



2025 Standards for RTOs Frequently Asked Questions

Version 3 – 1 October 2025

Outcome Standards

Quality Area 1 – Training and assessment

Training

Where can I find the new training and assessment strategy (TAS) template?

The 2025 Standards have been designed to provide greater flexibility in how providers achieve outcomes and demonstrate compliance. This means that providers can decide how they compile and present their strategies for training and assessment. ASQA will therefore not be providing a training and assessment strategy template.

How do Volume of Learning, Amount of Training and nominal hours fit with the 2025 Standards?

Providers are required to continue complying with the VET Quality Framework which includes the Australian Qualifications Framework (AQF). This means that the AQF's Volume of Learning (VoL) requirements still apply – that is, the notional duration of all activities required for the achievement of the learning outcomes specified for a particular AQF qualification type.

Whilst Amount of Training (AoT) is not featured in the 2025 Standards, providers are still required to demonstrate that *'training is structured and paced to support VET students to progress, providing sufficient time for instruction, practice, feedback and assessment'* (Standard 1.1). Providers will need to consider and justify how their chosen amount of training for a particular training product meets this Standard.

Is there a minimum number of delivery hours a trainer should provide per unit of competency?

The 2025 Standards require providers to demonstrate that training is structured and paced to support students to progress, providing sufficient time for instruction, practice, feedback and assessment. The number of hours per unit depends on a range of factors, such as the student cohort, mode of delivery, the resources, technology platforms and facilities available, the expectations of industry, employers and/or the community, and the breadth and complexity of the skills and knowledge to be acquired.

The Standards state that training is to be structured and paced to support students to progress. Does this mean I need to record attendance? How should I demonstrate student progress?

The 2025 Standards do not prescribe a requirement for providers to record student attendance. However, there is a requirement for providers to ensure the structure of the training provided to

students supports their progress through the course - for example, sequencing units of competency in a logical way.

Please note that an ESOS provider or a provider with government funding may have additional requirements, including the requirement to monitor and document course attendance.

The Standards state that training needs to be engaging, well-structured and enable students to attain skills and knowledge consistent with the training product. How would I demonstrate that the training is engaging?

Students are diverse and have varied learning needs, styles and preferences. Using a range of training techniques, activities and resources to deliver training enables providers to cater to these diverse needs and improves outcomes for students.

Training should consider an array of training techniques and activities that seek to engage, interest, energise and involve students and enable them to build skills and knowledge in multiple different ways.

Can a provider commence delivering a unit of competency before a student has been deemed competent in all pre-requisite units of competency?

Yes, however, students must be assessed as competent in the pre-requisite unit/s prior to the determination of competency in the subsequent unit.

When importing an elective into a qualification, does the unit you import have to be in a qualification you have on scope?

Generally, qualification packaging rules allow for one or more elective units to be selected from any currently endorsed training package qualification or accredited course, noting the unit should be relevant to the qualification, maintain the integrity of the AQF alignment and contribute to a valid, industry-supported vocational outcome.

The elective unit(s) selected must be on the RTO's scope of registration. If the selected elective unit(s) is on scope, the RTO can deliver it as part of the full qualification delivery program without notifying or formally applying to ASQA. If the selected elective unit(s) is not on scope, the RTO must apply to ASQA to add the unit(s) to its scope of registration.

If we are an industry association or an Enterprise RTO, can we conduct industry engagement internally?

Where a provider is a key stakeholder in the industry, they can include internal engagement as part of their industry engagement. However, it should not be the only form of industry engagement conducted. Providers should ensure there are mechanisms for ongoing industry engagement, considering all relevant industry, employer and community representatives.

How often should industry engagement occur for a training product?

Industry engagement should be ongoing to ensure training remains relevant, fit-for-purpose and reflective of current industry practice. The 2025 Standards do not prescribe minimum requirements for the number or frequency of industry engagements – this is for providers to determine based on considerations such as the training product/s being delivered, and frequency or pace of change in the particular industry.

The Standards include a requirement to engage with industry, employer and community representatives. What does 'community' refer to?

Community representatives are relevant stakeholders that are not industry or employer representatives and may include advocacy groups relevant to the student cohort or training context and First Nations groups or representatives.

Do we need to engage with industry, employer and community representatives?

Yes. The Standards require providers to demonstrate how they identify relevant industry, employer and community representatives and seek meaningful advice and feedback from those representatives. Advice and feedback from all of these stakeholders will help providers remain attuned to the needs and expectations of the workforce and community and inform updates to their training so that it reflects current industry practice.

Assessment

Does industry need to review all assessment tools prior to use?

Under the 2025 Standards, providers are required to:

- ensure assessment is consistent with the requirements of the training product; and
- review assessment tools prior to use to ensure assessment can be conducted in a way that is consistent with the principles of assessment and rules of evidence.

The 2025 Standards also require providers to engage with industry, employer and community representatives as part of reviewing their training and assessment strategies and practices.

Under the requirement to review all assessment tools prior to use, do I have to review all existing assessment tools again prior to 1 July 2025?

Good practice would be to confirm that any existing assessment tools remain fit-for-purpose and consistent with the training product. As providers introduce new assessment tools or revise existing ones after 1 July 2025, they must ensure these are reviewed prior to use, as per Standard 1.3.

When reviewing assessment tools prior to use, are there stipulations on who can do this review? And do the tools have to be trialled, or can they just be reviewed against the unit of competency requirements?

The 2025 Standards do not prescribe which individual(s) must be responsible for undertaking a review of assessment tools prior to use, nor list specific credential requirements. Providers can do this in a number of ways, including by testing them with industry experts or employers, other trainers and assessors with current industry knowledge, or with a group of people with similar levels of knowledge to the target VET student cohort. Providers should ensure that they revise the tools to incorporate feedback and ensure they are fit-for-purpose.

We purchase off-the-shelf assessment materials that come 'pre validated'. Does this mean we are not required to review the assessment materials prior to use?

Providers must ensure their assessment materials and tools are contextualised and fit-for-purpose for their training environment and student cohort, as well as the requirements of the specific training product. Generic, off-the-shelf resources that are not tailored or contextualised by a provider can be a risk to compliance.

What is ASQA's stance on employers / supervisors completing observation of practical demonstration as a component of the assessment process for a unit of competency?

In certain circumstances it is reasonable to use another party for evidence-gathering where workplace evidence is required but it is not possible for the assessor to directly observe the student at work. For example, in cases where:

- the presence of an assessor may compromise workplace safety, or
- where work activities involve issues of patient confidentiality and privacy.

