

FACT SHEET/FORM

Termination of a training contract during probation period

The probation period of a training contract begins on the commencement date stated in question 3 of the contract, and is either:

- · three months: or
- a period that is one-twelfth of the contract's nominal term (specified in question 4 of the contract).

The probation period, which needs to be a minimum of one month, provides an opportunity for the employer and the apprentice* to assess the apprentice's compatibility and suitability.

During the probation period either party can terminate the training contract.

Notifying the Apprenticeship Office of a termination in probation

The parties to the contract are required to notify the Apprenticeship Office after a training contract has been terminated in the probation period.

Parties to the contract can submit the termination notice via the Western Australian Apprenticeship Management System (WAAMS) online client portal at waamsportal.dtwd.wa.gov.au. WAAMS provides 24/7 online access to manage training contracts and submit changes. Where possible, change requests submitted via the WAAMS portal will be instantly approved.

Alternatively, you can complete and sign the attached form before submitting it to the Apprenticeship Office at apprenticeshipoffice@dtwd.wa.gov.au.

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

Application to terminate a training contract during probation period

Please read the fact sheet before completing and returning this form. If you have any questions, contact the Apprenticeship Office before signing this form.

Email the completed form to apprenticeshipoffice@dtwd.wa.gov.au.

Apprentice details			
Name:	Trai	Training contract ID:	
Address:	Suburb:	Postcode:	
Mobile:	Email:		
Employer details			
Legal name:			
Trading name:			
Address:	Suburb:	Postcode:	
Contact person:	Contact no:		
Host employer (if applicable):			
By signing this form, I confirm that I have read and understood the information on the fact sheet and that the termination occurred during the probation period of the training contract.			
(only one party is required to sign the	nis form)		
Apprentice signature:		Date:	
Employer signature:		Date:	
Parent/guardian signature: (if applicable)		Date:	

Apprenticeship Office

T: 13 19 54

E: apprenticeshipoffice@dtwd.wa.gov.au W: dtwd.wa.gov.au/apprenticeshipoffice

Version 10/5/18