



Request for New Apprenticeship Programme

OFFICE USE ONLY

Date received:

Initial:

Employer Name:

Apprentice Name:

Industry:

Title of Apprenticeship:

Title and Level of Qualification:

Qualification Awarding Body:

PLEASE ATTACH COPIES OF COURSE INFORMATION/ FLYER ETC. OR LINK TO COURSE INFORMATION ON WEBSITE.

Name and address of College/Training Provider delivering the training:

Named Contact at College (if applicable):

Length of training course:

Cost per year of **course only** (please do not include any assessor visits/ flights/accommodation etc. on or off island in this cost):

Number of assessor visits and cost per visit (if applicable):

How is the training course delivered? This may include on-line assignments and reference materials to support learning; assessor visits; Skype/e-mail/telephone tutorials:

Have you applied to the training provider?

If you have already paid for the training please attach to this form confirmation of course costs and confirmation of payment.

Employer Support for the Apprentice

The learning environment in the workplace is vital to an apprentice's success – their apprenticeship is much more than the training they receive via a training/college course.

Learning in the workplace can involve creating opportunities such as: opportunities for your apprentice to experience other parts of the business; allowing them to complete a small research project during less busy periods; sending the apprentice to trade fairs or exhibitions; providing opportunities for your apprentice to experience in the workplace what they are studying at any particular time; setting aside a 'training/study time' and/or area for study.

Please explain the different ways in which you will support your apprentice's learning.

Will you provide an experienced/qualified member of staff as a mentor/trainer?

If **YES**, please give details:

Thank you for completing this form, please sign and date it and scan and return to a.charles@gov.je or by post to Angela Charles at the Trackers office. Please use the checklist below to ensure all documents are included with this form.

Employer Signature:

Date:

Checklist

- **Information on course and provider e.g. course information/flyer/link to course website.**
- **Confirmation of course costs (if training has already been paid for).**
- **Confirmation of payment (if training has already been paid for).**