



Extension of probationary period of a registered training contract

This form has been specifically developed for use by parties to the training contract to apply to the Department of Trade, Employment and Training (DTET) or Apprentice Connect Australia Provider (Provider) to extend the probationary period of a registered training contract. Applications must be received by DTET or the Provider at least **14 days before the end of the probationary period**. Applications received after this time cannot be approved.

Extension of the probationary period of a registered training contract will not take effect until a decision has been made by DTET or the Provider.

Select your nominated Provider and return the completed and signed form (using a subject heading of 'Extension of probationary period') via email –

<input type="checkbox"/> Busy At Work amendments@busyatwork.com.au	<input type="checkbox"/> MEGT cpuqueriesqld@megt.com.au	<input type="checkbox"/> MAS National qlddelegations@masnational.com.au
<input type="checkbox"/> Apprenticeship Support Australia (ASA) info@apprenticeshipsupport.com.au	<input type="checkbox"/> ITEC apprenticeshipsinfo@qld.gov.au	

IMPORTANT: Failure to complete all details on this form may delay processing of this transaction.

TRAINING CONTRACT DETAILS			
Training contract registration number:		(This 9 digit number starting with 20 appears on all documentation from the department or your Provider.)	
Training contract commencement date:		Title of apprenticeship or traineeship:	
Apprentice Connect Australia Provider:			

APPRENTICE OR TRAINEE DETAILS			
Name:			
Postal address:			
Email:		Phone number:	

PARENT OR GUARDIAN DETAILS (if appropriate)			
Name:			
Postal address:			
Email:		Phone number:	

EMPLOYER DETAILS			
Trading name:		ABN:	
Postal address:			
Email:		Phone number:	

AMENDMENT DETAILS			
We wish to make an application to EXTEND the probationary period expiry date of our training contract. (Note: the probationary period can only be extended to a maximum of six months from the commencement date).			
AGREED NEW PROBATIONARY PERIOD EXPIRY DATE:			
Reason(s) for the requested extension:			
Apprentice or trainee's signature:		Date:	
Parent or guardian's signature:		Date:	
Name of authorised person signing for employer:			
Employer's signature:		Date:	

