



Amendment of a registered training contract

Further Education and Training Act 2014

Examples of amendments to a registered training contract include changes to:

- the start date of the apprenticeship or traineeship (documentary proof of change required)
- employment mode – e.g. from part-time or school-based to full-time arrangements
- change of qualification to another in a different industry/training package
- change of qualification level – e.g. from Certificate II in Retail Operations to Certificate III in Retail Operations
- date of birth where it impacts on legislated age restrictions (documentary proof of change required)
- change of employer's legal name (**note:** please include details of the new legal name as per the ABR including the trustee names if a trust, physical and postal address, phone number, and name of contact person).

Amendment of the training contract will not take effect until a decision has been made by the Department of Education and Training (DET) or your Australian Apprenticeship Support Network provider.

IMPORTANT: All fields marked with an asterisk (*) **must** be completed. The parent's or guardian's signature is only required if the apprentice or trainee is under the age of 18 and it is appropriate (e.g. the apprentice or trainee is not living independently of the parent or guardian). The SRTTO's signature is only required if the change affects the training plan.

Notification of amendment		
*Training contract registration number:		This 9 digit number starting with 20 will appear on any documentation received from the department.
*We agree to the proposed amendment and we have been made aware of and understand any impacts this may have on wages and conditions. The proposed amendment has been discussed with the supervising registered training organisation (SRTTO).		
*Proposed amendment:		
*Proposed date of effect:		Relevant document(s) attached: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable
*Reason for amendment:		

Employer details			
*Trading name:		*ABN:	
Email:			
*Signature:		*Date:	

Apprentice or trainee details (and parent or guardian details if applicable and appropriate)			
*Name:			
Email:		Mobile:	
*Signature:		*Date:	
*Parent or guardian's name:			
Parent or guardian's email:		Mobile:	
*Signature:		*Date:	

Supervising registered training organisation (SRTTO) declaration. The SRTTO's signature is <u>only</u> required if change affects training plan.			
*We have discussed the proposed amendment with the employer and apprentice or trainee and support the application to amend. Where applicable, the training plan will be reviewed if the amendment is approved.			
*Name of SRTTO:		Phone number:	
*Name of authorised person signing for SRTTO:			
*Signature:		*Date:	

How to return this form

Please return the completed form to **Apprenticeship Support Australia** at: info@apprenticeshipscentre.com.au; or post to 140 Arthur Street, North Sydney, NSW, 2060; or fax 1300 650 755.