



Employer resource assessment – Apprentice/s (qual name): _____

TO BE COMPLETED AND RETAINED BY THE SUPERVISING REGISTERED TRAINING ORGANISATION FOR AUDIT PURPOSES

This form is made available to assist a supervising registered training organisation (SRTTO) to comply with their obligations under the *Further Education and Training Act 2014* (FET Act), and Skills Assure supplier (SAS) agreement where applicable.

The employer resource assessment (ERA) is an approved form under the FET Act. It is a report about an employer's capacity to provide or arrange to provide the range of work, facilities and supervision required under a training plan. A [guide for SRTTOs](#) has been developed to assist with completing the ERA.

Apprenticeships and traineeships are employment-based training pathways to obtaining a qualification or statement of attainment. It is essential the employment arrangements, including facilities, range of work and supervision, support the apprenticeship or traineeship outcome. When a registered training organisation agrees to become the SRTTO for an apprentice or trainee, the SRTTO must assess the employer's capacity to provide the facilities, range of work and supervision, and complete the ERA when preparing the training plan required for the apprenticeship or traineeship.

The FET Act requires the SRTTO to take all reasonable steps to ensure the training plan is signed:

- within 3 months of the start of the apprenticeship or traineeship, or
- within 28 days of a change of SRTTO or permanent transfer of the training contract.

Throughout the life of the training plan, the SRTTO has an ongoing role in monitoring the employment arrangements to ensure there are no changes which impact the employer's capacity to continue to provide the training. The ERA must be reviewed as a minimum every 3 months, which aligns with the process of reviewing the training record. However, changes to the training plan and/or the commencement of additional apprentices in the workplace in the same qualification will also require the SRTTO to review the ERA. Evidence of all reviews must be retained by the SRTTO. [Attachment 1](#) may be used to record details of ERA reviews.

If the employer is unable to provide, or arrange to provide the training resources necessary to achieve the outcomes of the training plan, and is unwilling/unable to negotiate alternative arrangements, the SRTTO **must not commit** to the training plan and **must immediately** advise the employer, the Apprentice Connect Australia Provider (Provider) and the Department of Trade, Employment and Training (DTET).

Where the employer is a GTO or PEO

In the case of a group training organisation (GTO) or principal employer organisation (PEO), the SRTTO is required to complete an ERA for the first host employer's workplace. For permanent transfers where the new employer is a GTO/PEO, an ERA is required to be completed for the first host employer. It is not a requirement to review the ERA at 3 monthly intervals for GTO/PEO contracts.

Privacy declaration

In completing this form, the SRTTO named confirms that where any personal information is included in the answers provided, the SRTTO:

- has taken all reasonable steps to be satisfied that the relevant person has provided their consent (either express or implied) to the SRTTO disclosing that information to DTET; or
- is satisfied that it is otherwise authorised or required under a law to disclose that information to DTET or the Provider.

For the purposes of this form, 'personal information' means information or an opinion, including information forming part of a database, whether true or not, and whether recorded in material form or not, about an individual whose identity is apparent, or can reasonably be ascertained from the information or opinion.





Employer resource assessment

WORKPLACE AND QUALIFICATION DETAILS	
Employer trading name:	
Host employer trading name: (GTO/PEO contracts only)	
Workplace where apprentice/s will be employed: (Site of employment where apprentice/s works. For mobile or multiple locations, use the main workplace or head office details AND clarify the workplace is varied.)	
Qualification name:	
Apprentice's name: (Note: Where there is more than 1 apprentice in the workplace, the SRT0 must complete APPENDIX TWO.)	
RANGE OF WORK (Note: Please attach additional information if there is insufficient space)	
Employers must be able to provide, or arrange to provide apprentices work tasks aligned to the qualification being undertaken. Note: The negotiation and establishment of the training plan requires the SRT0 to identify any units of competency where the workplace cannot provide suitably aligned tasks. The training plan specifies these units must be recorded in the ERA with the alternative arrangements for training and assessment.	
Units of competency from the training plan for which the employer is unable to provide aligned workplace tasks Detail the units and how the training and assessment will be undertaken by the SRT0 e.g. temporary placement, simulated assessment, group training.	
Unit of competency detail	How training and assessment will occur
WORKPLACE FACILITIES AND EQUIPMENT	
Is the employer capable of supplying adequate facilities and equipment in this workplace? <input type="checkbox"/> Yes <input type="checkbox"/> No (Must be completed)	
If not, provide details of the alternative arrangements being put in place to address this issue:	



