

NSW School Based Apprenticeship Training Plan



Part A – Details

(Given names)

(Family)

1 Name of Apprentice

2 Date of Birth / / Student BOS Number Male Female

3 Apprentice Address
Suburb State Postcode

4 Legal Name of Employer

5 Trading Name of Employer

6 Employer Address
Suburb State Postcode

7 Employer Phone Fax Email

8 Employer Contact Name

9 Host Employer/s

10 Name of Australian Apprenticeship Centre

11 Contact Person Phone Fax

12 Name of Apprenticeship

13 Commencement Date of School Based Apprenticeship / / Commencement Date of Formal Training / / Expected Completion Date of Apprenticeship / /

14 Qualification Title
Level NTIS Code

15 Mode of Delivery (Tick relevant box) Classroom-based Electronic-based Employment-based Other delivery (e.g. correspondence)

16 Funding Information (Tick relevant boxes) Employer (fee for service) TAFE Public Funding (ATTP) contract TVET

17 RTO 1 (Issuing RTO) NTIS Code/s

18 Training Location Postcode

19 Contact

20 Telephone Fax

21 RTO 2 NTIS Code/s

22 Training Location

23 Contact

24 Telephone Fax

25 DAAWS DAAWS Application Pending DAAWS Approval Date / /

PART C – School Details

- 28 Name of school attending
- 29 Contact person Telephone
- 30 School Sector (Tick relevant box) Government Catholic Independent Australian Technical College
- 31 School Region or Diocese

PART D - Proposed pattern of training (HSC component)

- 32 Total formal training component
(must be completed by October of the HSC year)
- 33 Formal training component each school week
- 34 HSC VET course(s) to be studied for the HSC training component
- 35 Days on-the-job each school week or term
- 36 Days on-the-job during school vacations
- 37 Days on-the-job post HSC
(must be completed by 31 December following the HSC)
- 38 Please provide a description of the pattern of on- and off-the-job training
- 39 The employer is required to provide information about the apprentice's on the job training to support the RTO's assessment of the competency. Please list the work evidence booklets, competency checklists or other supporting documentation which will be supplied to the employer.

PART D - Proposed pattern of training (HSC component)

40 TAID

Training Agreement Identification number available from apprentice, employer, AAC or RTO web access page (www.det.nsw.edu.au/trainingmarket)

41 List key learning resources that will be provided to the apprentice

42 List the competencies for which recognition of current competencies will be/has been assessed (if applicable)

preferably indicating the name of the assessor for each competency

43 List the competencies for which credit transfer has been granted

(if applicable)

44 Is any additional support required to achieve the qualification (equity assistance payments)

please describe

45 List indicative monitoring dates per year of apprenticeship (at least four per year)

46 List indicative assessment dates per year of Apprenticeship (at least four per year):

- specify assessment milestones
- specify the name of the assessor if possible

47 What arrangements have been made for reporting back to the employer and apprentice

48 What indirect support arrangements have been made for the apprentice and employer from the RTO

PART E – Proposed pattern of training (post HSC component)

49	TAID		Training Agreement Identification number available from apprentice, employer, AAC or RTO web access page (www.det.nsw.edu.au/trainingmarket)
50	List key learning resources that will be provided to the apprentice		
51	List the competencies for which recognition of current competencies will be/has been assessed (if applicable) preferably indicating the name of the assessor for each competency		
52	List the competencies for which credit transfer has been granted (if applicable)		
53	Is any additional support required to achieve the qualification (equity assistance payments) (please describe)		
54	List indicative monitoring dates per year of apprenticeship (at least four per year)		
55	List indicative assessment dates per year of apprenticeship (at least four per year): <ul style="list-style-type: none"> • specify assessment milestones • specify the name of the assessor if possible 		
56	What arrangements have been made for reporting back to the employer and apprentice		
57	What indirect support arrangements have been made for the apprentice and employer from the RTO		

PART F – Signatures

ALL SIGNATORIES

I **certify that** to the best of my knowledge, the details entered by me and in relation to me on this form, are true and correct.

I **understand** that it is a serious offence to give false or misleading information.

I **understand** that under section 7 of the *Apprenticeship and Traineeship Act 2001* a Training Plan must be submitted with an application to establish a school based apprenticeship, and may not be varied without the consent of signatories to the Training Plan

I **understand** that the information provided in this form:

- is collected and is held by the Department of Education and Training and **will** be made available to the Department's officers for monitoring and auditing purposes
- is collected for the purposes of registration, preparing statistics, reporting, programme administration, monitoring and evaluation, calculating incentives and allowances paid to employers and apprentices, preventing dual payments
- is collected for the purpose of the Registered Training Organisation issuing a report on apprentice attendance and academic progress to their employer
- may be disclosed to and used for these purposes by the Australian Government, including the Department of Education, Employment and Workplace Relations, Centrelink, State/Territory government departments and agencies, employers, nominated Australian Apprenticeships Centres, Registered Training Organisations and the Contractors or Agents of these organisations, departments and agencies
- may otherwise be disclosed without consent where authorised or required by law.

58 Apprentice

I certify that the requirements of the Training Plan have been explained to me and that I have been provided with a copy.

I am committed to completing this apprenticeship and my HSC.

I consent to the RTO providing my employer with information on my progress in the training provided by the RTO.

I also consent to the Department of Education and Training providing my parent/ guardian with information on my progress in the training provided by the RTO and my progress in the apprenticeship provided by my employer (please cross out and initial if not applicable).

Signature

Printed name

Date / /

59 Parent/Caregiver

I certify that the requirements of the Training Plan have been explained to me and that I have been provided with a copy.

I am aware of the commitment required for my son/daughter/ward to undertake this school based apprenticeship and I support this application (signature only required if student is under 18).

Signature

Printed name

Date / /

60 RTO 1

The units of competency to be delivered by this RTO meet the requirements of the VTO and have been determined in consultation with the employer and apprentice.

Signature

Printed name

Date / /

61 RTO 2

The units of competency to be delivered by this RTO meet the requirements of the VTO and have been determined in consultation with the employer and apprentice

Signature

Printed name

Date / /

PART F – Signatures

- 62 **School principal / authorised school representative or nominated representative of an Australian Technical College**

I certify that this Training Plan can be packaged into appropriate HSC VET courses and that the school based apprenticeship commenced by the above named student is endorsed by the school as an integral part of the school program.

Signature

Printed name

Date / /

- 63 **Diocesan VET Advisor (for apprentices in Catholic schools) or Vocational Education Consultant (for apprentices in Departmental schools):**

Sector support is provided for the school based apprenticeship including delegation to State Training Centres, to enable payments to be made for the school based training component to approved training providers on behalf of the school sector.

Signature

Printed name

Date / /

- 64 **Employer**

I certify that the requirements of the Training Plan have been explained to me and that I have been provided with a copy.

I agree that the hours of work and training have been negotiated with the apprentice and are scheduled to allow him/her a fair and reasonable opportunity to complete the requirements of the HSC and the apprenticeship.

Signature

Printed name

Date / /

- 65 **AAC Stamp**

Date / /