

## Application to become an approved provider of health and safety representative training

An asterisk indicates a mandatory field. Your application may be invalid if mandatory fields are not completed.

Part 1 – Details of the training provider			
Registered business name: *			
ABN: *		RTO registration number (if applicable)	
States/Territories in which training is currently delivered (for an RTO, states in which it is approved to deliver training)			
Applicant name: *			
Business address:			
City:		State:	
Postcode:			
Part 2 – Authorised Officer (e.g. CEO or equivalent)			
Prefix: *		First name: *	
Surname: *		Position title:	
Email:		Contact number:	
Business address:			
City:		State:	Choose an item.
Postcode:			
Part 3 – Type of application			
Type of application: *			
Part 4 – Nominated trainer details			
You must provide details and attach evidence of skills, experience and qualifications of each nominated trainer (you will require at least one nominated trainer). Evidence of qualifications should include copies of certificates,			

transcripts or statements of attainment. Evidence of experience should include written references or a letter from an employer.

If you are seeking approval of more than two nominated trainers, please include this information on a separate page attached to your application.

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Nominated trainer one:			
Prefix: *		First name: *	
Surname: *		Contact number: *	
Qualification(s)	: *		
Experience: *			

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Nominated trainer two:			
Prefix:		First name:	
Surname:		Contact number:	
Qualification(s):			
Experience:			

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Part 5 – Notifications			
The training provider agrees to notify the OIR within 14 days in the following circum	nstances: *		
Any changes to the details of the approved training provider.	Yes □		
Any changes to the nominated trainers delivering the HSR training.	Yes □		
Any proposed substantial changes to course content or delivery method.	Yes □		
Any material status changes required to be notified to the Australian Skills     Quality Authority (ASQA), or another WHS Regulator that has approved the     training provider for delivery of HSR training.	Yes □		
If the training provider's RTO registration or approval to deliver HSR training is suspended, cancelled or amended in any way by ASQA and/or a State Training Authority or another WHS Regulator that has approved the training provider for delivery of HSR training.	Yes □		
Part 6 – Conditions of approval			
The training provider agrees to adhere to the following conditions: *			
Possess, have access to and retain the administration resources and infrastructure necessary to comply with all general and specific conditions of approval	Yes		
Deliver the training in accordance with a training and assessment strategy approved by the OIR	Yes □		
Ensure trainers have and maintain requisite qualifications, skills and knowledge	Yes □		
Deliver training in accordance with harmonised HSR training key principles	Yes □		
Not sub-contract or on-sell its approved provider status	Yes □		
Ensure evaluation is undertaken of courses and a training evaluation form is provided to each participant	Yes □		
Issue a certificate to those who complete the course within 10 working days of completion, unless exceptional circumstances apply	Yes □		
Issue a replacement certificate of satisfactory completion, if required, on request	Yes 🗆		
Verify all applicants' identity with photo ID and record their details and date of training	Yes □		
Co-operate with the OIR in any audits or compliance checks	Yes 🗆		
Report annually to the OIR on the matters specified by it	Yes □		
Conduct itself in accordance with reasonable standards of professional and ethical behaviour	Yes 🗆		
Comply with relevant legislation when conducting the training, including Work Health and Safety, copyright and privacy laws	Yes 🗆		
Maintain records specified by the OIR for seven years	Yes □		
Comply with any other specific requirement that the OIR specifies as a condition of approval	Yes □		



Part 7 – Documentation				
The	application must inclu	de the following documentation: *		
•	A completed and signed application form			Yes
•	_	strategy that complies with the requirem and safety representatives training prov		Yes □
•	All relevant learning materials required for delivery, aligned with the training and assessment strategy (including, at a minimum, a PowerPoint presentation or similar and learner guides/textbooks)			Yes □
•	Evidence of trainers' q	ualifications and experience		Yes
•	Evidence of any appro wish the OIR to have r	val of HSR training from other WHS regulegard to	ators that you	Yes ☐ Not applicable ☐
•	(If the applicant does not have approval to deliver WHS training in other jurisdiction/s) A matrix setting out how the proposed training delivers the learning objectives, outcomes and expected learner application contained in Annex 1 of the OIR Guideline – Health and safety representatives training providers			Yes □ Not applicable □
•	<ul> <li>(If the applicant has approval to deliver WHS training in other jurisdiction/s)</li> <li>Evidence of how the items contained in section 5.1 of the OIR Guideline –</li> <li>Health and safety representatives training providers have been contextualised to the offshore renewable energy sector</li> </ul>			Yes □ Not applicable □
•	(If the application is for refresher training) Evidence of how the course content reflects the expectations for refresher training contained in section 5.4 of the OIR Guideline – Health and safety representatives training providers		Yes □ Not applicable □	
•	Proposed marketing and enrolment information where the OIR would be mentioned and where reference is made to the legislative entitlement of HSRs to training		Yes □	
Pai	rt 8 – Declaration			
199	95. In making this applic	ng information to a Commonwealth entity ation I hereby declare that the informatio listed above will be adhered to.		
1	:horised Officer nature: *		Date: *	
Part 9 – Privacy statement				
OIR is committed to protecting your privacy and personal information. Any information submitted by you will be handled in accordance with the Australian Privacy Principles under the <i>Privacy Act 1988</i> .  By providing information to support your application, you agree that: *				
•	<ul> <li>Collection and use of information: The information provided will be used solely for the purpose of assessing your eligibility to become an approved provider</li> </ul>		Yes	
•	Security of information: Your information will be securely stored and protected from unauthorised access, alteration, or misuse		d and	Yes □
•	Access to information: You may request access to the personal information held about you and request corrections if necessary		information	Yes □



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•	Retention of information: The information provided will be retained for the duration of your approval status. In the event that your approval is revoked or you voluntarily withdraw, your information will be securely disposed of in accordance with applicable retention policies	Yes
•	Disclosure of information: The information may be disclosed to relevant regulatory bodies, such as ASQA, ComCare, or other authorities, as required by law or to verify the accuracy of the information provided	Yes
Part 10 – Next steps		
Completed forms and associated documentation should be submitted to: offshorerenewables@oir.gov.au.  The OIR will consider the application in accordance with its Assessment policy.  The OIR will invoice training providers once an application has been considered, in accordance with its  Regulatory fees and levies policy. The amount of the fee will be the lesser of \$5,500 or the total amount of the expenses incurred by the OIR in assessing the application.		