



Application
for Registration as a
Group Training Organisation
in Tasmania

Department of State Growth
Skills Tasmania

Legal name		ACN / ABN	
Trading name(s)		ABN(s)	
Head office address			
Tasmanian postal address (if other than head office)			
Tasmanian physical addresses (if other than head office)			
Other states / territories operating	<input type="checkbox"/> ACT	<input type="checkbox"/> NSW	<input type="checkbox"/> NT <input type="checkbox"/> Qld <input type="checkbox"/> SA <input type="checkbox"/> Vic <input type="checkbox"/> WA

CONTACTS			
CEO			
CEO phone (landline)		CEO phone (mobile)	
CEO email			
Contact (if not CEO)			
Contact position title			
Contact phone (landline)		Contact phone (mobile)	04
Contact email			

REGISTRATION HISTORY		
Previous or current GTO registration period	From	dd mmm yyyy
	To	dd mmm yyyy
Total period operating in Tasmania as a GTO	Registered	X Years X Months
	Unregistered, with ten (10) or less apprentices / trainees	X Years X Months

BUSINESS STRUCTURE	
Are you also:	
An RTO?	<input type="checkbox"/> Yes <input type="checkbox"/> No
An ANP?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Not for profit?	<input type="checkbox"/> Yes <input type="checkbox"/> No

CEO Initials: _____

COVERAGE	
Industries serviced / to be serviced	<input type="checkbox"/> All industries <input type="checkbox"/> Arts and Entertainment <input type="checkbox"/> Automotive <input type="checkbox"/> Building and Construction <input type="checkbox"/> Communications <input type="checkbox"/> Community Services and Health <input type="checkbox"/> Finance, Insurance and Business Services <input type="checkbox"/> Food Industry <input type="checkbox"/> Forest Industry <input type="checkbox"/> Furnishing, Light Manufacturing, Textile Clothing and Footwear <input type="checkbox"/> Manufacturing Engineering <input type="checkbox"/> Mining <input type="checkbox"/> Primary Industry <input type="checkbox"/> Process Manufacturing <input type="checkbox"/> Property Services <input type="checkbox"/> Public Sector Industry <input type="checkbox"/> Retail and Wholesale <input type="checkbox"/> Sport and Recreation <input type="checkbox"/> Tourism <input type="checkbox"/> Transport and Distribution <input type="checkbox"/> Utilities and Electrotechnology
Tasmanian regions serviced / to be serviced	<input type="checkbox"/> North West <input type="checkbox"/> North <input type="checkbox"/> South

DECLARATION	
<p>I certify that:</p> <ol style="list-style-type: none"> 1. I have read the Skills Tasmania Guide to Registration as a GTO in Tasmania, understand the requirements and the implications of breaching these requirements and believe that my GTO meets the requirements for registration in Tasmania. 2. The audit report completed by an external auditor using the approved template is attached and shows that my GTO is compliant with the <i>National Standards for Group Training Organisations</i>, the <i>Training and Workforce Development Act 2013</i> and the Tasmanian Traineeships and Apprenticeships Committee Guideline 15 – Tasmanian Operational Requirements for Group Training Organisations. 3. I understand that the Secretary of the Department of State Growth may request further information and documents considered relevant to my application for registration and may consideration of my application for registration until the required information and documents have been provided and are deemed to be sufficient to meet the requirements of registration. 4. I agree that my organisation will meet all costs for an external auditor to conduct an additional desk and/or site audit if it is determined by the Secretary of the Department of State Growth that this is required to assess the organisation's compliance against the National Standards, the Act or the Tasmanian Operational Requirements for Group Training Organisations. 	
Signature of CEO	
Date	

CEO Initials: _____