In such circumstances, the other party is not making any assessment judgements, nor are they involved in a 'co-assessment' arrangement. They are simply assisting in collecting evidence because they are in a position to directly observe the student in a real workplace setting.

The assessment judgement about whether competency has been achieved based on all of the collected evidence can only be made by a suitably qualified assessor who meets the Credential Policy requirements.

What methods should providers use to ensure students are directly observed by the assessor—on at least one occasion— while maintaining assessment integrity across different learning environments (including face-to-face, online, rural, and remote settings)? What happens if there are additional privacy policies of many schools and early childhood centres?

Providers need to determine the best method for assessment in accordance with the assessment requirements outlined in each training product and any applicable laws or considerations such as privacy requirements and the National Principles for Child Safe Organisations.

How much plagiarism by a student is acceptable? Are we expected to have plagiarism-check software?

Assessors are required to ensure that student's assessment evidence is the original and genuine work of that student. Students must be able to articulate their answers in their own words to demonstrate their knowledge retention and understanding of the content. There is no level of plagiarism that is acceptable in a student's assessment. This includes copying answers from other students, learner guides, the internet or other sources, as well as trainers and assessors providing answers to students.

Providers are expected to be able to demonstrate that they have systems in place to confirm the student's assessment evidence is the original and genuine work of that student. This could be through plagiarism-check software, or it could be through other means.

What does ASQA recommend to providers in a very small sector when validating its assessment tools?

Validation is to be undertaken by one or more people who collectively have:

- industry competencies, skills and knowledge relevant to the training product;
- a practical understanding of current industry practices relevant to the training product; and
- one of the credentials for validation specified in the Credential Policy.

Providers must also ensure that the outcome of an assessment validation is not solely determined by a person who has designed or delivered the training and assessment. Having a group of individuals that make up a validation team will assist small providers where the only trainer and assessor (who conducted the training and assessment) is involved in the validation process.

What are the new requirements for validating TAE training products?

The Credential Policy requires that to validate any AQF qualification or skill set from the TAE Training Package that enables individuals to make assessment judgements, at least one of the people undertaking the validation activity must have an AQF qualification or skill set at least to the level being validated. 'At least to the level' refers to the level of skills and knowledge required in the training product being validated, rather than equivalence of the AQF level.

In addition, Standard 1.5 of the Outcome Standards outlines the validation requirement that any AQF qualification or skill set from the TAE Training Package has been (or will be) validated once the first cohort of VET students with the organisation has completed their training and assessment. This validation must be by a person who is independent, not employed or subcontracted by the

organisation to provide training and assessment, and have no other involvement or interest in the organisation's operations.

Has the requirement to validate 50% of products within the first three years of a five year validation cycle been removed?

Yes. In the 2025 Standards, providers need to demonstrate that they have conducted validation of assessment practices and judgements at least once every five years for every training product on their scope of registration, or on a more frequent basis where the organisation becomes aware of risks to training outcomes, any changes to the training product or receives relevant feedback from VET students, trainers, assessors, and industry.

Is the validation sample size calculator staying on the ASQA website for providers to use?

Yes, the [Validation sample size calculator](#) will remain on ASQA's website.

Should the retention of assessment validation evidence align to the two-year retention requirement or five-year validation cycle?

Providers will need to demonstrate that they have conducted validation of assessment practices and judgements at least once every five years for every training product on their scope of registration. That means providers should be able to provide the evidence that was utilised as part of the validation process to demonstrate how this was done and how the outcomes were used to inform changes to the assessment system.

If a unit of competency has been validated this year, would we need to revalidate it again?

The 2025 Standards require providers to validate training products more frequently when they become aware of risks to training outcomes, there are changes to the training product, or they receive relevant feedback from students, trainers, assessors or industry. In these circumstances, providers should revalidate the training product again.

Recognition of Prior Learning and Credit Transfer

Has Recognition of Prior Learning (RPL) changed in the 2025 Standards?

Recognition of Prior Learning (RPL) has not substantively changed in the 2025 Standards. Providers are still required to have a robust RPL system in place that applies the same level of rigour as the assessment system, ensuring students can demonstrate they have the existing skills, knowledge and competencies outlined in the training product.

What happened to Recognition of Current Competency (RCC)?

The 2025 Standards do not include reference to Recognition of Current Competency (RCC) as this is a form of Recognition of Prior Learning (RPL). Providers should ensure that any student demonstrating current competence undertakes the robust RPL process in place.

Where a student holds certification for a unit/s of competency from one training package e.g. TLI, am I able to RPL that student for a unit in an alternate training package e.g. RII where the unit criteria are equivalent?

Recognition of Prior Learning (RPL) assesses the competency/competencies of an individual that may have been acquired through formal, non-formal and informal learning to determine the extent to which that individual meets the requirements specified in the training package or VET accredited course.

Where a student holds a similar unit of competency from another training package, the provider can recognise the relevant skills and competencies obtained to form part of the RPL evidence for another training product. Where there are gaps in a person's knowledge and skills, the student will be required

to undertake gap training and assessment in order to meet the requirements specified in a training product.

If a student cannot provide direct evidence as to their experience, can an employer sign off on their experience and how do I best facilitate this as an RTO?

Recognition of Prior Learning (RPL) assesses the competency/competencies of an individual that may have been acquired through formal, non-formal and informal learning to determine the extent to which that individual meets the requirements specified in the training package or VET accredited courses.

Informal learning refers to learning that occurs through experience of work-related, social, family, hobby or leisure activities. Declarations from a student's employer may be an acceptable form of evidence; however, it would be a risk if they were accepted as the only form of RPL evidence. If a student provides a declaration from their employer, the provider should still use its RPL system to authenticate the claims made in the declaration in regards to the student's competencies.

Can a provider decide not to offer Recognition of Prior Learning (RPL) at all due to the nature of the course?

The 2025 Standards require that 'VET students are offered opportunities to seek recognition of prior learning'. If a student is able to demonstrate skills, learning and experience relevant to a training product (to the level required) the provider should advise the student on how they can seek to have such skills, learning and experience recognised.

However, it is recognised that enabling RPL might not be appropriate or practical in all circumstances. For example, it may not be an efficient use of the student's time or provider resources to undertake assessment of prior competencies for short, low-cost courses. If this is the case, providers must demonstrate how they have formed this view and how this is transparently communicated to students prior to their enrolment.

How will ASQA view Credit Transfer opportunities? Do students need to hold the previous equivalent version of a unit or can a provider accept older versions of a unit if there is a history of equivalence on training.gov.au?

