

EXT1 - Application for Extension of Course Accreditation

Applications for extension of course accreditation must be made in writing using this form.

Please note that if an application for reaccreditation is submitted at least three months before the existing course's expiry date, accreditation of the course continues automatically until the application is decided. There is no need to submit an application for extension of accreditation in this case.

SECTION 1: Course Details

Please complete a separate table for each course that requires an extension.

Code:		Title:	
Current expiry date:			
Period of extension sought:			
Summary of course outcomes:			
Target group for course:			

SECTION 2: Applicant Details

2.1. Copyright Owner

Legal Entity/Individual who owns copyright:	
Trading name:	
Provider number (if RTO):	

2.2. Contact Details

Name:	
Street address:	
Postal address: (if different from street)	
Telephone:	
Fax:	
Email address:	

SECTION 3: Reason(s) for Extension

Extension of course accreditation will be considered only in exceptional situations when it is not practicable to apply for course reaccreditation. Requests for extension due to lack of forward planning for the timely review and submission of a course for reaccreditation will not be considered.

Please select the reason for extension:

- Transition from an accredited course into a training package qualification – where the accredited course is due to expire shortly and there has been a delay with training package endorsement or, for public training providers, the release of a purchasing guide

Code/Title of Qualification:

Date of Publication on the National Register (training.gov.au)

- Licensing/regulatory requirements – where the accredited course leads to a licensed/regulated outcome and the related legislation is under review and expected to be finalised soon after the course expiry date

- Attach confirmation of review of legislation from licensing/regulatory body

- Other circumstances considered to be exceptional by the applicant. Please provide further information:

Course copyright owner must sign below:

Signature: _____ Date: _____

Print name: _____ Position: _____

Please forward your completed application by email to taccourseaccreditation@dtwd.wa.gov.au.

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