

**Training Provider Declaration –**

**Personal Learning and Thinking Skills (PLTS)**

I, the training provider, declare that I have covered the Personal Learning and Thinking Skills (PLTS) requirements as detailed in the Apprenticeship framework for **[Insert Apprentice’s full name]**.

**Training Provider Signature:**…………………………………………………………………………

**Training Provider Full Name:**…………………………………………………………………………

**Name of Training Organisation:**……………………………………………………………………..

**Position in Training Organisation:**………………………………………………………………….

**Date (dd/mm/yy):** / /