When a student presents a superseded equivalent unit of competency for credit transfer for the purpose of reducing the amount of learning required to achieve a qualification or skill set, as the training package has determined the unit of competency to be superseded equivalent, a provider can grant credit for that unit without needing to map unit outcomes.

Although not required, providers may take a best practice approach and conduct mapping analysis, especially for those units that have been superseded twice or more despite still being deemed equivalent, to assure themselves the assessment of competence is still relevant.

Can I refuse a Credit Transfer?

If a student provides legitimate AQF certification documentation and meets all requirements for a credit transfer, you are required to issue a credit transfer for the unit of competency the student has already completed, except where:

- a student is unable to provide appropriate or adequate evidence that can be authenticated, or
- there are licensing restrictions in place for the particular training product, or
- a student is seeking to receive a full qualification through credit transfer only, or
- a student's qualification was cancelled.

Can we refuse Credit Transfer if the units presented meet the training product's packaging rules but not the provider's selected elective units?

No. If a student can demonstrate they have competencies to meet the training product packaging rules this should be recognised. This will ensure students do not spend unnecessary time, nor accumulate unnecessary expense whilst undertaking VET.

Is it the provider's responsibility to determine the genuineness of a certificate? Can a certificate be legitimate if it does not have an RTO code on it?

It is the provider's responsibility to determine if AQF certification documentation provided to them for the purposes of Credit Transfer (CT) is authentic. Before providing credit on the basis of a qualification, statement of attainment or record of results, providers can authenticate the information by directly accessing the USI transcript online or by contacting the organisation that issued the document to confirm the content is valid. If the AQF certification documentation does not have an RTO code on it, it may not be legitimate, and if you are unable to determine its authenticity then you are not required to provide credit to the student.

When we receive a statement of attainment from a student from an RTO that has been closed by ASQA, is there a requirement to check the skills and knowledge of the student for the units that have been marked as competent?

This depends on why the provider's registration ended. For example, if the provider ceased operating for financial viability reasons, the skills and competencies of students may well be to the level of the training product. However, if ASQA cancelled a provider's registration due to non-compliance with assessment standards, there may well be concerns as to the level of competency achieved. If ASQA has cancelled a student/former student's qualification and/or statement of attainment following regulatory activity with a provider, the student should not receive a credit transfer for the relevant training product. If you are unaware of the reason for the provider's registration ceasing, it is highly recommended that you confirm the student has the required skills and competency via an RPL process rather than credit transfer.

Quality Area 2 – VET student support

Information

Do I need to use a language, literacy and numeracy (LLN) or digital literacy assessment tool to test all prospective VET students before they enrol?

Providers must review each prospective VET student's LLN proficiency and digital literacy in the context of the training product the student is seeking enrolment in. Providers can determine the best method for undertaking and evidencing this pre-enrolment review, in consideration of the nature of the training product, mode of delivery and student characteristics. This could be through purchasing or developing an appropriate tool, or through gathering evidence that the student holds an appropriate level of LLN proficiency and digital literacy for the proposed training product. There are various ways a provider can review these skills and competencies for a prospective student.

Are you required to review a prospective student's language, literacy and numeracy proficiency and digital literacy for a standalone unit of competency (i.e. *HLTAID009 Provide cardiopulmonary resuscitation*)?

Yes. Providers are required to review a prospective student's skills and competencies, including their language, literacy and numeracy proficiency and digital literacy prior to enrolment for every training product. **Training product** means an AQF qualification, a skill set, a unit of competency, accredited short course or module.

The system that is needed to review skills and competencies (and provide necessary advice to prospective students) will depend on the nature of the training product, the provider's context and the student cohort. This means that a provider could have different strategies to review prospective students' skills and competencies for standalone units of competency compared to full qualifications.

How do we know what language, literacy and numeracy proficiency and digital literacy is required for each training product? Is there a framework we can follow?

The 2025 Standards do not prescribe a framework for providers to use. Providers will need to analyse the training product/s they are training and assessing to determine what level of language, literacy, numeracy (LLN) and digital literacy prospective students need in order to successfully undertake the intended training. That is, the LLN proficiency and digital literacy needs will differ for each training product. For example, *ICT30120 Certificate III in Information Technology* may require a higher level of digital literacy than *SHB30416 Certificate III in Hairdressing*.

Is a language, literacy and numeracy and digital literacy test required for CRICOS students if they have already completed an IELTS or PTE test?

Providers are required to review a prospective student's language, literacy and numeracy (LLN) proficiency and digital literacy. The IELTS and PTE assesses a student's reading, writing, listening and speaking - not a student's numeracy or digital literacy skills. Providers could utilise the IELTS and PTE as part of the prospective student's skills and competencies review process; however additional components would be required to review the numeracy and digital literacy skills of prospective student.

An employer wants me to communicate directly with them, rather than their employees (our students). Is this allowed or can I only communicate with the student?

The 2025 Standards focus on student outcomes, including whether students have all the information and support services they need to progress throughout the training product. However, this does not mean that providers cannot communicate with the students' employers as well, or indeed other parties, so long as the student has given their express written consent as required under privacy law.

Training support

How do providers accommodate the needs of students with disabilities if the training product has physical requirements?

Providers are required to demonstrate that they create an accessible learning environment for a student with disability, including making reasonable adjustments to support their participation in VET. Where the training product includes requirements that cannot be accommodated with reasonable adjustments, providers should clearly communicate this to the prospective student and suggest alternative training options or pathways prior to enrolment.

Reasonable adjustment only refers to students with disabilities. Can this also apply to other situations? For example, for *BSBXTW301 Work in a team* can we make reasonable adjustments for students that do not attend the scheduled training and are not in a group environment when assessed?

Reasonable adjustments is a term to incorporate adjustments made in accordance with the *Disability Standards for Education 2005*. This is to ensure there is an accessible learning environment for VET students with disabilities to support them to participate in VET and complete the relevant training product. Any reasonable adjustments made should not affect the integrity of the training product.

All students, including students with disabilities, must still meet the requirements of the training product. This means that for *BSBXTW301 Work in a team*, students are required to demonstrate the ability to share knowledge, ideas and problems with team members on at least one occasion and in a

safe working or simulated environment. Non-attendance does not fit the criteria for reasonable adjustments.

Diversity and inclusion

What if I don't have any First Nations students or students with a diverse background? Does the Diversity and Inclusion Standard still apply?

Yes. Providers are required to foster a safe and inclusive learning environment for all students, including a culturally safe learning environment for First Nations people. Providers need to actively consider how their training environment, activities and materials, assessment processes and wellbeing support services are accessible and inclusive for all VET students.

