

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.

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/negotiation 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 obligations and responsibilities as detailed 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 matter that may jeopardise the successful completion of the training within 21 days of the matter arising, including where the apprentice/trainee is not released to attend training or assessment by their employer.
- f. Employer endorsement that a learner is competent to industry standards in the <u>vocation</u> 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/Trainer's 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.
- . Provide appropriately qualified/experienced and accessible supervision for this apprentice/trainee.
- **d.** 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 activities.
- e. 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 (g) above possibly being used to initiate competency based completion of the apprenticeship/traineeship.

Employer's 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.
- c. The RTO may provide information to Training Services NSW as specified in (e) and (g) above.
- I. Information provided by the RTO in (g) above may be used to initiate competency based completion of the apprenticeship/traineeship.

Apprentice/Trainee Signature	Date	

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GOVERNMENT															
1.1 Apprenti	ce/Trainee P	ersonal D	Details					1.3		Emp	oyer Det	ails			
Training Plan	New		Amer	ided	Date:			Legal Name							
TCID								Trading Name					ABN		
Given Name			Surname					Street Address							
Date of Birth			Gender		Male		Female	Suburb			State			Postcode	
Street Address		L						Contact Name				Fax			
Suburb						State		Phone			Mobile				
Postcode		Telephone		М	lobile			Email							
Email								Workplace Training						1	
Aboriginal or Torre	s Strait Islander o	origin?			Yes			Address			State			Postcode	
								Name of workplace s	upervisor				Contact	No	
								Host Employer	Yes No	Trading N	ame				
1.2 Training l								Regulated Trades – D	irect Supervisor Na	ame			Lic N	0	
Contract Type	Apprent	ice N	New Entrant T	rainee	Existi	ing Wor	rker Trainee								
Employment	Full Time	Pa	rt Time Ho	ours per we	eek			1.4	Register		ng Organ			1	
Туре	Sc	hool Based	SB	A/T HSC Ye	ear			RTO Start Date		E	stimated RT	O End Da	te		
TC Start Date		TC End Dat	e	НЕ	EAP		Yes	RTO Name							
Vocation Title					VTO	ID		Contact Name				Fax			
Qualification Title								Phone			Mobile				
Qualification Level			National Co	de				RTO National Code		Email					
	Classroom	based	E	lectronic	Em	nployme	ent based	1.5	Register	ed Train	ng Organ	isation	(RTO)	2	
Mode of Delivery	Other e.g.	correspond	ence					RTO Start Date			stimated RT				
RTO Classroom								RTO Name							
Training Address (if applicable)			State		Post	tcode		Contact Name				Fax			
Funding Source	Fee for S	ervice	Governi	nent subsic	dised	Sc	chool sector	Phone			Mobile				
Disability	Yes	No	DAA	ws	Ye	es	No	RTO National Code		Email					



PART 2

Apprentice/T	rainee's Name:					Vers	ion No	o:		Date:							
RTO Contact:					Phone:					N	/lobile:						
	Units of Competency				Formal	Training	g Deta	ails			A	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	Responsibility for Training		Responsibility for						Employer confirmation of competencies (signature)	Date deemed competent by RTO
								Emp	RTO 1	RTO 2							

Legends

* Unit type
C: Core
E: Elective

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

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^ Assess	sment 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)

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



PART 2 - Cont'd

Apprentice/Tr	rainee's Name:				TCID:			Vers	ion No):		Date:	
RTO Contact:					Phone:						Mok	oile:	
	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		onsibilit Training RTO 1	5	Assessment Methods ^	Employer confirmation of competencies (signature)	Date deemed competent by RTO
		<u> </u>					<u> </u>						

Legends

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Δ Skills R	ecognition
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ст	Credit Transfer

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

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RTO Contact:					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		onsibilit Training RTO 1		Assessment Methods ^	Employer confirmation of competencies (signature)	Date deemed competent by RTO
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Apprentice/Tr	rainee's Name:	TCID:				Version No: Date:							
RTO Contact:				ĺ	Phone:		Mobile:						
	Units of Competency				Formal	Formal Training Details Assessment Details							S
Unit Code	Unit Name	Unit Type *	RPL, RCC, CT Δ	Unit Training Start Date�	Unit Training End Date�	Training Modes #	SBAT HSC Prog		onsibilit Training RTO 1		Assessment Methods ^	Employer confirmation of competencies (signature)	Date deemed competent by RTO
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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.



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?	sources will be provided to e apprentice or trainee by					
Does the apprentice or trainee need additional support to achieve the qualification? If	Yes No	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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Apprentice/Trainee's Name						
4.1	Sch	ool Details				
Name of School	301	looi Details				
School Suburb				State		
School Contact Name				Phone		
School Contact Email				riione		
SCHOOL CONTACT FINAN						
School Sector	Government	Catholic	Inde	ependent C	Other (specify)	
Operational Directorate or Diocese						
Operational Directorate or Diocese Contact Name				Fax		
Phone	·	Mobile				

4.2 NSW Education Standards Authority (NESA)

- All school based apprenticeships and traineeships must have a corresponding HSC VET course(s).
- Details for all HSC VET courses (<u>Industry Curriculum Frameworks</u> and <u>Board Endorsed Courses</u>) are provided on the NESA website at www.boardofstudies.nsw.edu.au/voc_ed/
- School based apprentices and trainees undertaking a HSC VET Framework course must address the HSC Content as outlined in the syllabus.
- HSC VET courses must be completed by October of the HSC year.

NESA course name:

NESA course number:

The Training Plan has been checked against HSC VET course(s) requirements?

Yes

No

For a school based apprentice/trainee undertaking a HSC VET framework course:

Yes

No

Does the student intend to undertake the associated HSC VET examination?

If yes, state the calendar year the student will sit the HSC VET examination:

4.3	Apprenticeship Network Provider (ANP)						
ANP Name							
Suburb		State		Postcode			
Contact Name							
Phone		Mobile					
Email Address							

4.4 On-The-Job Training Days Required										
Total Required			Completed To Date			Total Days Remaining				
Days during: Year 10			Year 11		Year 12		Post HSC		Total	
School Terms										
Holidays										
Total										
4.5 Propose	4.5 Proposed Pattern of On and Off-The-Job Training									
	MON	1	ΓUΕ	WED)	THU	FRI	SA	ΑT	SUN
Work										
Formal Training										
School										

Acceptance of Agreement

We the undersigned, have discussed, understand and are satisfied with the attached Training Plan to support and deliver the required training in accordance with the *School Based Apprenticeships and Traineeships in NSW Guidelines* at www.sbatinnsw.info. The Training Plan meets the requirements for the appropriate HSC VET course(s) and the school based arrangement is endorsed by all parties below.

Employer	Date
Apprentice/Trainee	Date
RTO 1	Date
RTO 2	Date
School Representative	Date
Regional Representative	Date
Parent/Caregiver	Date

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4.6