



FORM VT16 (January 2002)

Department of Education and Training
CANCELLATION OF APPRENTICESHIP or TRAINEESHIP BY CONSENT
Apprenticeship & Traineeship Act, 2001 Section 22

Application to Cancel an Apprenticeship or Traineeship
No. (T/A ID)

WHERE RELEVANT PLEASE COMPLETE ALL INFORMATION AS DETAILED IN YOUR TRAINING CONTRACT AND DELETE THE WORD APPRENTICE OR TRAINEE, AS APPROPRIATE, IN THIS FORM

We,
(apprentice/trainee – please print full name)

of
(address)

and
(employer - please print employer name as per the contract)

of
(address)

being the parties to a training contract in the vocation of:

.....
(name of apprenticeship/traineeship)

hereby mutually and voluntarily agree to the cancellation of the apprenticeship/traineeship with effect

from the.....day ofyear.....

- I certify that I have read and understood the information and instructions contained overleaf.
I understand that the Commissioner for Vocational Training will direct this cancellation to be effected 7 days from the date of lodgement of this form, unless either party notifies the Commissioner that they have withdrawn their consent to this cancellation.

Signed:

EmployerWitness
(Independent person)

Apprentice/TraineeWitness
(Independent person)

Date

REASON FOR CANCELLATION (for statistical purposes only)

.....
.....

Cancellation of an Apprenticeship or Traineeship by Consent is also known as mutual cancellation.
The original copy of this application should be sent to the nearest State Training Centre (see overleaf) for referral to the Commissioner for Vocational Training.
The employer and the apprentice or trainee, should retain a copy of this document.