Providers may also consider how their recruitment policies and practices contribute to creating a safe and inclusive environment. A welcoming learning environment has benefits for all, helping to increase participation in VET by under-represented groups, and create a positive setting where all students feel respected and supported to achieve success in their learning journey.

Wellbeing

How far do providers need to go in providing wellbeing assistance to VET students?

Providers are expected to be aware of potential risks to students' wellbeing and put strategies in place to protect and uphold the safety and wellbeing of their student cohort. Providers are not required to deliver wellbeing support services directly, but they must advise students of available supports, which could be supports external to the provider, and guide them on how to access these supports as appropriate. The extent of wellbeing support provided to students will vary according to factors such as the nature of the training product, duration of the student's enrolment, characteristics of the student cohort and size of the provider.

How does student wellbeing apply to providers that are delivering one-day or online courses?

The extent of wellbeing support services offered to students will vary based on the needs of the student cohort and the nature and duration of the training. Providers are expected to demonstrate how they have considered these factors and responded accordingly in support of student wellbeing.

How do providers ensure student wellbeing during work placements? Can we rely on the supports provided by employers?

Providers should consider the suitability of the work placement in the context of student wellbeing, including work health safety obligations. Where an employer offers employee support systems, providers may seek to coordinate access to these supports with the consent of the employer and student, as one example of how they have considered wellbeing for students from a work placement perspective.

Why do providers have an obligation to inform students of financial wellbeing?

Providers are required to demonstrate that they identify the wellbeing needs of the student cohort and advise them, as appropriate, of the availability of wellbeing support services – this includes relevant services students might contact, or action students might take to support their wellbeing.

Wellbeing support services may relate to students' physical, mental or emotional wellbeing. A part of this may include advising of the availability of services to assist in accessing financial support for students at risk of discontinuing their training due to financial hardship.

Feedback, complaints and appeals

The Standards for RTOs 2015 guided providers to resolve complaints or appeals within 60 days. This has been removed from the 2025 Standards. What are ASQA's expectations under the 2025 Standards?

The inclusion of a mandated timeframe to resolve complaints or appeals would be prescriptive in nature and not in accordance with the outcomes-focused approach under the 2025 Standards. The 2025 Standards require providers to identify reasonable timeframes for responding to and resolving complaints. The identified timeframe should be clearly advised to complainants so that they are aware of the expected timeframe for resolution of their complaint or appeal.

Quality Area 3 – VET workforce

VET workforce management

Is there a workforce to student ratio that providers should adhere to for trainers and assessors, administration, student support, etc?

There is no prescribed workforce to student ratio – this can be determined by each provider in the context of their operations.

Providers need to ensure they have an appropriate number of trainers, assessors and other staff to deliver the organisation's services and comply with all regulatory obligations.

Workforce planning can assist providers to determine current and future needs, including the number of staff and mix of roles needed based on the RTO's service model, mode/s of delivery, location/s, the number and diversity of training products on its scope of registration, the size and characteristics of its student cohort/s and any third party arrangements that need to be managed.

Trainer and assessor competencies

Have the requirements for trainers and assessors changed under the 2025 Standards?

The requirements for trainers and assessors under the 2025 Standards continue the 'early changes' that were made to the previous Standards in March 2024.

Trainers and assessors still need to hold a training and assessment credential (specified in the Credential Policy) and current industry skills and knowledge relevant to, and at least to the level of, the training product being delivered. 'At least to the level of' refers to the level of skills and knowledge required for each training product, rather than equivalence of the AQF level.

The 2025 Standards do not specify that trainers and assessors must hold the training product they are training or assessing. While this is the most direct way of evidencing the relevant industry competencies, skills and knowledge, this could also be demonstrated through a combination of formal and informal learning and skills and knowledge gained through paid or volunteer work.

What does ASQA expect to see in a trainer and assessor file?

There is no prescribed way of retaining trainer and assessor evidence to demonstrate compliance with the relevant Standards. Providers must demonstrate that each trainer and assessor:

- is appropriately credentialled, with current skills and knowledge in training and assessment; and
- holds current industry skills and knowledge relevant to the training product.

It is expected that providers authenticate the evidence that demonstrates each trainer and assessor complies with the above requirements. Additional evidence would be required for industry experts and where a trainer is working under direction, in accordance with the Credential Policy.

How many hours of professional development per year would be considered appropriate to maintain relevant and current industry competencies?

Each industry has its own characteristics and as such, the volume of hours of professional development needed to maintain currency will vary. Engaging with industry, employers and community representatives will assist a provider in determining the volume and depth of professional development required to maintain currency.

***TAE40110 Certificate IV in Training and Assessment* is an acceptable qualification in the Credential Policy. How could currency and competency be demonstrated in the short term for educators who may only hold this qualification but have not been training and assessing for several years?**

Where a trainer and assessor has not worked in the sector for several years, they could demonstrate currency through the attainment of additional training and assessment credentials or other professional development activities.

The 2025 Standards indicate trainers or assessors require 'industry competencies, skills and knowledge'. What does 'competencies' refer to?

Standard 3.3 requires that all trainers and assessors must have industry competencies, skills and knowledge that are relevant to, and at least to the level of, the training product being delivered and assessed. 'At least to the level of' refers to the level of skills and knowledge required for each training product, rather than equivalence of the AQF level. 'Competencies' is not a defined term in the Instrument – as such, a plain language interpretation should be applied such as - the knowledge, skills, abilities, and behaviours that contribute to an individual's performance. While holding the training product is the most direct way of evidencing relevant industry competencies, skills and knowledge, this could also be demonstrated through a combination of formal and informal learning, skills and knowledge gained through other means such as paid or volunteer work.

What should we do if a trainer has good knowledge in all the units except one part of the unit? How can we fill the gap?

All persons delivering training or assessment need to have industry competencies, skills and knowledge that are relevant to, and at least to the level of, the training product being delivered or assessed by the person. If a trainer or assessor is unable to demonstrate they have competencies, skills and knowledge for all components of the relevant training product, they will need to gain these or have another trainer or assessor deliver or assess the training product.

Is 'co-assessment' allowed under the 2025 Standards?

No. 'Co-assessment' where one person holds the TAE qualification but does not hold the industry competencies relevant to the training product being assessed and another person holds only the industry competencies but no TAE, is not allowed.

Trainers and assessors must have both the TAE qualification and industry competencies relevant to the training product being assessed.

Can someone with *TAE40116 Certificate IV in Training and Assessment* only (and no industry competencies, skills and knowledge) still assess and provide direction on the delivery of training and assessment?

