

NSW Apprenticeship/Traineeship – Training Plan Proposal

☐ New ☐ Amended

Date:

Apprentice/Trainee Personal Details

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 Island 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)			
Suburb		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:	