

Food and Fibre Industry Skills Board, trading as Primary ITO. This Training Agreement is a formal agreement between the Employee (Learner), the Employer, and Primary ITO.

⚠ No Twink or correction fluid is to be used on the document.

## Learner to complete

### 1. Learner details

1a First name

Middle name/s

Surname

Preferred name

Previous legal name(s)

Date of birth (dd/mm/yyyy)

1b Gender (as per ID)  Male  Female

### 2. Contact details

2a Mobile

Work phone

Home phone

Email

2b Preferred contact method - choose one

Mobile  Work  Home  Text  Email  Any

2c Postal address (so we can send resources etc. to this address)

Street

Suburb

City/Town

Postcode

### 3. Ethnicity

3a  NZ European  NZ Māori  Pacific Islander  
 Other   Prefer not to say

3b If NZ Māori, what is the name(s) of your iwi?

Don't know  Prefer not to say

### 4. Residency and identification

4a Please indicate your residency or citizenship status and provide the supporting document(s).

Country of citizenship

New Zealand citizen - please provide **one** of the following:

- Passport
- New Zealand birth certificate
- New Zealand certificate of citizenship
- Verified NSI record  NSN (if known)

New Zealand resident - please provide **both**:

Passport  Residency visa

Australian citizen

Passport

Australian resident - please provide **both**:

Passport  Residency visa

Work Visa holder - please provide **both**:

Passport  Work visa

4b Learner is under 16 years old

MOE exemption number

### 5. Education details

5a What was the last high school you attended?

Name of high school

Country of high school

Last year at high school (yyyy)

5b What is your highest qualification you achieved at school?

- No formal secondary school qualification
- 14 or more credits at any level
- NCEA Level 1/School Certificate
- NCEA Level 2/Sixth Form Certificate
- NCEA Level 3/Bursary scholarship
- University Entrance
- Overseas qualification
- Not known

5c What year did you start tertiary education?

(for example, University, Polytechnic, Te Wānanga o Aotearoa, Industry Training Organisation/ Independent Training Provider, or overseas equivalent)

First year of tertiary education (yyyy)

## 6. Learner Support

The information you provide is collected for statistical purposes to help us understand our learners and make education more accessible.

**6a English is my second language** Yes No

**6b Do you need support while learning with Primary ITO?**

Your response helps us inform you about the available assistance. Please select the support you need (multiple options allowed):

Access to assistive technology (for example, for reading, writing, communication)

Accessible format resources for course content

Mobility and transport (for example, navigator support to help movement around campus, mobility carparks, personal emergency evacuation plan)

New Zealand Sign Language Interpreter

Support with reading, writing, and communicating in learning sessions, exams, and assessments

Other learning or disability support

No, I do not need support at this time

**6c Do you describe yourself as disabled, deaf, neurodiverse, tāngata whaikaha māori, or living with a long-term physical or mental health condition?**

Yes No Prefer not to say

## 7. Employment details

**7a What is your current job title?**

**7b Employment type**

Employee

Volunteer

Self Employed Contractor [1]

Self Employed Owner-operator [1]

[1] TEC will fund self-employed contractors as part of a tri-partite agreement where the employer is from the organisation they are contracted to; whereas a self-employed owner-operator will not be part of a tri-partite and will require a TAG addendum outlining training support and pastoral care requirements to be eligible for TEC funding.

**7c Employment status**

Full time Part time Seasonal Casual

**7d What was your employment status as at 01 October?**

Select one option only:

Wage or Salary Earner	College of Education Student
Self-employed	Secondary School Student
Non-employed/Beneficiary	Polytechnic Student
House-person	Wānanga Student
Retired	Private Training Student
Overseas	University Student

## Employer to complete

**Employer/Company name** (registered business name)

Primary ITO number (If known) ORG-

**Workplace/Site name** (Learner's main work location)

Primary ITO number (If known) ORG-

⚠ Please complete **Section 8** and **Section 9** if:

- This is your first time enrolling an employee with Primary ITO under this company or workplace, **OR**
- Any of the details changed since the last enrolment.

## 8. Employer details

No change [Go to \[ 9a \]](#) New / updated [Add below](#)

**8a Employer/Company address**

**8b Primary Contact**

Name

Phone

Email

**8c Is Primary Contact's address same as in [ 8a ] ?**

Yes [Go to \[ 9a \]](#) No [Add / update below](#)

## 9. Workplace/site details

**9a Workplace/site physical address**

No change [Go to \[ 9b \]](#) New / updated [Add below](#)

**9b Is Primary Contact at Workplace same person as in [8b]?**

Yes [Go to \[ 9c \]](#) No [Add / update below](#)

Name

Phone

Email

Address

**9c Additional information**

Dairy supplier (for dairy farms only)

Supply number

Learner's Employee number (If known)



## Office use only

### 14. Industry and occupation

**14a** Industry sector

**14b** Industry sub-sector

**14c** Occupation Code (to be completed by CSE)

For help search Primary ITO Knowledgebase guide on Occupations:  
**He Kete > Knowledgebase > Technical Directives > Occupations**

### 15. Assessor

**15a** Does this programme require an Assessor Connection in Trellis?

No Yes

### 16. Course enrolment

**16a** Do you require the Enrolments team to complete a course enrolment?

No Yes

Course name

Course code

### 17. Verifier

**17a** Is a Verifier required for this programme enrolment?

Yes No

**17b** If yes, is the Verifier the same as the Workplace Primary contact [ 9b ]?

Yes No

Full name

Phone

Email

### 18. Primary ITO signature

Name

Signature

Date (dd/mm/yyyy)