No. The person providing direction on the delivery of training and assessment needs to be fully qualified and meet the thresholds required by the Standards. This means they must have the relevant TAE credential and industry competencies, skills and knowledge to the level of the training product they deliver or assess.

Does a fully qualified trainer and assessor that is providing direction (for example, to an industry expert) also need to have industry competence and currency?

Yes. It is critical that trainers and assessors (and any experts engaged to support trainers and assessors) have current industry competencies, skills and knowledge relevant to the training product. Where industry experts are involved in training and assessment, the trainer and/or assessor they are working under the direction of must be fully qualified, meet the thresholds required by the Standards and be responsible for making the assessment judgement.

It is important that the credential policy be read in conjunction with Standards 3.2 and 3.3, specifically 3.3 performance indicator 2 (c) (ii) which states that:

'An NVR registered training organisation demonstrates: it has a system in place for ensuring:

- iii. experts are only authorised to work under the direction of a person with the appropriate credentials to provide direction on the delivery of training and assessment, as specified in the Credential Policy'.*

Further, the trainer and assessor providing direction must meet Standard 3.3 (a) (i):

'all persons delivering training or assessment for, or on behalf of the organisation:

- i. have industry competencies, skills and knowledge that are relevant to, and at least to the level of, the training product being delivered or assessed by the person;'*

A provider engaging an industry expert to work under the direction of a person that does not meet the requirements of Standard 3.3, would not be meeting that Standard.

When would providers use an industry expert?

Engaging industry experts to support training and assessment and provide practical insight into real workplace settings can add value, variety and interest to the training program. You might also engage an industry expert to meet additional assessor requirements specified in a training product.

Can we get clarification on what 'under direction' means when using industry experts/guest speakers to assist with delivery?

Experts are only authorised to work under the direction of a fully qualified person under the Credential Policy, where the provider has a reasonable degree of oversight of the expert. Experts need to have industry competencies, skills, knowledge and specialised industry or subject matter expertise that is directly relevant to the training product.

Where a provider engages an expert, the expert can train and assess alongside the relevant trainer or assessor for the training product. Note that experts are unable to train and assess independently, including making assessment judgements (unless they hold an Assessor Skill Set or meet the Credential Policy in another way).

Do trainers and assessors working under direction still require a supervision plan?

Providers must be able to demonstrate how they have determined an appropriate level of supervision for each person working under direction – that is, on a case-by-case basis. Providers can demonstrate this through many forms, including a supervision plan if they deem this appropriate.

What is considered an acceptable timeframe of supervision for a person working under direction?

If the person is actively working towards a credential (either TAE40122 or TAE50122) then they have two years to complete the qualification. Over this period, the provider must demonstrate that the person is working under the direction of a fully qualified trainer or assessor. An industry expert must also work under the direction of a fully qualified trainer or assessor.

The level of supervision required will depend on the person under direction. If it is an industry expert, the level of direction may remain constant over time. However, for the person working towards a training and assessment credential, their level of direction may decrease over time as they progress through the qualification.

Can a person working under direction make assessment judgements?

A person working under direction is not permitted to make assessment judgements (per Standard 3.2 (2) (b)).

Under the instrument, **assessment judgement** means the determination of whether competency has been achieved by a VET student. A person working under direction, such as an industry expert or an individual working towards a training and assessment credential:

- must have industry competencies, skills and knowledge that are relevant to, and at least to the level of, the training product being delivered or assessed by the person; and
- may help collect assessment evidence, however this evidence must be handed to a fully qualified assessor to make the assessment judgement.

As a person under direction, I am only able to collect evidence and am unable to make an assessment judgement. Does that mean I can complete a practical observation independently and provide that evidence to a fully qualified assessor to make the assessment judgement?

As per section 1D of the Credential Policy, a person under direction can deliver training and contribute to assessment provided they are working under the direction of a fully qualified assessor – for example they may confirm a student has undertaken a particular observable task against a supplementary observation checklist or logbook. A person working under direction is not able to mark a student's assessment (as either satisfactory or not yet satisfactory) or make an assessment judgement (as either competent or not yet competent).

Quality Area 4 – Governance

Risk management

The 2025 Standards now require providers to have a system for identifying, managing and disclosing any real or apparent conflicts of interest. Does this need to be shared with ASQA or just maintained for compliance and auditing?

ASQA may request information on your RTOs conflict of interest disclosures and management at any time. If you identify an event that would significantly affect the organisation's ability to comply with any of its obligations under the Act, including an issue arising from a conflict of interest, you must notify ASQA. This is a requirement under the Compliance Requirements.

In respect of the conflicts of interest, who do we contact to gain more clarification on whether an action could be considered a conflict of interest?

The 2025 Standards require providers to identify, manage and disclose any real or apparent conflicts of interest. This is to preserve the integrity of your RTO's decisions and reduce the risk of fraudulent activities and corruption by ensuring accountability for the RTO's operations. There are publicly available resources for businesses on managing conflicts of interest that may assist in building the governance systems of your RTO.

Should providers be reviewing the conflicts of interest of workplace supervisors who collect evidence for third party reports?

The 2025 Standards require providers to demonstrate their system for identifying, managing and disclosing any real or apparent conflicts of interest to ensure any risks to students, staff and the

organisation are identified and managed. This assists with the preservation of the integrity of the provider's decisions and reduces the risk of fraudulent activities and corruption by ensuring accountability for the provider's operations.

All staff, including workplace supervisors, should be supported to understand their obligations regarding disclosure and management of conflicts of interest.

How should Enterprise RTOs meet the Standard relating to financial position, financial performance and cashflows when all we receive is a budget to work with from our corporate entity?

As a condition of registration, providers must maintain their financial viability at all times. The **governing persons** of the RTO have a responsibility to ensure the provider maintains an acceptable financial position and cashflows.

What happens if I receive no complaints and am only able to produce a blank feedback register during a regulatory activity?

The 2025 Standards require providers to capture feedback and complaints about the organisation, any third parties, and any person employed or contracted by the organisation.

If a provider has not received any complaints, they are still expected to capture feedback and use this to inform continuous improvement. This could be received through formal or informal means.

The existence of a register alone would not be an adequate demonstration of compliance with the Standards. The expectation of providers is that they will make their feedback/complaints process known to students and stakeholders and actively encourages their feedback, be able to demonstrate what action has been taken in relation to that feedback, what the outcome was, and how the organisation improved as a result.

How should providers implement the National Child Safe Standards? What would ASQA be looking for?

