

# Industry training plan template

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Last updated: February 2014

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An industry training plan describes the details of the training to be offered in order to issue industry-specific certificates. The plan also describes how the training programme fits into the organisation and who is responsible for its management and oversight.

You will need to sign and date your plan before submitting it to Maritime New Zealand for approval along with your industry-training application form.

## About this template

This template has the following sections:

1. Contact details
2. Overview of the organisation
3. Training framework
4. Vessel details
5. Certificates to be issued to trainees
6. Declaration

This is a Maritime Document. The holder of the approval to issue industry-specific certificates must be a fit and proper person. You will need to complete the fit and proper person form and send it to Maritime New Zealand with your application.

# Industry training plan for

Full name of applicant  
(person or legal entity  
applying for approval to  
issue industry-specific  
certificates)

Eg Tim Jones, Northland  
Regional Council, Coastguard  
New Zealand

# 1. Contact details

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Give the details of the contact people within your organisation for this application for approval to issue industry-specific certificates.

## Main contact person for this industry training plan application

Name	<input type="text"/>	<input type="text"/>
	Given name(s)	Surname
Contact address	<input type="text"/>	
Email address	<input type="text"/>	
Contact numbers	<input type="text"/>	<input type="text"/>
	Day time phone	After hours phone
	<input type="text"/>	<input type="text"/>
	Mobile phone	Fax

## Person responsible for managing the organisation (if different from above)

Name	<input type="text"/>	<input type="text"/>
	Given name(s)	Surname
Contact address	<input type="text"/>	
Email address	<input type="text"/>	
Contact numbers	<input type="text"/>	<input type="text"/>
	Day time phone	After hours phone
	<input type="text"/>	<input type="text"/>
	Mobile phone	Fax

## 2. Overview of the organisation

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Describe the purpose of the organisation and the type of training to be provided.

Include details about when the work is carried out (eg during business hours, night operations) and an indication of the number of hours it takes over a 12 month period. Provide a description of the geographical area of the maritime operation of the organisation and operating area(s) that apply.

Describe how the training programme fits into the organisation and who is responsible for its management and oversight.

### 3. Training framework

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Your training framework needs to include the following information. You can complete each section here or attach a copy of your training framework to this application.

#### Industry-specific certificate course details

Give the title of the industry-specific certificate(s) you will be issuing.

List the duties to be performed by the holder of the industry-specific certificate.

Briefly describe the training you will provide to enable the holder to undertake these duties. For example vessel-specific safety training.

List the risks involved in the operation of any vessel to which the industry-specific certificate relates. Include any health and safety and environmental risks. For example crossing river bars.

Describe the training that will be given to enable applicants to recognise and avoid or respond to each risk identified above.

## Trainer(s)

Give the name(s) of the individual(s) that will be delivering the training. List the relevant qualifications and nautical, instruction/teaching and assessment experience for each individual. You may choose to attach a copy of their CV which includes this information.

Name	Experience and qualifications

Outline how you will ensure the trainer(s) maintain their level of proficiency.

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## Training

Describe how the training will be given to applicants for the industry-specific certificate.

- (a) Which parts of the training will be classroom based and which parts will be carried out on board a vessel?

- (b) What is the length of time for the delivery of each lesson? Will any of the training be undertaken in darkness?

- (c) How will the applicants be assessed?

Outline the training schedule.



## Trainee requirements

List the minimum number of hours of boating experience required for the granting of the industry-specific certificate.

List the medical and eyesight standards that will be required of the holder of the industry-specific certificate. For example, a current certificate of medical fitness.

What existing experience and qualifications of a trainee would be equivalent to this training?

Outline how certificate holder(s) can maintain their level of proficiency. For example, a refresher course of three hours is available.

## 4. Vessel details

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Provide the details below for the vessel(s) in your organisation that will be used as part of this training plan.

As a minimum, include the vessel name, the type of vessel it is (eg work boat, RIB), its overall length, the type of engine used and its power (eg HP or kW), and the number of people the vessel will carry during the training. Include the MNZ number of the vessel(s) if applicable. You may attach photos of the vessel(s) to support the description.

## 5. Certificates to be issued to trainees

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### Person(s) issuing the certificates

Give the details of the person(s) responsible for issuing certificates covered by this application. If you have more than three people, copy this page and complete the details for each person.

Maritime New Zealand needs to see the fit and proper person for each person you list. Send these forms with your application. Your application cannot be processed without these forms.

Name	<input type="text"/>	<input type="text"/>
	<small>Given name(s)</small>	<small>Surname</small>
Position	<input type="text"/>	
Contact details	<input type="text"/>	
Contact numbers	<input type="text"/>	<input type="text"/>
	<small>Day time phone</small>	<small>After hours phone</small>
Name	<input type="text"/>	<input type="text"/>
	<small>Given name(s)</small>	<small>Surname</small>
Position	<input type="text"/>	
Contact details	<input type="text"/>	
Contact numbers	<input type="text"/>	<input type="text"/>
	<small>Day time phone</small>	<small>After hours phone</small>
Name	<input type="text"/>	<input type="text"/>
	<small>Given name(s)</small>	<small>Surname</small>
Position	<input type="text"/>	
Contact details	<input type="text"/>	
Contact numbers	<input type="text"/>	<input type="text"/>
	<small>Day time phone</small>	<small>After hours phone</small>

### Sample certificate(s)

Attach sample copies of the certificates you will issue to trainees.

Include any conditions that need to be specified. Identify the vessel(s) that the certificate holder may operate on with this certificate.