



**ACT**  
Government

Chief Minister, Treasury and  
Economic Development

Skills Canberra  
GPO Box 158  
Canberra ACT 2601

## Interstate Training Application for Travel Support

### Australian Apprentice Details

Australian Apprentice No: \_\_\_\_\_  
Qualification: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Employer Details

Business/Company Name: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Work Address: \_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_

### Registered Training Organisation (RTO) Details

RTO Name: \_\_\_\_\_  
RTO Location/Campus: \_\_\_\_\_

#### RTO Declaration (this entire section MUST be completed by the RTO, not the student)

I verify that the above Australian Apprentice attended training on the dates listed below:

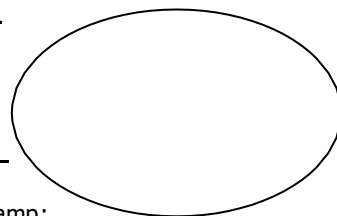
Trainer's Full Name (print clearly): \_\_\_\_\_

Signature: \_\_\_\_\_

RTO/Trainer email contact for any enquiries: \_\_\_\_\_

Date: \_\_\_\_\_

Official RTO Stamp:



Date of Travel (to & from Sydney/Wagga): To: \_\_\_\_\_ From: \_\_\_\_\_

Dates attended training: \_\_\_\_\_

#### Australian Apprentice Declaration

I declare that the above information is correct and confirm that I attended the structured (off-job) training detailed above.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### Office Use Only

Date Paid: \_\_\_\_/\_\_\_\_/\_\_\_\_

BR#: \_\_\_\_\_

Pre-Payment: YES / NO