Standard 4.3 requires providers to demonstrate that where training and assessment is offered to students aged under 18, risks to their safety and wellbeing associated with the organisation's delivery of the training or assessment are identified and managed in accordance with the National Principles for Child Safe Organisations.

In a regulatory activity, ASQA would be looking to ensure your organisation has regard to all legislative and regulatory obligations, including the National Principles for Child Safe Organisations, and can demonstrate how risks to students under the age of 18 are actively identified and managed.

Continuous improvement

How can providers demonstrate a proactive approach to continuous improvement without simply reacting to audits or complaints?

Providers are required to undertake systematic monitoring and evaluation to support quality delivery and continuous improvement of their services. There are many ways providers can self-assure and gather information to continuously improve - this includes but is not limited to delivery and performance data, internal audits, quality indicator data, feedback from industry, validation outcomes, trainer and assessor feedback and complaints and appeals.

Are there any template checklists providers should be using for internal audits against the 2025 Standards?

No. However, the Practice Guides contain self-assurance questions which will be helpful in supporting this process.

Compliance Requirements

Marketing and advertising

I have been told the Standards say that providers have to monitor social media and other businesses / brokers who might use our logo or name without permission. Is this true?

The 2025 Standards require providers to ensure that any advertisements or marketing materials published or disseminated by the organisation, a third party or an expert engaged by the organisation adhere to specific requirements. There is not a requirement for providers to monitor social media and other businesses / brokers who might use the RTOs branding or logo without permission, however this may be something that the RTO considers as part of its risk management.

Issuance of AQF certification documentation

What are the Industry Descriptor and Occupational and Functional Stream for the certificates and statements of attainment? How do the RTOs get this information for their courses?

Both the Industry Descriptor and the Occupational and Functional Stream information are listed on the National Register (training.gov.au). Clause 11 of the Compliance Requirements states how these are to be referenced.

Are providers able to charge for copies of AQF certification documentation?

Providers can charge a fee for replacement copies of AQF certification documentation if this is outlined in the documentation provided to the student at enrolment. However, if you did not inform a student at enrolment that there would be costs for replacement or additional copies of AQF certification documentation then you are not able to charge.

Has the 30-day timeframe to issue a Statement of Attainment been changed?

Under Clause 9 of the Compliance Requirements providers are to issue AQF certification documentation within 30 calendar days from the completion of the assessment provided the student has completed or withdrawn from the training product.

There is a requirement to issue AQF certification documentation to students within 30 days from the completion of the assessment. This now includes where a student has subsequently withdrawn after completing one or more units. What happens if the student withdraws, and they haven't completed an assessment within the last 30 calendar days?

Where a student has withdrawn and there has been no assessment completed within the last 30 calendar days, it is acceptable for AQF certification documentation to be issued within 30 calendar days of the date the student requested the withdrawal. Providers must be able to demonstrate the date of the student's withdrawal request and AQF certification documentation issuance date.

Can we send a copy of the student's AQF certification documentation to their employer?

The Compliance Requirements state that a provider must not issue AQF certification documentation to any person unless the person is a VET student who the organisation has assessed as meeting the requirements of the training product. This means providers can only issue AQF certification documentation to students directly. Providers may issue a copy of a student's qualification or statement of attainment to another party, such as an employer, if the student has given prior written consent. You must be able to demonstrate, if required, that the student approved the issue of a copy of their award to another party.

Records of AQF certification documentation and assessments

Does the requirement to retain evidence of assessment for two years apply retrospectively to existing VET students, or only to those enrolled on or after 1 July 2025?

Any VET student that completes a training product on or after 1 July 2025 is included under this two-year evidence retention requirement. However, if (as at 1 July 2025) an existing student's assessment evidence has previously been disposed of under the previous '6 month rule', the provider should make a note of what was disposed of prior to the rule change. Where a course continues past 1 July 2025, providers will need to hold records for two years of any training product completed on or after 1 July 2025.

It is important to note that assessment evidence must be retained for two years unless there are additional requirements and longer retention periods attached to the training product by other regulators or licensing bodies.

Under the 2025 Standards 'two-year rule' for assessment evidence, can I make digital copies of assessments and dispose of the hard copies?

The requirement to retain assessment evidence for two years applies to VET students that complete a training product on or after 1 July 2025. Digital copies can be made and retained in circumstances where it is impractical to keep the original assessment evidence. If held in electronic form, the evidence must be of sufficient quality, readability and useability to be considered a genuine and complete copy of the original. In addition, providers must retain records in a manner that safeguards them against unauthorised access, fire, flood and pests, and which ensures that copies of records can be produced if the originals are destroyed or inaccessible.

Training products that lead to regulated or licensed outcomes may also have specific requirements to retain records. You should refer to the specific regulatory requirements relating to that training product to ensure compliance.

Is the requirement to retain records of all student assessments for a period of two years the same for high-risk courses?

The 2025 Standards require a two-year retention period. However, training products with licencing requirements or funding contracts might require student assessments to be retained for a longer period. Providers should ensure they are aware of any such requirements.

Issuance of VET qualifications and VET statements of attainment

There is reference to 'registration code' in the 2025 Standards. Does this mean all our AQF certification documentation needs to be updated with the new terminology?

This terminology was changed to align with the NVR Act, which includes a definition of 'registration code' being '*...the code (however described) included on the National Register in respect of the organisation*'.

As the definition states 'however described', providers can retain use of the term 'RTO Code'.

The 2025 Standards state that statements of attainment must include the words 'units/modules'. Do we reflect both on a statement of attainment or do we choose which one is relevant?

Providers can tailor this to the training product they are issuing AQF certification documentation for.

Transition of training products

Can you explain what 'in a timely manner' means (for transition of training products)?

Under the Compliance Requirements, 'a *timely manner*' is used to recognise that the appropriate transition time will vary for different training products and students. This change is designed to minimise disruption for students and reduce administrative burden on providers.

This means providers will need to consider, and be able to justify, on a case-by-case basis the appropriate period for transitioning students to new training products. Considerations may include:

- meeting the needs and best interests of your students
- the expectations of industry
- your organisation's ability to adapt to the change
- the nature of the training product itself.

Do we still have two years to teach out expired accredited courses or is it now only one year?

Where an AQF qualification (which includes an accredited course) is no longer current and has not been superseded, all enrolments in the training and assessment leading to the qualification must complete and receive their AQF certification documentation within two years from the date the qualification was removed or deleted from the National Register. Where a training product is expired, providers are unable to enrol any new students from the date the training product is expired.

