



REGIONAL TRAINING FUND-WEST COAST REGION

Application form- Business Support – Existing Worker (Including sole traders and small business)

Please fill in all sections by typing or writing in **BLOCK LETTERS**

If you need assistance, please contact West Coast Council on: (03) 6471 4700 or email growthandchange@westcoast.tas.gov.au

Information requested in this form will assist the Education & Training Committee and Council in its funding approval decisions. **All information is confidential** and will only be used for the purposes of assessing your eligibility for training funding through this Regional Training Fund. The final decision regarding funding approval is held with the General Manager, West Coast Council.

1. EMPLOYER INFORMATION	
Name of Employer/Business Name and ABN	
Nominated Employer Contact	
Position	
Phone Number	
Primary Email	
Business Address	
If primary Business address is located outside of the West Coast Council region, please detail how your business provides products or services within the West Coast region and the staffing within the region to deliver this	
2. EMPLOYEE/S INFORMATION	
Number of current employees employed by your business within the West Coast region	
Number of existing employee/s within the region requiring training	
Number of new employees requiring training within the region	Number of Permanent employees <input type="checkbox"/> Number of part-time employees Number of casual employees Number of seasonal employees
Employment status- of existing and future employees requiring training within the region	If employee/s are to be seasonally employed, please advise the period of employment (current or new employees)

TRAINING NEEDS

3. A. What training do your existing and/or new employees need? Please detail Qualification/course/skills unit/certificate and their codes (if known). If unknown, please leave blank and refer to question 3B

3. B. Does your business require an interview to discuss and identify your employee/s training needs?

Yes

No, our business is in discussion with a Registered Training Organisation or other training centre

4. Why is this training important to your business? Your response could include improved product and/or process quality, increased efficiencies, business growth, expansion and/or sustainability, mandatory certification, licensing, seasonal workforce needs.

5. How has your business determined the need for this training? Example: Your response could include a strategic business plan or skills needs analysis or industry licensing requirement or business growth or new business venture

5.1 Has this training commenced?

Yes No No, however this training has been booked (please specify):

6. Please identify preferred training delivery

Online In-house Face to Face training

Combination of training delivery (please detail):

Please tick preferred training venue, if known:

- A) West Coast Study Hub
- B) Trades Training Centre
- C) Other venue (please state):
- D) Unsure

7. A. What support will you be providing to your existing staff/new employee/s to ensure they are able to participate in training? Your response could include: mentoring support, use of equipment or materials, transport to and from training

7. B. Please detail your business contribution towards the costs of training existing employee/s:

50% co-contribution for training for existing employee/s undertaking certified training

30% co-contribution for training for existing employee/s

Nil, contribution new employee

Nil, unable to contribute to training due to extenuating circumstances (please state:)

8. If successful, what times and days are most suitable for your employee/s to participate in training?

Business operating hours (please detail times and days)

Out of hours weekdays (please detail times and days)

Weekends (please detail times and days)

Other (please detail)

9. What are your success measures, i.e. how will you know if the training has achieved what your business wanted it to achieve?

10. Please identify if there are any additional needs required for your employee/s to participate in training. Examples may include the need for transport services; access to digital equipment (laptops/computers/mobile phone etc), childcare or carer support services, disability access, language literacy and numeracy or digital numeracy training/mentoring assistance, disability access requirements, or other needs relevant to being able to attend training to gain or maintain employment

11. Employee Detail

Employee/s name and position	Existing employee	New employee	List specific individual employee training needs Qualification/skill set program(s)/Certificates required (if known)	Cost of training (if known)	Employer/Business Contribution toward training costs	Total funding sought from RTF for employee training	Preferred training start date	Other needs/ comments
	Please indicate by ticking the relevant box below:				Please refer to separate cost calculator for Employer/business contribution			

By **signing** this form:

- I **confirm** that I have viewed the completed application.
- I **confirm** that the proposed qualification and/or skill sets, license or ticketing, the number of training places requested by the RTO, the program structure and duration reflects the needs of my organisation.
- I **agree** to support my employee/s, nominated for this program, to participate in the training as outlined in the training summary.
- I **agree** to my business contributing % as a co-contribution towards training.
- I **agree** to participate in a post-program evaluation.
- I **acknowledge** that the information I provide in this document supports the application only and may not result in approved funding.

Name/Position/Organisation

Signature

Date:

Optional: Please provide additional information you believe important to determine the approval of this application.

FEEDBACK: EASE OF APPLICATION

West Coast Council in partnership with the Education, Training Committee (ETC), supported by Skills Tasmania, remain committed to supporting the economic wellbeing of our community and local business and industries within the West Coast community. This Regional Training Fund has been developed to respond to the training and education needs within our region. Your feedback regarding this application form is valued. We appreciate the time taken to complete this form and to provide us with feedback.

Time take to complete the form:

This form was: easy to complete

not too difficult to complete

difficult to complete

required assistance to complete

Please return your completed application form to:

West Coast Council

PO Box 63 Queenstown Tasmania 7467

Or email your application to: growthandchange@westcoast.tas.gov.au