Suspend a training contract

Application

About this form

By signing this form, you are agreeing to the suspension of the training contract between the employer and the apprentice.

A training contract between an employer and an apprentice may only be suspended:

* by mutual consent where both the apprentice and the employer agree to suspend the training contract; or
* the VRQA is of the opinion special circumstances make the suspension desirable.

If an employer cannot provide sufficient employment for an apprentice because of lack of business or financial difficulties the employer may make an application to the VRQA. The VRQA may make a decision to suspend or cancel the training contract after making necessary enquiries.

If an employer or an apprentice is unable to reach agreement about the suspension of a training contract a dispute should be raised with an Apprentice Connect Australia Provider or the VRQA. For more information, see:

* [Addressing problems and resolving disputes](http://www.vrqa.vic.gov.au/apprenticeships/Pages/addressing-problems-and-resolving-apprenticeship-disputes.aspx)

Once completed, please return this form to your Apprentice Connect Australia Provider. To find your provider, see:

* [Australian Apprenticeships](https://www.apprenticeships.gov.au/who-to-contact/search-for-a-provider)

This form must be signed by a director of the legal entity that employs the apprentice, or a person authorised to bind the legal entity.

Before you apply

For apprentices who are under 18 years of age, the parent/guardian will need to agree to the suspension of the training contract and is required to also sign this form.

Privacy notice

We will handle your personal information in accordance with the *Privacy and Data Protection Act 2014*. The VRQA collects and uses the information you provide in this form for the primary purpose of suspension of a training contract. In accordance with the *Education and Training Reform Act 2006* the VRQA may disclose information collected to various prescribed persons and bodies. The information may also be disclosed where otherwise authorised or required by law. Without the information in this form, we are unable to assess your application. You are able to request access to the personal information we hold about you under the *Freedom of Information Act 1982*, and request that it be corrected.

For more information see: [vrqa.vic.gov.au/vrqa-privacy-statement](https://www2.vrqa.vic.gov.au/vrqa-privacy-statement) Suspend a training contract

If you do not agree to the suspension of your training contract, do not sign this form.   
Call the VRQA on 1300 722 603 to discuss your options.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Reasons for suspension | | | | | | | | | | | | |
| illness  travel overseas  injury related to work  injury not related to work  parental leave  work shortage/financial difficulties (the employer must make an application to the VRQA) | | | | | | | | | | | | |
| Other, please explain: | | | | | | | | | | | | |
| **Suspension period** | | day | | month | | year | **to** | day | month | year | |
| Apprentice details | | | | | | | | | | | | |
| Full name |  | | | | | | | | | | | |
| Date of birth | day | | month | | year | | | | | | | |
| Registration number |  | | | | | | | | | | | |
| Telephone |  | | | | | | | | | | | |
| Email |  | | | | | | | | | | | |
| Employer details | | | | | | | | | | |  | |
| Legal entity name  (e.g. company) |  | | | | | | | | | | | |
| Trading name |  | | | | | | | | | | | |
| ABN |  | | | | | | | | | | | |
| Contact name |  | | | | | | | | | | | |
| Telephone |  | | | | | | | | | | | |
| Email |  | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Declaration | | | | | | | |
| We declare that the above information is true and correct. We agree that the information I have given in this form and any attached documents may be used and disclosed for the purposes outlined in the privacy statement.  We agree to suspend the above training contract. | | | | | | | |
| Employer (name of legal entity) | | |  | | | | |
| Director/authorised person name | | |  | | | | |
| Date | \_ \_ / \_ \_ / \_ \_ \_ \_ | | | Director/authorised person signature | |  | |
| Apprentice full name | |  | | | | | |
| Date | \_ \_ / \_ \_ / \_ \_ \_ \_ | | | Apprentice signature | |  | |
| Is the apprentice under 18 years of age? | | | |  | No |  | Yes, parent/guardian to sign below: |
| Parent/guardian name | |  | | | | | |
| Date | \_ \_ / \_ \_ / \_ \_ \_ \_ | | | Parent/guardian signature | |  | |