



COMPANY ...

Dear Sir or Madam

I am pleased to advise that your application to establish an apprenticeship for JACKSON ALHOVIRTA has been approved. The details of the apprenticeship are:

TCID Number:
Name of appromiseship:
Qualification:
Registered Training Organisation:
Date of commencement:
*Term of apprenticeship:
Probationary period:
Full-term completion date:

*Note that while the term of the applenticeship is 4 years, provisions are now in place for the completion of the apprenticeship on the achievement of compound rather than time served. Following advice that Jackson has completed the qualification and with the agreement of the parties the apprenticeship may be completed at that stage.

The apprenticeship will become binding from the er a of the probationary period or from the date of this letter, whichever is the later.

For further information or assistance in relation to:

- State and Commonwealth government incentives
- learner and employer obligations under an apprenticeship, including your obligations to release Jackson to attend structured training and to notify the Department of any changes to the apprenticeship within 14 days
- varying the apprenticeship, including extending, cancelling, suspending, transferring or applying for competency-based completion

please visit the Training Services NSW website www.training.nsw.gov.au or con tact the Training Services NSW regional office detailed above.

I would like to offer my congratulations on the establishment of this apprenticeship and I wis I you every success in this arrangement.

Yours sincerely,

NAME and SIGNATURE

FOR THE COMMISSIONER FOR VOCATIONAL TRAINING