#### Skills SA – Adult Community Education

##### **Funded Activities Agreement variation request form**

Approval for this request to vary an Adult Community Education Funded Activities Annexure is at the Minister’s sole discretion.   
The outcome of this request will be notified in writing. All variations must be signed for a variation to be valid.

**FAA Organisation Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **FAA Number: JF -** \_\_\_\_\_\_\_\_\_\_\_\_

Level 1 – non-accredited training project  Level 2 – accredited training project

1. **The organisation is requesting a variation to:**

Training place numbers  Courses to be delivered

National Foundation Skills Training Package (FSK)  Milestone dates

Units to be delivered  Other

1. **Please list the section of the FAA that you are requesting to change and to what. (If you are requesting to deliver a new course, please provide details of the course in question 5).**

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1. **Please outline the reason for the variation and impacts of the variation not being approved. (If you are requesting to deliver a new course, please provide details of the course in question 5).**

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1. **Training place numbers**

Proposed new training place numbers (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_

1. **New courses to be delivered (if applicable) - please outline the units to be delivered and any impact on training place numbers.**

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1. **Where applicable, have the proposed changes have been discussed with your accredited training provider?**  Yes  No

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| --- | --- | --- |
| **Accredited training provider’s endorsement of variation:** | | |
| Yes  No | | |
| Reason for not endorsing the variation: | | |
| Name of endorsing RTO officer: | |  |
| Signature: |  | |

|  |  |  |
| --- | --- | --- |
| Name and Position of Officer Requesting Variation |  | |
| Officer signature |  | Date: |

**Course Delivery Plan**

Complete this delivery plan template for the proposed variation to your project.   
If you are requesting to vary multiple courses in your project, please complete a separate line in the table below for each different course.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | **B** | **C** | **D** | **E** | **F** | **G** | **H** | **I** |
| **Course Number** | **Course name** | **Units of Competency** | **New or existing course?** | **Number of participants in a class** | **Training start date** | **Training finish date** | **Number of times this course will be delivered** | **Total participants**  (Columns E x H) |
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