

NSW Apprenticeship/Traineeship Training Plan – Summary

This Training Plan Summary will be used by the Department of Education and Training in its assessment of an application to establish an apprenticeship or traineeship

New TPS

Amended TPS



(For an Amended TPS, a tick in the check-box(es) below indicates amended data)

PART A – Details

(Given names)

(Family)

1 Name of Apprentice/Trainee

2 Date of Birth / / Sex Male Female

3 Apprentice/Trainee 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 Type of Arrangement (Tick the relevant box)
 Apprentice New Entrant Trainee Full-Time New Entrant Trainee Part-Time
 Existing Worker Trainee Full-Time Existing Worker Trainee Part-Time

10 Apprenticeship/Traineeship Name

11 Commencement Date of Apprenticeship/Traineeship / / Expected Completion Date of Apprenticeship/Traineeship / /

12 Qualification Title Level: NTIS Code:

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

14 Funding Information (Tick the relevant box)
 Employer (fee for service) TAFE Public Funding (ATTP) contract

15 Name of RTO NTIS Code:

16 Training Location (include postcode)
Campus/College(subject to availability), worksite Postcode:

17 RTO Telephone/Fax Phone: Fax:

18 DAAWS DAAWS Application pending DAAWS Approval Date / /

PART B - RTO Undertakings

I agree that:

- A full Training Plan will be developed, and a copy provided to the employer and apprentice/trainee within 6 weeks of commencement of training by the RTO for a term of up to and including 12 months, or within 12 weeks of commencement of training by the RTO for a term of more than 12 months. (Minimum requirements for a full Training Plan can be found at <http://apprenticeship.det.nsw.edu.au>)
- Recognition of Prior Learning and/or Recognition of Current Competency have been or will be undertaken in developing the full Training Plan.
- A Training Plan will be made available to the Department of Education and Training officers for monitoring and auditing purposes.

Date training is due to commence with RTO _____ NSW RTO ID _____

Signature _____ Name _____ Date _____

PART C – Signatures

Employer

I agree that the requirements of the Training Plan have been explained to me.

Signature _____ Date: ___/___/___

Apprentice/Trainee

I agree that the requirements of the Training Plan have been explained to me.

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

I 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/traineeship provided by my employer (please cross out and initial if not applicable).

Signature _____ Date: ___/___/___

PART D – AAC Stamp

Date: ___/___/___

Note: This Training Plan Summary must be lodged with an application to establish a full-time or part-time traineeship or a full-time apprenticeship. A full Training Plan must be lodged with an application to establish a school based part-time traineeship or a school based part-time apprenticeship.