

**Travel and Accommodation Allowance Claim Form**  
Available for Apprentices / Trainees with a registered training contract in Tasmania.

**Submit form to:**

[travelclaims@skills.tas.gov.au](mailto:travelclaims@skills.tas.gov.au) **Phone:** (03) 6165 6055

or Skills Tasmania, GPO Box 536 HOBART TAS 7001

For more information see the Skills Tasmania website:

<https://www.skills.tas.gov.au/apprenticeshipstraineeships/incentives/allowances>

TCRN:

^ Training Contract Registration Number ^

CN:

Apprentice / Trainee Personal Details			
Full Name	<input type="text"/>	Date of birth:	<input type="text"/>
Home Address	Street <input type="text"/>	Suburb <input type="text"/>	Post code <input type="text"/>
Postal Address	<input type="checkbox"/> As Above or: <input type="text"/>		
Mobile Number	<input type="text"/>	Your employer:	<input type="text"/>
Your email address	<input type="text"/>		

Training Details		Qualification	
Training Organisation you are attending	<input type="text"/>	Training Organisation Location (Suburb/Town)	<input type="text"/>
This training period <b>Start Date</b>	<input type="text"/>	This training period <b>End Date</b>	<input type="text"/>

Enter the dates that you have/or will attend training (E.g. 25<sup>th</sup>, 26<sup>th</sup>)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

▶ Travel and accommodation allowances **must be claimed within 4 weeks of the training** and must be signed by the Registered Training Organisation representative.

**Accommodation Details – Fill this out if you are claiming accommodation while attending training**

Where did you stay

The first night you stayed  The last night you stayed

Apprentices and trainees may be eligible for an accommodation allowance where the distance is more than 40 km one-way from their suburb of residence to the closest applicable RTO if evidence can be provided that commercial accommodation was used by the apprentice or trainee.

**Your Bank Details** Bank:

▶ **Only provide your bank details if this is your first claim, or if your bank details have changed.**

BSB  -  Account Number

**Apprentice / Trainee Declaration:** I declare all information on this form to be true and correct. I understand that I am only entitled to receive allowances for days that I actually attend\* the registered training organisation. In the event I receive any allowances whilst I am not under a training contract or have not attended the registered training organisation, I agree to immediately repay any such payment/overpayment of allowances by refunding the additional amount to Skills Tasmania. \*exceptions may apply.

Signed: ..... Date: .....

**Registered Training Organisation Declaration** I have checked the details being claimed above and declare the information on this form represents the training activity being undertaken by this Apprentice / Trainee.

Signed: ..... Date: .....

Name ..... Phone .....