



Information on notice to terminate a training contract

Following the expiry of a training contract's probation period, an employer cannot just terminate a training contract with an apprentice* without the apprentice's consent. There is a legal process that must be followed and the training contract needs to be officially terminated.

The termination does not prevent the apprentice from entering into a new training contract.

When an apprentice consents to terminate the training contract, the attached form should be completed and returned to the Apprenticeship Office immediately.

The training contract record on the training record system will be administratively closed as of the date the form is processed by the Apprenticeship Office. Please do not submit the form until the termination has taken place.

Important information regarding the termination of a training contract

The employer or apprentice can notify the Apprenticeship Office of the termination of a training contract.

If the apprentice does not consent to terminate the training contract:

- do not complete the attached form; and
- contact the Apprenticeship Office immediately.

If both parties agree to terminate the training contract:

- complete the attached form ensuring both the employer and apprentice (and parent/guardian for apprentices under 18 years old) sign the form; and
- submit the completed form to the Apprenticeship Office.

Please note: it is important that no coercion takes place for either party to agree to the termination of a training contract.

If both parties agree to the termination of the training contract, but the employer is unable to obtain the apprentice's signature:

- the employer can complete and sign the attached form; and
- by signing this form the employer certifies that the apprentice (and parent/guardian where applicable) consented to the termination.

If both parties agree to the termination of the training contract, but the apprentice is not able to obtain the employer's signature:

- the apprentice is encouraged to speak to the employer before submitting the form to the Apprenticeship Office; and
- the apprentice can complete and sign the attached form.

Alternatives to terminating the training contract

There are other options if the training contract cannot continue, such as:

- assignment (transfer) – subject to approval, training contracts may be transferred to a new employer; or
- suspension – training contracts may be suspended for an agreed period of time, for reasons such as injury or illness.

If you wish to discuss possible alternatives please contact your Australian Apprenticeship Support Network provider on 13 38 73. Your AASN provider offers support throughout the life of the training contract to the parties and also provides job matching services.

If you have any concerns regarding termination, please contact the Apprenticeship Office on 13 19 54.

Please email this form to apprenticeshipoffice@dtwd.wa.gov.au.

**The term 'apprentice' covers apprentices, trainees, cadets and interns.*

Notice to terminate a training contract

Please read the information sheet before completing and submitting this form. If you have any questions or concerns, contact the Apprenticeship Office before signing this form. Email the completed form to apprenticeshipoffice@dtwd.wa.gov.au.

Apprentice's details		
Name:		
Address:	Suburb:	P/C:
Mobile:	Email:	

Employer's details		
Legal name:		
Trading name:		
Address:	Suburb:	P/C:
Contact person:	Contact no:	
Host employer (if applicable):		

By signing this form, I hereby certify that I have read and understood the information contained in the cover sheet and that the apprentice has consented to the termination of the training contract between the parties above.

I am aware that the record of the training contract will be administratively closed when this form has been processed by the Apprenticeship Office.

Apprentice's name: _____	Apprentice's signature: _____	Date: _____
<i>Please print</i>		
Employer representative's name: _____	Employer's signature: _____	Date: _____
<i>Please print</i>		
Guardian's name (required if apprentice under 18): _____	Guardian's signature: _____	Date: _____
<i>Please print</i>		

Please indicate the reason for mutual termination (for statistical purposes only)		
<input type="checkbox"/> Business Downturn	<input type="checkbox"/> Performance/progression issues	<input type="checkbox"/> Personal reasons/reasons unknown
<input type="checkbox"/> Career change/alternative employment	<input type="checkbox"/> Other, please specify:	

Apprenticeship Office
T: 13 19 54
E: apprenticeshipoffice@dtwd.wa.gov.au
W: dtwd.wa.gov.au/apprenticeshipoffice

Office use only	
Document: FT 2	TRS ID: