# Solid Futures agency application form 2025

**In completing this form you confirm your agency will:**

* second a trainee from February 2025, either:
* full time (at 75 hours per fortnight) for 12 months
* part time (at a minimum of 40 hours per fortnight) for 18 months
	+ provide culturally sensitive supervision, managing the performance and conduct of the trainee under your agency’s policies and procedures including:
* providing all required resources on commencement
* ensuring the trainee is provided with meaningful work to support the completion of a Certificate III in Government
* approving the trainee’s timesheets and leave forms
* meeting all costs above the trainee’s base salary
	+ advise the Commission at the earliest opportunity of anything that may impact the trainee’s ability to complete the traineeship
	+ seek to cancel the secondment arrangement only for:
* a breach of discipline
* substandard performance (failure to meet the requirements of the traineeship)
	+ acknowledge that cancelling the secondment will result in the termination of the traineeship and employment of the trainee
	+ support supervisors to build their cultural capability and attend Commission information sessions.

**The Commission will:**

* + deliver information sessions for supervisors
	+ provide advice and support to supervisors regarding trainee attendance, completion of the qualification and trainee cultural obligations
	+ provide advice and support to trainees regarding culturally sensitive issues
	+ pay the trainee salary through a quarterly recoup arrangement.

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|  Agency contact |
| Agency name |       |
| Contact name |       |
| Position title |       |
| Address |       |
| Telephone |       | **Email** |       |
| Signature  |       | **Date** |       |
| Has your agency previously hosted/supervised a trainee through this program?  | [ ]  Yes [ ]  NoIf *No,* what support does your agency have in place for the trainee?      If *Yes,* has your agency retained trainees in ongoing employment?       |
| Is your agency able to offer ongoing job opportunities for a trainee once they complete the traineeship? | [ ]  Yes [ ]  No [ ]  Yet to be determined If *No or Yet to be determined,* what prevents your agency from offering ongoing opportunities?[ ]  Budget constraints [ ]  Limited entry level opportunities [ ]  Other:        *It is desirable for agencies to offer ongoing opportunities.* |

Incomplete applications will still be considered, however having all details provided will assist in the allocation process of trainee/s to your agency.

**Location**

Name the location/s where trainee/s will undertake duties. Add more locations as required.

If you will have multiple supervisors, include their names and direct contact details against each location.

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| --- | --- |
| Location 1:  |       |
| **Number of trainees** | [ ]  1 [ ]  2 [ ]  3+  |
| **Address** |       |
| **Proposed supervisor** |       |
| **Position title and division** |       |
| **Email**  |       | **Telephone** |       |  |
| **Mentor/buddy (if possible)** |       |

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| Location 2:  |       |
| **Number of trainees** | [ ]  1 [ ]  2 [ ]  3+  |
| **Address** |       |
| **Proposed supervisor** |       |
| **Position title and division** |       |
| **Email**  |       | Telephone |       |  |
| **Mentor/buddy (if possible)** |       |

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| --- | --- |
| Location 3:  |       |
| **Number of trainees** | [ ]  1 [ ]  2 [ ]  3+  |
| **Address** |       |
| **Proposed supervisor** |       |
| **Position title and division** |       |
| **Email**  |       | Telephone |       |  |
| **Mentor/buddy (if possible)** |       |

Please note that all potential supervisors will be asked to complete a supervisor questionnaire before a suitable secondment arrangement can be confirmed.

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| Chief Human Resource Officer |
| Name |       |
| Email |       |
| Nominated contact responsible for the onboarding of the trainee  |       |
| Does your agency require any of the following checks to be in place before the trainee starts? | [ ]  Working with Children Check[ ]  National Police Clearance[ ]  Health Clearance[ ]  Other:      *The agency is responsible for liaising with the trainee to complete all internal agency screenings and checks as listed above.*  |
| Signature |        |
| Chief Financial Officer |
| Name |       |
| Email |       |
| Nominated contact responsible for the salary recoup arrangements  |       |
| Signature |        |
| Statement of commitment – Chief Executive Officer |

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| --- | --- |
| [ ]  | I endorse this application to participate in the Solid Futures Aboriginal Traineeship Program.  |
| **Name**  |       |
| **Signature** |       | **Date** |       |

Email this application to solidfutures@psc.wa.gov.au by
4November 2024.