Appendix 2



LIFELONG LEARNING SERVICES APPRENTICESHIP SCHEME APPRENTICE AGREEMENT

This agreement confirms that I, [INSERT NAME OF APPRENTICE HERE] (herein referred to as the Apprentice) have agreed to be engaged in an Apprenticeship with [INSERT NAME OF PROVIDER HERE], in accordance with the policy for the Apprenticeship Scheme. The Apprenticeship will be on Band [INSERT NUMBER/REF HERE], for the period commencing [DD September 2020 to DD September 2021].

The terms and conditions for the Apprenticeship are as stated in my Training Development Plan (TDP) attached. However, this TDP is subject to change upon agreement with the Work Development Coordinator and Training Providers if it is deemed that for unforeseen reasons, it no longer serves its purpose. I also understand that the following terms and conditions will apply:

I have read and understand the contents of the Apprenticeship Policy.

I will actively contribute to the Apprenticeship scheme and undertake the training, and the monitoring, as stated in the Training Development Plan. I understand that the duration of this apprenticeship is limited to 12 months only and that I should endeavour to complete the training in the times set in my TDP

I will comply with the Code of Conduct for Apprentices (given to me in writing) by the Work Development Coordinator, which includes fully complying with Health and Safety Procedures.

I will comply with all of the rules and procedures applicable to all places of training involved with this Apprenticeship including Prince Andrew School and the St Helena Community College (SHCC).

I understand that if I receive Personal Protective Equipment (PPE) and terminate my apprenticeship within 3 months of signing this agreement, I will be required to repay 50% of the full cost of the PPE that cannot be returned.

I will be responsible for the submission of my time booklet by the Thursday morning in the week before the last Friday of each month. I understand that failure to do so will result in a delay in the payment of my allowance and will be considered in the final assessment.

I understand that if I do not comply with the above mentioned terms and conditions I will be liable to be dismissed from the Apprenticeship Scheme.

I understand that should I successfully complete the Apprenticeship, and obtain the required standard, I will be awarded a certificate and be paid a bonus as set out in the Policy for Apprenticeship Scheme (Revised July 2020).

This agreement is made this [DD] Day of [MONTH] 2020.

Signed by the		
Apprentice:	 	

Signed by the Parent/Guardian:.....

Signed by the Workforce Development Coordinator:..... For and on behalf of the Lifelong Learning Services: Ms Cynthia Bennett

Lifelong Learning Services, Education Learning Centre, Education & Employment Directorate St Helena Government Tel No: + (290) 22607 Email: <u>cynthia.bennett@sainthelena.gov.sh</u> <u>http://www.sainthelena.gov.sh</u>