Where an accredited short course that leads to a statement of attainment is no longer current, all enrolments in the training and assessment must have completed and received all AQF certification documentation within one year from the date the training and assessment was deleted from the National Register.

Why has ASQA not updated training products that include superseded units of competency?

Training product updates are undertaken and managed by the Jobs and Skills Councils (JSCs). Training providers with questions regarding currency of training products should refer their enquiries to the relevant JSC - [Jobs and Skills Councils - Department of Employment and Workplace Relations, Australian Government](#).

Will ASQA still be approving extension requests to training products?

Yes, ASQA will continue to approve transition extension requests to training products. You can view the approved extensions here: [Training products with current transition extensions | Australian Skills Quality Authority \(ASQA\)](#).

This is in addition to Clause 14 of the Compliance Requirements that allows all students enrolled in a superseded training product to complete the training and assessment and be issued with the relevant AQF certification documentation or be transferred into the replacement training product in a timely manner. This means there is no longer a requirement for students in a superseded training product to transition or teach out in a specific period of time.

Notification of material changes

The reduction from 90 days to 10 business days for material change notifications might be challenging for large organisations with lengthy escalation processes. How would we comply if we are unable to get the Financial Viability Risk Assessment (FVRA) completed and submitted within the 10 business days?

The reduction from 90 days to 10 business days is to ensure that ASQA is aware of material changes in a timely manner and can assess the extent to which they will affect the likelihood of the provider complying with its obligations.

Importantly, under the Compliance Requirements, a provider must notify ASQA of any prospective changes to the ownership of the organisation *as soon as practicable* before the change takes effect. This would usually be more than 10 business days before the event. If a provider is unable to get the FVRA completed and submitted as part of the material change notification or within the prescribed timeframe, they should notify ASQA of this along with a proposed date of submission for the FVRA.

If our CEO goes on holidays for four weeks, do we need to submit a material change notification?

Yes. If the CEO goes on holidays for an extended period, the details of the Acting CEO must be notified to ASQA. If the Acting CEO has not previously submitted a fit and proper person declaration, they must do so before commencing acting duties.

Third party arrangements

The 2025 Standards refer to third parties as "persons". Can you clarify whether this term is meant to include organisations or just individuals? How should RTOs interpret this in the context of contracting external entities like consulting firms?

Clause 7 of the Compliance Requirements note that '*Section 2C of the Acts Interpretation Act 1901 provides that the term "person" includes a body politic or corporate as well as an individual*'. This confirms third parties include both organisations and individuals.

Can ASQA have greater control over third party providers?

ASQA-regulated RTOs are responsible for managing their third party arrangements. Providers will note a greater emphasis throughout ASQA's guidance material on the responsibility of lead providers to actively oversee the compliance and quality of their third party providers to ensure that the services they deliver are in full accordance with the Standards.

What are other types of third party arrangements outside of the delivery of training and assessment?

The 2025 Standards define a **third party** as any person who has an arrangement with a provider to deliver services, but does not include employees of the organisation, experts engaged by the organisation or any government agencies and government funded agencies that refer VET students to the organisation and do not receive any payment from the organisation for doing so (noting that Section 2C of the *Acts Interpretation Act 1901* provides that the term "person" includes a body politic or corporate as well as an individual). **Services** are defined as training and assessment, training support services (excluding counselling, mediation, and information and communication technology services) and any activities related to the recruitment of students including marketing, enrolment, induction, or the collection of fees.

Providers should use these definitions to assist in the identification of their third parties.

Examples of a third party: Education agents, brokers, services procured directly with a wellbeing service provider (eg. EAP service), VET delivered in secondary schools.

Examples of what would not constitute a third party: individual trainers and assessors hired on a contractual or labour hire basis, lease agreements, indirect referrals to an external wellbeing service provider, homestay or boarding service provider, learning management system, student management system, listed company that owns the RTO.

Are industry experts classified as third party arrangements?

The definition of third party means any person who has an arrangement with an RTO to deliver services, but excludes employees of the organisation, experts engaged by the organisation or government agencies and government funded agencies that refer VET students to the organisation and do not receive any payment from the organisation for doing so.

The 2025 Standards indicate that third parties cannot use the organisation's (RTO's) branding. Does this apply to assessments, learning resources, forms and marketing materials?

It is critical that there is transparency for students in relation to the role of the RTO and the role of any third party in the delivery of their training and assessment. A third party cannot attempt to mislead VET students by marketing itself as the RTO. The RTO's branding must not be used to conceal the fact that a third party is involved in the delivery of services, nor should the student only be familiar with the third party's branding and not that of the RTO.

Do third party providers that advertise RPL need to disclose the RTO they are working with?

Yes. Providers are required to ensure that any advertisements or marketing materials disseminated by a third party include the organisation's registration code or a link to the part of the National Register where the organisation's registration code is located. Students must be fully informed of the role of the third party versus the role of the lead provider.

How frequently should we be monitoring our third parties? Is this quarterly, biannually or annually?

Standard 4.2 requires that providers must demonstrate they have a system in place for ensuring any third parties meet the requirements of the Standards for RTOs and are aware of their obligations under these instruments. This means providers need to ensure third parties are complying with the requirements at all times.

Prepaid fee protection measures

Do the prepaid fee protection measures extend to employers that pay for training on behalf of their staff?

The protection of prepaid fees has not been expanded to include employers. The wording 'on behalf of' refers to circumstances such as a parent or spouse paying on the student's behalf. Prepaid fees collected from an employer on behalf of its staff do not need to be protected under this requirement as they will be covered by terms under the commercial agreement or contract.

Fit and Proper Person Requirements

Do the Fit and Proper Person Requirements only apply to governing persons?

It is important that providers recognise the Fit and Proper Person Requirements (FPPRs) as a positive obligation requiring active and ongoing education and monitoring of staff involved in VET delivery. **Governing person** is a defined term in the instrument and means any person responsible for overseeing, directing, or exercising a degree of control or influence over the management or operation of an RTO, including executive officers and high managerial agents. Providers must ensure that all of its governing persons submit a Fit and Proper Person Declaration to ASQA.

Are trainers and assessors required to submit a Fit and Proper Person Declaration? How would this work in the VET in schools context where school teachers are already registered under their own State registration requirements?

Providers have a positive obligation to ensure that all staff involved in VET delivery are fit and proper. The Fit and Proper Person Declaration however, applies to all **governing persons**, including:

- (a) an executive officer of the RTO;
- (b) a high managerial agent of the RTO; or
- (c) any person responsible for overseeing, directing, or exercising a degree of control or influence over the management or operation of the RTO.

