



FACT SHEET/FORM

Extending a training contract

A training contract expires if it reaches the nominal term (refer to question 4 of the training contract) without the apprentice* having attained all the required competencies.

If the apprentice requires more time to complete their training, parties should extend the training contract. All parties should agree to extend the training contract before a request is made to the Apprenticeship Office. Only one party is required to give notice to the Apprenticeship Office.

An extension notice needs to be received by the Apprenticeship Office before the expiry date of the training contract. Extension notices received after a training contract has expired cannot be considered.

Extension period

In determining the length of extension required, the parties should consider the time it will take for the apprentice to achieve all of the on and off the job competencies.

Registered training organisations may assist in determining the appropriate time that may be required.

Submitting extension notices

The employer and/or apprentice (and the parent/guardian if applicable) can submit the variation via the Western Australian Apprenticeship Management System (WAAMS) online client portal at waamsportal.dtwd.wa.gov.au. WAAMS provides 24/7 online access to manage your training contact and submit changes. Where possible, change requests submitted via the WAAMS client portal will be instantly approved.

Alternatively, you can complete and sign the attached form before submitting it to the Apprenticeship Office at apprenticeshipoffice@dtwd.wa.gov.au with the required information.

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

Notice to extend a training contract

Please read the fact sheet before completing and returning this form. If you have any questions, contact the Apprenticeship Office before signing this form.

Email the completed form to apprenticeshipoffice@dtwd.wa.gov.au

Apprentice details		
Name:	Training contract ID:	
Address:	Suburb:	Postcode:
Mobile:	Email:	

Employer details		
Legal name:		
Trading name:		
Address:	Suburb:	Postcode:
Contact person:	Contact no:	
Host employer <i>(if applicable)</i> :		

Reason/s for extension <i>(for statistical purposes only)</i>

By signing this form, I confirm that I have read and understood the information on the fact sheet and confirm that all parties to the training contract have agreed to extend the training contract until the new expiry date stated below.	
New expiry date:	
<i>(Only one party is required to sign this form)</i>	
Apprentice signature:	Date:
Employer signature:	Date:
Parent/Guardian signature (if applicable):	Date:

Apprenticeship Office

T: 13 19 54

E: apprenticeshipoffice@dtwd.wa.gov.au

W: dtwd.wa.gov.au/apprenticeshipoffice