**NUMBER OF APPRENTICES TO QUALIFIED PERSONS (SUPERVISORS)**

As part of the SRT0's responsibility to assess an employer's capacity to provide adequate training arrangements, the SRT0 is to determine if the apprentice's supervisor can:

- supervise other apprentices at a workplace where the apprenticeship is being completed; or
- **not** supervise any other apprentices at a workplace where the apprenticeship is being completed.

Where an SRT0 determines a supervisor can supervise other apprentices, they must justify how an employer is providing adequate supervision.

For the purposes of the training arrangements under the *Further Education and Training Act 2014*, a **qualified person** for apprenticeships is:

1. A person who has satisfactorily completed an apprenticeship in the apprentice's calling in Australia, and is the holder of a completion certificate issued under an Act, **or**
2. A person who holds a certificate of recognition issued under an Australian Act, certifying the person has the necessary skills and knowledge in the calling, **or**
3. An Australian tradesperson in the apprentice's calling, as defined under a specific industrial instrument, **or**
4. A New Zealand tradesperson in the apprentice's calling whose occupation may be recognised under the *Trans-Tasman Mutual Recognition (Queensland) Act 2003*, or as applicable for Norfolk Island, **or**
5. A person who holds a relevant qualification in the apprenticeship calling, **or**
6. A person individually, or persons collectively, who has/have documented competence (i.e. a testamur/qualification and associated record of results or a statement of attainment as recognised under the Australian Qualifications Framework, achieved through an RPL or training pathway) in all the competencies the employer is required to provide training for under the apprentice's training plan.

And, where a worker is required to have a licence to practise the calling/occupation, the qualified person holds a current worker's licence.

<u>Total number of full-time apprentices</u> in the identified qualification, in the workplace:	
<u>Total number of school-based or part-time apprentices</u> in the identified qualification, in the workplace:	
<u>Number of qualified persons</u> in the workplace that can provide training under the apprentice's training plan:	
Where there are more apprentices than qualified persons, provide a summary of why supervision arrangements have been determined sufficient and <u>complete APPENDIX ONE.</u>	





SUPERVISION OF TRAINING (Note: Please attach additional information if there is insufficient space.)			
List the appropriately qualified staff employed by the employer who will supervise the apprentice/s in the workplace. The apprentice/s must have immediate access to the appropriately qualified staff in the same workplace and predominately during the same working hours. If a copy of the supervisor's qualification is not made available to the SRT0, the SRT0 must document relevant experience and alignment to the definition of a qualified person.			
Name:		Qualification/certificate:	
If the qualification/certificate is not in the same calling/occupation as the apprenticeship please provide additional information to support the supervisory requirements, and provide details of how they demonstrate competence as per criterion 6 in the definition of a qualified person, listed on page 3.			
Name:		Qualification/certificate:	
If the qualification/certificate is not in the same calling/occupation as the apprenticeship please provide additional information to support the supervisory requirements, and provide details of how they demonstrate competence as per criterion 6 in the definition of a qualified person, listed on page 3.			
Name:		Qualification/certificate:	
If the qualification/certificate is not in the same calling/occupation as the apprenticeship please provide additional information to support the supervisory requirements, and provide details of how they demonstrate competence as per criterion 6 in the definition of a qualified person, listed on page 3.			
Name:		Qualification/certificate:	
If the qualification/certificate is not in the same calling/occupation as the apprenticeship please provide additional information to support the supervisory requirements, and provide details of how they demonstrate competence as per criterion 6 in the definition of a qualified person, listed on page 3.			
Name:		Qualification/certificate:	
If the qualification/certificate is not in the same calling/occupation as the apprenticeship please provide additional information to support the supervisory requirements, and provide details of how they demonstrate competence as per criterion 6 in the definition of a qualified person, listed on page 3.			



