplace have the necessary range of work to support the on-the-job component of this training arrangement? If not, indicate alternative arrangements being put in place to address this issue.	Yes No		
Where the employer is providing evidence to support assessment of competency, what support and/or resources will be provided to the employer by the RTO to assist them in this process?		Does the apprentice or trainee have immediate access to appropriately experienced workplace supervisors? If not, indicate alternative arrangements being put in place to address this issue.	Yes No		

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Email Address

NSW Apprenticeship/Traineeship – Training Plan

Apprentice/Traine	e's Name				TCID				NESA number			
4.1	School Details				4.4		On-The-	Job Trainir	ng Days Requ	uired		
Name of School					Total Red	quired		Completed 7	To Date	То	tal Days Re	maining
School Suburb			State									
School Contact Nan	ne		Phone		Days during:	Year 10	Ve	ar 11	Year 12	Post	HSC	Total
School Contact Ema	il					Tear 10	10	ui II	TCUI 12	1 030	1150	Total
School Sector	Government	Catholic [Independent [Other (specify)	School Terms Holidays							
Operational Director Diocese	rate or				Total							
Operational Director Diocese Contact Na			Fax		4.5 Propos	ed Pattern	of On and	Off-The-Jo	b Training			
Phone		Mobile				MON	TUE	WED	THU	FRI	SAT	SUN
Email					Work							
					Formal Training							
	NSW Education Standards				School							
Details for all HSC V website at www.bc School based appre as outlined in the sy	prenticeships and traineeships mus ET courses (Industry Curriculum Fra pardofstudies.nsw.edu.au/voc_ed/ ntices and trainees undertaking a Hyllabus. ust be completed by October of the	ameworks and Bo	oard Endorsed Cou	rses) are provided o	4.6 We the undersigned	, have discuss		•	Agreement		Training Pla	n to suppo
NESA course name:					and deliver the requ NSW Guidelines at w	ww.sbatinnsv	<mark>info</mark> The Tra	aining Plan me	eets the require	ements for		•
NESA course number	er:				VET course(s) and th	e school base	d arrangemei	nt is endorsed	d by all parties b	elow.		
Has the Training Pla	nn been checked against HSC VET c	ourse(s) requirem	nents?	es 🗌 No	Employer						Date:	
	apprentice/trainee undertaking a Hatend to undertake the associated		tion? $\bigsqcup^{}$ ${\sqsubseteq}$		Apprentice/Trainee						Date:	
If ves. state the cale	endar year the student will sit the	HSC VET examina	□ N ation:	lo	RTO 1						Date:	
•					RTO 2						Date:	
4.3 ANP Name	Apprenticeship N	Network Provi	der (ANP)		School Representati	ve					Date:	
Suburb		State	ı	Postcode	Regional Representa	ative					Date:	
Contact Name					Parent/Caregiver						Date:	
Phone		Mobile										

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PART 5

EMPLOYER ENDORSEMENT OF COMPETENCE

IMPORTANT:

A registered training organisation (RTO) must obtain the employer's endorsement of an apprentice/trainee's competence to industry standards BEFORE they may issue the qualification.

Apprentice/trainee name	TCID	
Vocation Title	Qualification Title	
Employer Legal Name	Employer Trading Name	
Registered Training Organisation		

Employer endorsement of competence:

I, the undersigned, endorse that the above apprentice/trainee is competent to industry standards in the nominated

vocation. I understand that by providing this endorsement:

- ✓ I confirm my apprentice/trainee's competence and support the issue of the qualification by the RTO; and
- ✓ I may be obliged to pay a higher rate of pay as a result of the qualification being issued (check award requirements); and
- ✓ I and/or my apprentice/trainee can seek to complete the apprenticeship/traineeship <u>before the nominal completion</u> date **OR** continue in the apprenticeship/traineeship <u>up to the nominal completion date</u>.

Employer Representative:

Name:	Position:	Signature:	Date:

Note: Where an RTO has completed training and assessment (either in individual competencies or the whole qualification), but the employer disagrees with the RTO's assessment that the apprentice/trainee is competent, the employer and RTO should attempt to resolve their disagreement. If this cannot be resolved, the matter should be referred to Training Services NSW for advice and assistance.

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