

Transition of qualification

This form is for use by supervising registered training organisations (SRTO) to notify when transitioning to a qualification because of an update to a national training package.

For a change of qualification which is not a transition, please use the ATF-035: Amendment of a registered training contract form.

SRTOs should expect the changes to take effect within two weeks from the date of submitting a fully completed form (and electronic spreadsheet if applicable). IMPORTANT: Failure to complete all details on this form may delay processing of this transaction.

Transition of qualification for one apprentice or trainee - An SRTO seeking to transition a qualification for only one apprentice or trainee, should complete SECTIONS 1, 2 AND 3.

Select your nominated Australian Apprenticeship Support Network (AASN) provider and return the completed and signed form via email. **ONLY** for single Transition applications.

Busy At Work	MEGT	MAS National	
amendments@busyatwork.com.au	cpuqueriesqld@megt.com.au	QLDDelegations@masexperience.com.au	
Apprenticeship Support Australia (ASA)	🗆 Sarina Russo		
info@apprenticeshipsupport.com.au	queensland@sarinarusso.com.au	apprenticeshipsinfo@qld.gov.au	

Transition of qualification for multiple apprentices or trainees - An SRTO seeking to transition a qualification for multiple apprentices or trainees should complete SECTIONS 1 AND 3.

An SRTO submitting the form must attach an electronic spreadsheet including (for each apprentice or trainee):

registration number date of birth

first name and family/surname employer.

For multiple apprentices and trainees, return this completed and signed form and electronic spreadsheet via email (using a subject heading of 'Transition of qual') to apprenticeshipsinfo@qld.gov.au

* DELTA Qual ID is available in QTIS under User Choice program funding details

SECTION 1: NOTIFICATION OF AMENDMENT									
Old qualification details	Code:		Name:						
	Code:		Name:						
New qualification details	*DELTA Qual ID:								
Effective date of transition to the new qualification:									
SECTION 2: APPRENTICE OR TRAINEE DETAILS									
Training contract registr number:	ation			tarting with 20 appears on all documentation from the Australian Apprenticeship Support Network provider.)					
Name:					Date of birth:				
Email:		1			Phone number:				
SECTION 3: SRTO DETAILS AND DECLARATION									
Name of SRTO:									
Name of authorised pers signing for SRTO:	on				Phone number:				
 By signing this document I declare that: I have fully informed all parties of the impacts, if any, the transition of qualification may have on the employer(s)/apprentice(s) and/or trainee(s) shown on this form or attached list. I will change the training plan to reflect the changed qualification title and/or code and any units of competency, and send a copy of the changed training plan to each employer and apprentice/trainee shown on this form or attached list within 14 days after making the change. For any school-based apprentice(s) and/or trainee(s) affected by this change, I will negotiate a new education, training and employment schedule with the parties and the school(s) if the changes impact upon the previously agreed arrangements. 									
Signature:					Date:				
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