Training plan F18_02

Qualification:

Name of supervising registered training organisation:

Training officer:

Will any recognition of prior learning or credit transfer be sought for this training?
……...

Employer's name:

Person responsible for training and assessment at work:

Details:

Nominal length of training: …….. years (hours)

Date training will commence: …… / …… / 200….

Timeframes for progression through stages ……

Assessment methods and timeframes:

Throughout the training assessments will be conducted in a variety of ways including:

P – Practical : **W – Written** : **O – Observation of a task/activity**

These methods will be indicated against each competency on page 2 of this training plan. Timing of an assessment will be negotiated when the candidate believes he/she can achieve competency. Additional information about assessment methods is also outlined in the training record. Timeframes for training and assessment are given on the training plan as an estimation of the length of time it will take to achieve each competency. Assessment is conducted within this timeframe.

Language, literacy and numeracy and additional assistance:

Does the apprentice require any assistance for language, literacy or numeracy skills?

Yes No If yes, what additional assistance is required?

……..

Does the apprentice have any special needs that may require alternate training arrangements?

Yes No If yes, what additional needs are required?

……..

Training:

Throughout the nominated period, training and assessment will be provided by the trainer from …….. registered training organisation as well as the employer representative.

Monitoring progress throughout the training:

Throughout the training, the trainer from ……

will monitor your progress whilst at the ……..

Regular contact will also be made (in person and by phone) with the candidate and the employer to monitor progress.

At the workplace the employer is responsible for monitoring the candidates progress through the qualification. Feedback will be provided to The RTO

Dates training plan will be reviewed (6 monthly):

1st Review: …… / …… / 200…. 2nd Review: …… / …… / 200….

Signatures of parties to training plan:

Candidate: …….. Date: …… / …… / 200….

Employer: …… Date: …… / …… / 200….

The RTO: …….. Date: …… / …… / 200….

Disclaimer—The RTO is collecting the information on this form to monitor the progress of your candidate. This information is authorised by the *Vocational Education, Training and Employment Act 2000*. Your personal information will not be disclosed to any other third party without your consent, unless authorised or required by law, in accordance with the Information Privacy Principles.

Training plan

List of competencies/ modules codes and nominal hours	Description	Timeframe for training and assessment	Training details (where and how training will occur)	Training details (who will conduct training) • Registered training organisation trainer • Employer	Assessment details W - Written P - Practical O - Observation RPL Credit transfer	Assessor details (who will conduct the assessment)	Additional comments