



Important information regarding notice to suspend a training contract

The parties to a training contract may agree to suspend the contract for a period of time. If the parties wish to suspend the contract for a continuous period of over 12 months, they must first seek approval from the Apprenticeship Office.

Please note: this does not apply to employers suspending an apprentice* for engaging in alleged serious misconduct. For information on this matter, contact the Apprenticeship Office immediately on 13 19 54.

Written notice

If the parties agree to suspend a training contract, the employer must provide written notice to the Apprenticeship Office that the contract has been suspended within 21 days after **the date on which the parties agreed to the suspension** (this is not to be confused with the effective date of the suspension).

The written notice must include:

- the date on which the suspension takes effect;
- the period of suspension; and
- the date when the parties agreed to the suspension

Employers should use the attached '*Notice by parties to suspend a training contract*' form to notify the Apprenticeship Office that the contract has been suspended. Alternatively, employers may email the Apprenticeship Office with the information about the suspension, at apprenticeshipoffice@dtwd.wa.gov.au.

By signing the form, the employer verifies that all parties agree to suspend the training contract as per the details on the notice.

The period of suspension

A training contract suspension is for a defined period. Suspending the training contract ceases the training contract obligations for both the employer and the apprentice for the agreed period. At the conclusion of the suspension period, the training contract will resume.

Extending the training Contract

Suspension of a training contract does not change its expiry date. If the parties wish to extend the nominal duration of the training contract by the same period as the suspension, they should indicate so in the written notice. Extension requests received after the training contract expiry date cannot be considered

Cancelling the suspension

If the parties agree to cancel the suspension and the training contract resumes before the suspension period ends, the employer should provide written notice to the Apprenticeship Office stating that both parties agree to the cancellation of the suspension.

Alternatives to suspension by parties

There may be alternatives to suspending a training contract. Contact the Apprenticeship Office on 13 19 54 for more information.

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

Notice by parties to suspend a training contract

Please read the information sheet before completing and submitting this form. If you have any questions or concerns, contact the Apprenticeship Office before signing this form. Email the completed form to apprenticeshipoffice@dtwd.wa.gov.au.

Apprentice's details		
Name:	Training contract ID:	
Address:	Suburb:	PC:
Mobile:	Email:	
Employer's details		
Legal name:		
Trading name:		
Address:	Suburb:	PC:
Contact person:	Contact no:	
Email:		
Host employer (if applicable):		
Reasons for suspension of training contract		
Request to extend the training contract (refer to <i>Extending the Training Contract</i> on the information sheet)		
Indicate if the parties have agreed to extend the training contract by the same period as the suspension. Yes <input type="checkbox"/> No <input type="checkbox"/> (the current expiry date of the training contract remains)		
By signing this form, I hereby certify that I have read and understood the information on the information sheet and confirm that all parties to the training contract have agreed to suspend the training contract as per the details on this form.		
Suspension effective date: _____		
Suspension end date: _____ <i>(If the period of suspension agreed by parties exceeds a continuous period of 12 months, it is subject to Apprenticeship Office approval before the suspension can come into effect.)</i>		
Agreement date*: _____ <i>*The Agreement date is the date on which all parties agreed to the above mentioned suspension.</i>		
Employer representative's name:	Employer's signature:	Date:
_____	_____	_____
<i>Please print</i>		

Apprenticeship Office

T: 13 19 54

E: apprenticeshipoffice@dtwd.wa.gov.au

W: dtwd.wa.gov.au/apprenticeshipoffice