## **HealthStar Training Network**



## Form 4.4 Training Plan Pro Forma

TRAINING PLAN						
Training details:						
Unit of competence:						
Course:						
Employer:		Ph:				
Employer address:						
Employer contact name:						
Employer contact role:						
Trainee name:						
Training commencement date:		Anticipated period of training:				
Arrangements for formal training (theory and practical):	Training Manager will schedule dedicated time for training to be conducted. The training manager will ensure all arrangements for the release of the trainee from the work unit.					
Arrangements for informal training (on-the-job):	Supervisors nominated in the trainee logbook will identify opportunities for informal training that will contribute to the trainee gaining the knowledge and skills set out in the scope of training as provided below.					
Primary locations for training:	<ul> <li>Theoretical training will be undertaken at participant's place of work.</li> <li>Practical and on-the-job training will be undertaken primarily at the participant's place of work.</li> </ul>					
Evidence methods:						
Supervision arrangements:						
Assessment arrangements:	The trainee will complete the scope of training and then a Registered Training Organisation will be engaged to:					
	1. evaluate the evidence of the training undertaken by the trainee;      and     2. undertake a theory and practical assessment of the trainee's     competence for the unit of competence.					
Equipment available:						
Literacy and numeracy support:	The training manager will assess the literacy and numeracy needs of the trainee within five days of the training commencing and record the support to be given in the logbook/training record book for action throughout the training.					
Other resources required:	To be provided by RTO: Assessments	• Training notes • Training	g Log Book •			
Nominal hours for formal tra	ining: hours	Nominal hours for informa	training: hours			

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Monitoring arrangements for delivery of training:		raining Manager will monitor progress of the training plan and the ds of training.			
Scope of Training:	•				
			To be delivered		
			by:		
Knowledge element:			Employer	RTO	
Skill elements:					
		<ul><li>n: I understand that the training I am undertaking we leave that I undertake the training under the supe</li></ul>		ite to	
		nd will complete the training log book for presentati			
assessment.		д р	,		
Trainee signature:		Date:			
		ng plan: I undertake, on behalf of the employer, that	_		
	vith this t	raining plan and that records will be retained to den	nonstrate t	he	
training provided.	atative:				
Name of employer represer		Data			
Signature of representative	•	Date:			