**Penalties apply for any false or misleading information provided to DTET.**

EMPLOYER DECLARATION			
I, the employer, declare that:			
<ul style="list-style-type: none">From the date of commencement of the training contract, I have provided, or arranged to provide, the apprentice with the facilities, range of work, supervision and training required under the apprentice's training plan.Should the circumstances change in relation to my ability to continue to provide, or arrange to provide, the apprentice with the facilities, range of work, supervision and/or training, I will advise the supervising registered training organisation.I understand any changes to the circumstances in relation to my ability to provide, or arrange to provide, the apprentice with the facilities, range of work, supervision and/or training may result in DTET cancelling the training contract.			
Employer's signature:		Date:	
Name of authorised person signing for the employer: (please print)			

SRTO DECLARATION				
I, the SRTO, declare that:				
<ul style="list-style-type: none">I have conducted a thorough and accurate assessment of the employer's facilities, range of work, supervision and ability to train the apprentice and have determined that the employer is able to provide, or arrange to provide, the facilities, range of work, supervision and training required under the apprentice's training plan.Where alternative arrangements regarding the range of work and/or facilities have been identified, these arrangements have been clearly identified in the apprentice's training plan.I understand that DTET will audit the process I conducted in assessing the employer's facilities, range of work, supervision and ability to train the apprentice.I understand where it is determined that there are issues with the evidence and/or process in relation to the assessment of the employer's facilities, range of work, supervision and/or ability to train the apprentice, recovery of funds and/or cancellation of the training contract may result.				
Name of SRTO:				
ERA completed via: (X all that apply)	<input type="checkbox"/> Workplace visit	<input type="checkbox"/> Phone or email	<input type="checkbox"/> Skype (or similar)	Other:
SRTO's signature:		Date:		
Name of authorised person signing for SRTO: (please print)				

APPRENTICE DECLARATION (Note: For additional apprentices complete APPENDIX TWO)			
I, the apprentice, declare that:			
<ul style="list-style-type: none">I understand the requirement to keep up to date with training, and that I need to have obtained a sufficient range of workplace experience prior to the completion of my apprenticeship.			
Name of apprentice:			
Apprentice's signature:		Date:	



This APPENDIX ONE is only required where there is more than 1 apprentice to a supervisor.

[illegible]

This **APPENDIX TWO** is only required where there is more than 1 apprentice in the workplace in the same qualification covered by this ERA.

(Note: Copy this page and attach to the ERA if there is insufficient space.)

APPRENTICE DECLARATION			
I, the apprentice, declare that I understand the requirement to keep up to date with training, and that I need to have obtained a sufficient range of workplace experience prior to the completion of my apprenticeship.			
Name of apprentice			
Apprentice's signature:		Date:	

APPRENTICE DECLARATION			
I, the apprentice, declare that I understand the requirement to keep up to date with training, and that I need to have obtained a sufficient range of workplace experience prior to the completion of my apprenticeship.			
Name of apprentice			
Apprentice's signature:		Date:	

APPRENTICE DECLARATION			
I, the apprentice, declare that I understand the requirement to keep up to date with training, and that I need to have obtained a sufficient range of workplace experience prior to the completion of my apprenticeship.			
Name of apprentice			
Apprentice's signature:		Date:	

APPRENTICE DECLARATION			
I, the apprentice, declare that I understand the requirement to keep up to date with training, and that I need to have obtained a sufficient range of workplace experience prior to the completion of my apprenticeship.			
Name of apprentice			
Apprentice's signature:		Date:	

Attachment 1

The following table may be used to record details of ERA reviews conducted by the SRT0

EMPLOYER WORKPLACE ARRANGEMENTS REVIEWED		
Date	Review method (e.g. phone, visit)	SRT0 representative