



## Structure Training Release Form (from Employer)

Student Details
Student Full Name:
Employer:
Qualification enrolled in:
Training commencement date:

Details of Structure Training
Training location:
Dates and times:

Release	
I give permission for this student to be released from normal work duties at the proposed dates and times to attend structured training. I understand that I must pay the trainee in accordance with the relevant modern award for time spent in structured training.	
Supervisor Full Name:	
Supervisor Signature:	Date: