

## NSW Apprenticeship/Traineeship Training Plan – Full

### PART A - Details

1	Name of Apprentice/Trainee	Sotirios Kondoulis	Date of Birth:	11 /04 /78
2	Legal Name of Employer	First Choice Protective Coatings		
3	Trading Name of Employer	First Choice Protective Coatings		
4	Employer Address	Unit 1 / 1-3 Carnegie Place, Blacktown		
5	Employer Phone:	02 9671 4855	Fax:	02 9671 5044
			Email:	heather@graffitioff.com
6	Employer Contact Name:	Heather Paterson		
7	Type of Arrangement (Tick the relevant box)	<input type="checkbox"/> Apprentice <input checked="" type="checkbox"/> New Entrant Full-Time <input type="checkbox"/> New Entrant Part-Time <input type="checkbox"/> Part-Time School Based <input type="checkbox"/> Existing Worker Trainee Full-Time <input type="checkbox"/> Existing Worker Trainee Part-Time		
8	Name of Apprenticeship/Traineeship	Certificate II in Asset Maintenance (Cleaning Operations)		
9	Commencement Date of Apprenticeship/Traineeship	16/ 09 /02	Expected Completion Date of Apprenticeship/Traineeship	15/ 03 /02
10	Qualification Title	Certificate II in Asset Maintenance (Cleaning Operations)	Level:	AQF Certificate II
			NTIS Code:	PRM20198
11	Mode of Delivery (Tick the relevant box)	<input type="checkbox"/> Institution based <input checked="" type="checkbox"/> Distance Education <input type="checkbox"/> Flexible-work based <input type="checkbox"/> Enterprise-based		
12	Funding Information (Tick the relevant box)	<input type="checkbox"/> Employer (fee for service) <input type="checkbox"/> TAFE <input checked="" type="checkbox"/> Public Funding (ATTP) contract		
13	Name of RTO	JobQuest	NTIS Code:	90187
14	Training Location Campus/College(subject to availability),worksite	81 Henry Street, Penrith NSW 2750		

### PART B - Training Details

1 TAID   
 Training Agreement Identification Number available from trainee, employer, NAC or RTOweb access page ([www.det.nsw.edu.au/trainingmarket](http://www.det.nsw.edu.au/trainingmarket))

2 Trainee is Employed ☒ Full Time ☐ Part Time

3	<b>Which competencies will be undertaken to achieve the qualification:</b> (to ensure the competencies meet the requirements of the VTO and the relevant qualification) electives should be specified wherever possible, where electives cannot be specified, the range of electives from which the trainee/apprentice will choose should be listed. Sequencing of units of competency should be specified wherever possible	<div style="border: 1px solid black; padding: 2px;">         PRMCL33A Plan for safe and efficient cleaning activities          PRMCL34A Follow relevant OHS policies and procedures to ensure own safety and that of others          PRMCL35A Maintain a cleaning storage area            PRMCL01A Maintain hard floor surface          PRMCL04A Maintain soft floor          PRMCL09A Wash and squeegee glass surfaces to remove all visible dirt and grime          PRMCL10A Maintain ceiling surfaces and fittings          PRMCL11A Spot clean external surfaces to remove all visible dirt and grime          PRMCL15A Maintain furniture and fittings and dress an area or room          PRMCL17A Maintain wet area in an odour free, soil and hazard free condition       </div>
4	<b>List key learning resources which will be provided to the trainee/apprentice:</b>	<div style="border: 1px solid black; padding: 2px;">         Course notes and competencies required supplied to trainee on commencement of traineeship          Contact through telephone, fax, email and occasional visits       </div>
5	<b>List the competencies for which recognition of current competencies will be/has been assessed (if applicable):</b> preferably indicating the name of the assessor for each competency	N/A

6	List the competencies for which credit transfer has been granted (if applicable):	N/A
7	Is any additional support required to achieve the qualification (equity assistance payments): please describe	N/A
8	List indicative monitoring dates per year of apprenticeship/traineeship (at least four per year):	13/11/02 14/11/02 18/12/02 23/01/03 20/02/03
9	List indicative assessment dates per year of apprenticeship/traineeship (at least four per year): specifying assessment milestones specifying the name of the assessor if possible	18/11/02 PRMCL34A Follow relevant OHS policies and procedures to ensure own safety and that of others 25/11/02 PRMCL01A Maintain hard floor surface 02/12/02 PRMCL09A Wash and squeegee glass surfaces to remove all visible dirt and grime 09/12/02 PRMCL35A Maintain a cleaning storage area 16/12/02 PRMCL33A Plan for safe and efficient cleaning activities 23/12/02 PRMCL10A Maintain ceiling surfaces and fittings 13/01/03 PRMCL15A Maintain furniture and fittings and dress an area or room 20/01/03 PRMCL11A Spot clean external surfaces to remove all visible dirt and grime 03/02/03 PRMCL17A Maintain wet area in an odour free, soil and hazard free condition 24/02/02 PRMCL04A Maintain soft floor Assessor: Joe Beneduce
10	What arrangements have been made for reporting back to the employer and apprentice/trainee:	Quarterly report either in writing or in person, other reports upon request or as needs arise
11	What indirect support arrangements have been made for the apprentice/trainee and employer from the RTO:	Literacy, numeracy etc as warranted Available by telephone at all times

<p><b>Part C – Undertakings</b></p> <p><b>Employer</b> I have been provided with a copy of this Training Plan and I agree with the training requirements outlined in it.</p> <p>Signature_____ Date:_____</p>
<p><b>Apprentice/Trainee</b> I have been provided with a copy of this Training Plan.</p> <p>Signature_____ Date:_____</p>
<p><b>RTO</b> I have developed this Training Plan in consultation with the Employer and the Apprentice/Trainee and have provided them with a copy.</p> <p>Signature_____ Date:_____</p>

## NSW Apprenticeship/Traineeship Training Plan – Full

### PART A - Details

1	Name of Apprentice/Trainee	Damien James Rayner		Date of Birth:	31 / 07 / 75
2	Legal Name of Employer	First Choice Protective Coatings			
3	Trading Name of Employer	First Choice Protective Coatings			
4	Employer Address	Unit 1 / 1-3 Carnegie Place, Blacktown			
5	Employer Phone:	02 9671 4855	Fax:	02 9671 5044	Email: heather@graffitioff.com
6	Employer Contact Name:	Heather Paterson			
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