



An Australian Government Initiative

Training Pathways

CLAIM FOR INCENTIVE PAYMENT



“Financial Incentives to help train new employees”

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CLAIM FOR
INCENTIVES PAYMENT

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Director
High Level Skills Training Initiatives Section
Higher Skills Branch
Department of Education, Employment and Workplace Relations
GPO Box 9880
CANBERRA ACT 2601

1. Overview

The Training Pathways Program is an incentives program targeted at increasing the number of higher level Vocational Education and Training (VET) qualifications in the workforce to meet the future productivity and skills requirements of employers and industry.

Under the Program, Australian Government incentives are paid to employers whose employees train in priority higher level VET qualifications but who undertake their training outside Australian Apprenticeships arrangements.

The Program has also been extended to include six intermediate Certificate II and III qualifications within the building and construction industry. The Certificates were developed under the direction of the Council of Australian Governments.

The Department of Education, Employment and Workplace Relations (DEEWR) will initially restrict the number of employees in relation to whom an employer can register and claim incentives to a maximum of 100 employees undertaking training at any one time.

2. Incentives Available

2a. Commencement Incentive

Subject to both the employer and employee meeting the eligibility requirements outlined in the Training Pathways Program Guidelines:

- Eligible *Certificate III, Diploma and Advanced Diploma* qualifications will attract an incentive of \$1,500 (exempt from GST).
- Eligible *Certificate II* qualifications will attract an incentive of \$1,250 (exempt from GST).

2b. Incentives Available – Completion Incentive

- Subject to both the employer and employee meeting the eligibility requirements outlined in the Training Pathways Program Guidelines:
- Eligible *Certificate III, Diploma and Advanced Diploma* qualifications will attract an incentive of \$2,500 (exempt from GST).
- *Certificate II* qualifications do not attract a completion incentive.

3. When to claim

To qualify for incentives under *Training Pathways*, you (the employer) must first submit a completed *Application for Registration Form* and have it approved by DEEWR.

Copies of the *Application for Registration Form* as well as the *Training Pathways Program Guidelines* (the Guidelines) are available from the *Training Pathways* website: www.australianapprenticeships.gov.au/employer/training_pathways_program.asp.

You may submit this *Claim for Incentive Payment Form*, requesting payment of the Commencement Incentive, **only** after meeting the Criteria for Claiming the Commencement Incentive outlined in Section 4.3 of the Guidelines and after DEEWR has provided confirmation that your Application for Registration has been approved.

You may submit this Claim for Incentive Payment Form, requesting payment of the Completion Incentive, **only** after meeting the Criteria for Claiming the Completion Incentive outlined in Section 4.4 of the Guidelines.

4. Evidence (attachments) required before payment

You must attach the following evidence to this claim form:

- evidence that the employee for whom the incentive is being claimed remains employed with your business;
- evidence that you hold Workers Compensation Insurance for an amount required by the relevant State or Territory legislation;
- a copy of the confirmation of enrolment (or equivalent document), showing the employee has successfully enrolled in an approved qualification as defined in section 2.2 of the Guidelines which is directly related to the current or future work of the employee; and
- a letter from the training provider (on the training provider's letterhead) that the employee has been attending training. Alternatively, a representative of the training provider can complete the 'Training Provider Declaration' below.

Note: It is the employer's sole responsibility to attain the required documentation from the training provider.

5. How to claim

This claim form must be completed in hard copy.

The employer and the employee who is receiving training must complete and sign the attached form. This application form may be typed except for signatures. If filled out by hand, please write clearly, in block letters, and firmly with a ball point pen. Do not use correction fluid. Cross out any error and write the correct information above it and initial the change.

The completed claim form AND attachments must be sent to:

Training Pathways

High Level Skills Training Initiatives Section
Department of Education, Employment and Workplace Relations
GPO Box 9880, CANBERRA, ACT, 2601
Location Code: 730

Additional copies of this form are available from www.australianapprenticeships.gov.au/employer/training_pathways_program.asp.

6. Payments

Approved payments will be paid into the bank account details provided at the time of registration. Incentive payments will be paid by direct credit into the employer's bank account ONLY. Payments will be made within 30 days of DEEWR receiving a correctly completed claim form with required evidence attached, and where the employer has been assessed as eligible under the Guidelines. If the organisation's banking details have changed, please attach the new banking details to this claim form.

7. Privacy Notice

DEEWR has a firm commitment to privacy and all officers in DEEWR are subject to the *Privacy Act 1988*.

Personal information on this form (and any documentation you are required to attach to it) is used for the purposes of administering the Training Pathways Program, including approval of applications for Incentives payments.

DEEWR may give limited personal information about you to an organisation (e.g. other government departments and agencies, Australian Apprenticeships Centres) for the purposes of confirming Training Pathways Program eligibility and adherence to the Guidelines.

Personal information may be otherwise disclosed without consent where authorised or required by law.



Claims for Incentive Payment

Employer Details (to be completed by the employer)

*Registration Number:

*Trading/Legal Name(s):

*ABN / ACN:

*Contact Name:

Telephone Number: +

*Employee for whom the incentives is being claimed:

*Name of Training provider:

*Name of qualification enrolled in:

*Incentive being claimed: Commencement Incentive for Certificate II
 Commencement Incentive for Certificate III, Diploma or Advanced Diploma training
 Completion Incentive for Certificate III, Diploma or Advanced Diploma training

*denotes mandatory field

Employer Declaration

I, the below signed, declare:

The above details are true and correct;

I am an approved representative of the employer to make this declaration;

I am an approved representative of the employer able to make this declaration;

The employee for whom I am claiming the incentive is currently employed at this business as of the date of this claim;

I have provided the employee with paid time off or time off in lieu to attend the training;

The qualification remains directly related to this workplace and the employee's current or future duties;

I understand that if a payment is made to me, being a payment I am not eligible for, I may be required to repay that amount to the Australian Government; and

I understand that giving false or misleading information is a serious offence.

Name: Position/Title:

Signature: Date:

Employee Details (to be completed by the employee undertaking training)

*Full name:

*Full residential address:

*Full postal address:

Telephone (home): Telephone (business):

Email:

*denotes mandatory field

Employee Declaration

I, the below signed, declare:

I have enrolled and been attending training in the qualification at the registered training organisation as outlined by my employer above;

My employer has provided me with paid time off or time off in lieu to attend training;

I was employed by the employer claiming this incentive at the time of this claim;

This course remains directly related to my duties or future duties with my current employer; and

I understand that giving false or misleading information is a serious offence

Name:

Position/Title:

Signature:

Date:

Training Provider Declaration (see Section 4 above)

I, the below signed, declare:

I am an approved representative of (name of Registered Training Organisation) to make this declaration;

I confirm that (name of employee receiving training) is enrolled in the (name of qualification and NTIS code) and has satisfactorily attended training for, at least, three months since the commencement of his/her training.

I understand that giving false or misleading information is a serious offence.

Name:

Position/Title:

Signature:

Telephone Number:

Date: