



RTO-Net APPLICATION FORM

Please complete sections 1 to 4, providing personal and contact details in full.
Either fax to (08) 6551 5307 or email to ict.servicedesk@dtwd.wa.gov.au
An email confirming the approval of this request will be sent to the person identified in section 4.

1. User Details:

FirstName

Surname

EmailAddress

(This must be a named email address - generic email address will not be accepted)

Contact No.

NTIS ID No

ABN:

LegalName

TradingName

2. Access Required:

New Account

Modify Existing Account

Standard (Registration and Curriculum)

or

Contract (Standard access plus Contract details)

or

Contract & Financial (Standard and Contract access plus Financial details)

Apprentice & Trainee Details (TRS-RTO Normal)

TRS is no longer available through STARS. You will need to email apprenticeshipoffice.projects@dtwd.wa.gov.au for WAAMS access

Travel & Accommodation Allowance (RTO Claim Manager)

While TRS is not available,

(For RTOs who arrange and pay air travel for apprentices to attend training) Claim Manager is still active and access can be requested

TERMS AND CONDITIONS OF USE:

- No account sharing is allowed. Each user must have their own account. Reasonable precautions must be taken to avoid unauthorised access or password disclosure.
- The user is responsible for all work performed under the user's account.
- RTO-Net must only be used for performing official duties within the user's job definition.
- The information on RTO-Net is **confidential and must not be disclosed to unauthorised parties**. Reasonable precautions must be taken to maintain confidentiality and prevent accidental disclosure.
- Should this account no longer be needed you **MUST** complete an RTO/TRS-Net Exit form.
- Any other changes affecting the use of RTO-Net must be communicated to the Business Owner. Accounts not used for 6 months, email notification will be sent. After 7 months the account will be disabled.

3. Declaration:

I have read and understood the above Terms and Conditions of Use and understand that the Department of Training and Workforce Development has the right to remove my privilege of access if it deems that my use of the system is in breach of any of the Terms and Conditions of Use.

User Signature: _____ Date: _____

4. Organisation's Legally Responsible Officer (LRO)/Registration Contact Approval:

Name: _____ Signature: _____

Email: _____ Date: _____