

# Notification of health and safety representative (HSR) training course

This form is to be used by approved HSR training providers to notify NT WorkSafe of HSR training courses. Refer to the guide [Health and safety representatives \(HSR's\)](#) for further information.

**At least 14 days' notice is required before commencement of the course**

## 1. Business details

Business name:		ABN:	
Contact person:			
Contact number:		Mobile number:	
Email address:			
Address:			
Suburb:		State:	
		Postcode:	
Is your postal address the same as above? (If no, complete below):	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Postal address:			
Suburb:		State:	
		Postcode:	

## 2. Trainer details

Surname:		Given name:	
Mobile number:		Email address:	

## 3. Course details

Course date/s:		Course time:	Start:	End:
Venue name:				
Venue address:				
Suburb:		State:		Postcode:

## 4. Request inspector to attend presentation

Would you like an inspector to attend the above-mentioned course to deliver a short presentation on the role of the NT WorkSafe? <b>Please provide at least 14 days' notice to ensure resources can be allocated.</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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## 5. Notifier declaration

I have authority from the approved training provider to complete and submit this notification. The information in this notification is true and correct to the best of my knowledge. I consent to the Work Health Authority making enquiries and exchanging information with work health and safety regulators in other States, Territories or the Commonwealth regarding any matter relevant to this notification.	
I have submitted this form electronically (signature is not required)	<input type="checkbox"/>
Applicant signature:	Date:

## Privacy statement

The Northern Territory Government respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the *Northern Territory Information Act 2002*.

You have been asked to provide personal information necessary for us to meet your application requirements. You do not have to provide your personal information but if you choose not to, this application will be incomplete, and we will be unable to process it.

The information you provide will be accessible to NT WorkSafe and will only be used to provide a department service or program. We will not disclose your personal information to third parties unless, authorised or required by law to do so, or you have given us consent to share your personal information for a specific purpose.

You may request access to the personal information we hold about you. If you want more information about the Northern Territory's privacy laws, please refer to the *Northern Territory Information Act 2002*, or the Office of the Information Commissioner NT.

## Lodgement

Completed applications can be lodged in person, email or via post at a [NT WorkSafe](#) below.

**Phone:** 1800 019 115

**Email:** [ntworksafe@nt.gov.au](mailto:ntworksafe@nt.gov.au)

**Postal:** GPO Box 1722, Darwin NT 0801

**In person:** Building 3, Darwin Corporate Park, 631 Stuart Highway, Berrimah NT