

## Notification of change of ownership/statutory transfer

This form has been developed to notify your Australian Apprenticeship Support Network (AASN) provider of any of the following changes to a business which employs an apprentice or trainee:

- sale or disposal of the business
- dissolution of the business partnership
- the purchaser of a business with an apprentice/trainee does not wish to continue the training contract/s (to take effect this advice must be received your AASN provider prior to the sale/disposal taking effect. This will result in the cancellation of the registered training contract only; it does not cancel employment obligations.)

### How to return this form

Please return the completed form to **BUSY At Work** at: [busy@busyatwork.com.au](mailto:busy@busyatwork.com.au). 13 BUSY (13 2879)

**IMPORTANT:** Failure to complete all details on this form may delay processing of this transaction.

#### Original employer declaration

Trading name: \_\_\_\_\_ ABN: \_\_\_\_\_

(Tick boxes as appropriate)

I/we advise that the business, which employed the attached apprentice(s) and/or trainee(s):

has been sold or disposed of. Date of sale or disposal of business: \_\_\_\_\_, or

has been dissolved. Date of effect of dissolution of partnership: \_\_\_\_\_

The business has been continued by  1 /  2 or more person/s who were partners in the dissolved partnership.

The business will not continue after the dissolution of the partnership

Name of person signing for original employer: \_\_\_\_\_ Phone no: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Details of new employer and agreement to continue training.

Legal name: \_\_\_\_\_

Trading name: \_\_\_\_\_ ABN: \_\_\_\_\_

Business address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone no: \_\_\_\_\_

Email address: \_\_\_\_\_

Total number of qualified persons in the apprentice or trainee's occupation: \_\_\_\_\_

Total number of apprentices or trainees: \_\_\_\_\_ Total number of employees: \_\_\_\_\_

Address where the apprentice(s) or trainee(s) will be employed: \_\_\_\_\_

I/we agree to continue to train the apprentice(s) and/or trainee(s) identified in this form, under the registered training contract(s). I/we also confirm that the above details are true and correct.

Name of authorised person signing for employer: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Purchaser does not want to continue the registered training contract arrangements.

Contact person: \_\_\_\_\_ Phone no: \_\_\_\_\_

I/we do not want the registered training contract/s to be transferred to me/us as part of the purchase arrangements. I am aware this advice will result in the cancellation of the registered training contract/s.

Name of authorised person signing for employer: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Apprentice or trainee details*****Name of apprentice or trainee 1**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Name of apprentice or trainee 2**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Name of apprentice or trainee 3**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Name of apprentice or trainee 4**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Name of apprentice or trainee 5**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Name of apprentice or trainee 6**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Name of apprentice or trainee 7**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Name of apprentice or trainee 8**

Training contract registration number: \_\_\_\_\_

Email: \_\_\_\_\_

(This 9 digit number starting with 20 will appear on any documentation relating to the training contract received from the department or Australian Apprenticeship Support Network provider.)

**Note:** Additional apprentices or trainees can be shown on an attached document