

PLEASE RETURN THE COMPLETED FORM TO
THE AUSTRALIAN APPRENTICESHIP CENTRE OF YOUR CHOICE

APPLICATION FOR APPROVAL TO VARY A TRAINING CONTRACT

By signing this form, you are agreeing to the variation of the training contract between the employer and the apprentice/trainee. If you do not agree, speak with your Australian Apprenticeship Centre (1800 639 629) or the Apprenticeship Enquiry Line (1300 722 603) of the Office of Training and Tertiary Education.

Please tick appropriate box and complete the detail requested

- Change of Qualification/Qualification Stream** **Date of Effect**...../...../.....
- Change of Date of Commencement in Same Training Package** (attach employer supporting documentation)
- Extension of Completion Date** (if more than six months attach copy of the revised training plan from the RTO)
- Change of Registered Training Organisation**
Enrolment Date with New Registered Training Organisation **Date**...../...../.....
- Change of Attendance Type**
(eg: School based - part time to full time) **Date of Effect**...../...../.....
- Change of Apprentice/Trainee name** (attach a copy of the marriage certificate or deed poll.)

Please provide details of the Training Contract you wish to vary.

A. The Training Contract currently states:

B. The Training Contract is to be varied to state:

C. Reason for change:

Registration Number.....

Apprentice Name.....
Print

Date of Birth...../...../.....

Signature.....

Date...../...../.....

Business Name.....
Print

Employer Representative.....
Print

Signature.....

Date...../...../.....

Parent/Guardian Name.....
(If apprentice is under 18 years of age) Print

Signature.....

Date...../...../.....