Providers may also be asked by ASQA to provide a declaration for any individual at any time.

How often do providers need to submit Fit and Proper Person Declarations to ASQA?

All **governing persons** must submit a [‘fit and proper person’ declaration](#) whenever their RTO:

- applies for initial registration
- applies for renewal of registration, or
- employs a new governing person.

Are Board Directors required to submit the Fit and Proper Person Declaration to ASQA?

All **governing persons** of the RTO are required to submit a Fit and Proper Person Declaration.

Board Directors that have responsibility for overseeing, directing or exercising a degree of control or influence over the management or operations of the RTO would be considered governing persons.

Compliance with laws

Where do other elements of the VET Quality Framework sit (e.g. Financial Viability Risk Assessment and Data Provision Requirements)?

These requirements are still in effect. Providers should view ASQA's [Key legislation](#) webpage for more information.

Are all staff now required to hold a working with children check (WWCC)?

No, however, under the [National Vocational Education and Training Regulator \(Data Provision Requirements\) Instrument 2020](#), ASQA may request details about working with children checks for any trainer, assessor or other staff member who is required to hold one under a law of a state or territory.

Credential Policy

Is it correct that after 1 July 2025, a trainer that holds *TAE40110 Certificate IV in Training and Assessment* is no longer required to also hold TAEELN411 and TAEASS502?

Yes. From 1 July 2025 individuals that hold the 2010 version of the Certificate IV in Training and Assessment (TAE40110) will be able to deliver training and assessment without being mandated to also hold the two additional units of competency in addressing adult language, literacy and numeracy skills and designing and developing assessment tools. Regardless, as always, it remains critical that providers ensure their trainers and assessors have the competencies, skills and knowledge relevant to the training product/s they are delivering.

Can a new trainer (who does not have a TAE credential) deliver training and collect assessment (but not make the assessment judgement) after completing the presenter skill set or equivalent?

Yes, but under direction only.

In the Credential Policy it allows people with a secondary school qualification with the Assessor Skill Set to have the same weight as a full TAE. In Queensland, teachers who can register with the QCT are registered as a teacher regardless of the qualification held. Does this fit the Credential Policy?

If a person can demonstrate they are eligible to be registered as a secondary school teacher in any Australian state or territory and hold either *TAESS00011 Assessor Skill Set*, *TAESS00019 Assessor Skill Set* (or its successor) or *TAESS00024 VET Delivered to School Students Teacher Enhancement Skill Set* (or its successor), then they are able to train and assess in line with the Credential Policy.

The Credential Policy states that: ‘The RTO must be able to justify the relevance of the person’s credential to the VET student cohort being delivered to’. What does this mean?

To deliver training and conduct assessment under direction, a person must hold one of the relevant credentials (as per the [Credential Policy.pdf](#)) – which includes a range of different skill sets (from VET Delivered to School Students Teacher Enhancement Skill set to the Enterprise Trainer and Assessor Skill set). Providers must ensure that the credential held by trainers and assessors in accordance with this section is relevant to their role, taking into account the nature of the VET student cohort and the delivery context. For example, if you are a person under direction delivering to VET in school students, it may be appropriate to hold the *TAESS00024 VET Delivered to School Students Teacher Enhancement Skill Set*, whereas if you are a person working under direction in an enterprise RTO environment, it would be more suitable for the person to hold one of the Enterprise related skill sets.

If a person under direction completes the Assessor Skill Set, could they then start to make assessment judgements or do they need to complete the full qualification?

The list of credentials to deliver training and conduct assessment under direction are detailed in the Credential Policy. If the person under direction also completes an Assessor Skill Set, they meet the requirements of ‘Assessment only credentials’ and are also able to make assessment judgements. This means the person is a trainer under direction but can make assessment judgements independently.

Has the industry currency requirement for trainers and assessors disappeared?

No. The Credential Policy must be read alongside the Outcome Standards, as the Outcome Standards outline the requirement for all persons delivering training and assessment to maintain an understanding of current industry practices relevant to the training or assessment being delivered by the person.

There are various ways for trainers and assessors to demonstrate industry currency, which could include a combination of volunteering or working in industry, undertaking accredited training relevant to the industry area, belonging to industry associations, engaging with industry through industry networking events, and reading industry journals and subscriptions. The frequency and currency of undertaking these activities will be dependent on the training product the trainer and/or assessor is delivering and/or assessing.

In the Credential Policy, *TAE40110 Certificate IV in Training and Assessment* is considered a fully compliant credential. As *TAA40104 Certificate IV in Training and Assessment* is considered equivalent to *TAE40110*, does this mean anyone holding *TAA40104* is able to train and assess?

No. As per the Credential Policy, the minimum training and assessment credential to be held by a trainer and assessor to be fully qualified is *TAE40110 Certificate IV in Training and Assessment*. *TAA40104* is not listed in the Credential Policy.

Do the requirements around the credentials for validation of assessment apply to pre-use validation?

No. The 2025 Standards do not refer to pre-use validation but rather that ‘assessment tools are reviewed prior to use’. The requirement to review assessment tools prior to use does not refer to a validator or validation team, and therefore the reviewer does not need to hold specific credentials.

Where to find more information

Legislative Instruments, Credential Policy and Policy Guidance

- Outcome Standards – <https://www.legislation.gov.au/F2025L00354/asmade/text>
- Compliance Standards (Requirements) – <https://www.legislation.gov.au/F2025L00355/asmade/text>
- Credential Policy – <https://training.gov.au/resources>
- DEWR Policy Guidance – <https://www.dewr.gov.au/revisions-standards-registered-training-organisations/resources/outcome-standards-policy-guidance>.

2025 Standards resources on ASQA's website

- Practice Guides – <https://www.asqa.gov.au/how-we-regulate/revised-standards-rtos/practice-guides>
- Podcast - ASQAcast | Revised Standards
 - <https://www.asqa.gov.au/guidance-resources/resources-providers/podcasts-asqacast>
 - https://www.youtube.com/watch?v=5qw7_DZrTwg.

Other Useful Resources and Contacts

- ASQA Info Line – phone 1300 701 801
- VET Tip Off Line
 - <https://asqaportal.asqa.gov.au/Make-a-Report/?from=tip-off>
 - Phone 1300 644 844 (or + 61 25933 2022 outside Australia)
- Department of Employment and Workplace Relations: <https://www.dewr.gov.au/standards-for-rtos>
- Department of Education: www.education.gov.au
- NCVER news: www.ncver.edu.au/subscription
- PRISMS: www.prisms.education.gov.au
- National Register: www.training.gov.au.