

NSW Department of Education and Communities
 Vocational Training Assistance Scheme (VTAS)
 APPLICATION FOR ALLOWANCE

VTAS is a program which provides **ELIGIBLE** (see back of form for eligibility) apprentices and trainees with monetary assistance to attend off-the-job training during the term of their apprenticeship/traineeship. Existing Worker Trainees are ineligible to claim VTAS.

Please **COMPLETE ALL SECTIONS** of this form **IN PEN (not pencil)**. All signatures, dates and stamps must be **ORIGINAL**. If this form is not completed correctly payment will be delayed as claims will be returned for completion.

CLAIMANT DETAILS: Apprenticeship/Traineeship Training Contract ID (TCID) No. _____

Surname _____ Given Names _____

Home Address _____

Postcode _____ Date of Birth _____

Home Phone _____ Mobile or Work Phone _____

Are you receiving Living Away From Home Allowance (LAFHA)? (Please Circle) Yes / No Address (if yes): _____

Employer's Name _____

Address where you work _____ Postcode _____

College _____ Course _____

Year of Apprenticeship (cross one box) 1 2 3 4

College Attendance: (cross one box) BLOCK attendance or SINGLE DAY Attendance

TEACHER MUST SIGN, DATE AND STAMP this section or your form will be returned.

First date of Block Or Single Day	Last date	No. of Days	Teacher Initial	TRAINING ORGANISATION DECLARATION	Official College Stamp
___/___/___	to ___/___/___	___	_____	I verify that the above Apprentice/Trainee attended college on the dates indicated and all unused date areas have been crossed out.	
___/___/___	to ___/___/___	___	_____		
___/___/___	to ___/___/___	___	_____		
___/___/___	to ___/___/___	___	_____		
			Teacher Name (please print)	Teacher Signature	Date

I need to travel on the _____ (Day) **before training** of each block and/ or on the _____ (Day) **after training**. *
 * **Please ensure an applicant Signed Statement has been submitted and approved for the calendar year.**

Total Distance travelled return _____ km per Trip Type of transport used (Please circle) CAR/ RAIL/ COACH/ PLANE
PLEASE NOTE: Only one return trip will be paid for each block. Also, if you live in the CityRail area, an applicant Signed Statement is required outlining the reasons for using private car travel and not using the Apprentice/Trainee Transport Concession Card. The Signed Statement must be renewed YEARLY.

LEARNER DECLARATION: (This MUST BE SIGNED or your form will be returned)

I _____ the undersigned, declare that I (cross one box) **TRAVEL DAILY** OR **STAY OVERNIGHT** during my College attendance, that the above information is correct and I am a currently registered Apprentice or Trainee.

(If applicable, please cross box)

I also stay on Weekends during my Block attendance.

Apprentice's/ Trainee's Signature _____ Date _____

OFFICE USE ONLY

Days _____ Trips _____ Distance _____ CLAIM TOTAL \$ _____

SEND ORIGINALS ONLY – FAXED OR COPIED FORMS WILL NOT BE ACCEPTED

Illawarra STC PO Box 469, Wollongong East NSW 2520 Ph (02) 4224 9300	New England STC PO Box 399, Tamworth NSW 2340 Ph (02) 6755 5099
Riverina STC PO Box 2304, Wagga Wagga NSW 2650 Ph (02) 6937 7600	Western NSW STC PO Box 53, Orange NSW 2800 Ph (02) 6392 8500
VTAS Information Line - 1300 533 470 VTAS Email Enquiries - vtas@det.nsw.edu.au	

Note: Assistance under VTAS is only available to **NSW registered** apprentices and new entrant trainees, **post trade** courses and **existing worker** trainees are **not** eligible. Apprentices and new entrant trainees who travel in excess of 120 km return (home address to college) to attend approved block release trade or off-the-job training courses and stay overnight, are paid an accommodation assistance of \$28.00 per night. In addition, or for single day attendance, **outside the CityRail postcode** area, a subsidy of 12c per km travelled is paid, regardless of the type of transport used. Apprentices or new entrant trainees within the CityRail area who do not use Government transport will need to provide an applicant Signed Statement yearly, outlining the reason why the travel is not by Government transport. For further information on VTAS, please refer to our website: www.training.nsw.gov.au/forms_documents/apprenticeships_traineeships/vtas_guidelines.pdf

Please **COMPLETE ALL QUESTIONS ON FRONT OF FORM** otherwise payment will be delayed as claims will be returned for completion.

Request for Direct Deposit of VTAS Payments

PLEASE NOTE: Only complete this section for your **FIRST** payment or if **CHANGING** your **Bank Account**

SAP Vendor No.: (*Office use only*) _____

(Please cross one box) This is a **First Payment** or **Change of Bank Account**

Please arrange all future payments to be deposited to the following bank account:
 (This **MUST** be the **APPRENTICE** or **TRAINEE'S** account)

Bank: _____	Apprentice/Trainee's
Branch: _____	Home address: _____
BSB: _____	_____
Account No: _____	Suburb: _____ Postcode: _____
Name of Account Holder: _____	Contact Phone Number: _____

Apprentice/Trainee's Signature: _____

Date: _____

Please send NOTIFICATION of payment as follows (tick one):

By Post **By Fax** _____ or **By email** _____

Certified correct under Sec 13 of the Public Finance and Audit Act.
 Entered in Voucher Register

Discount allowed _____	} _____ Processing Officer Signature
Marked off against Authority and/or Order _____	
Checked against Double payment _____	
Performance of service _____	
Rates of Charge _____	
Computations and castings _____	
Appropriations correct and funds available _____	