

Certificate IV in Training and Assessment registration form for employers of apprentices and trainees

Please complete the following information and return to your nominated registered training organisation.

Employer details			
Company name:			
Contact person:			
Phone number:			
Email address:			
Name of registered training organisation:			
Please identify the staff that will be accessing the training:			
Staff member name	Trade area of apprentice/trainee		
Total number of staff to undertake the Certificate IV Training and Assessment:			
Employer declaration			
<p><i>This declaration must be signed by an authorised person of the employer</i></p> <p>I understand that the Department of Education and Training will provide my nominated registered training organisation with a rebate, on my behalf, to cover the cost of the participant fees for the training of each of my staff listed above.</p> <p>I confirm that the named staff are specifically involved in the direct training and supervision of apprentices and/or trainees.</p>			
Name:		Position:	
Signature:		Date:	