

**Extension of nominal term of a registered training contract**

Where the nominal term of a training contract is due to end before the apprentice or trainee has completed the apprenticeship or traineeship, the employer, apprentice or trainee and supervising registered training organisation (SRTO) need to apply to extend the nominal term.

**Select your nominated Apprentice Connect Australia Provider (Provider) and return the completed and signed form (using a subject heading of 'Extension of Nominal Term') via email -**

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

**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.)	
Apprentice or trainee's full name:		Date of birth:	
Apprentice or trainee's email:			
Employer's trading name:		ABN:	
Employer's email:			

DETAILS OF EXTENSION			
We, the undersigned, agree to an extension of the registered training contract.			
AGREED NEW NOMINAL COMPLETION DATE:			
Reason(s) for the requested extension:			
Apprentice or trainee's signature:		Date:	
Parent or guardian's name: (if appropriate)		Phone number :	
Parent or guardian's email:			
Parent or guardian's signature:		Date:	
Name of authorised person signing for employer:			
Employer's signature:		Date:	
Name of SRTO:			
Name of authorised person signing for SRTO:		Phone number:	
SRTO's signature:		Date:	

