EAST ADELAIDE SCHOOLS CLUSTER VET COURSE APPLICATION FORM



- Please complete this form and return it to the VET Coordinator at your school
- Please note that some private details & information may need to be shared between the home school, host school, training organisation and employers for Structured Work Placement, resulting and recording attendance.
- Unique Student Identifier (USI) students intending to study a Vocational Education and Training (VET) course are required to have a USI. To generate a USI, go to www.usi.gov.au. Please attach a typed copy of the number to this application.
- Completion of this enrolment form is NOT a guarantee of a place in the course
- Courses are subject to change without notice

STUDENT DETAILS:								
Name:	Current Year Level/HG							
School:	Gender: Male / Female							
Birthdate: /	Mobile Phone:							
Student email:	Student SACE number:							
USI Number: (please write neatly and clearly)								
INDIGENOUS/TORRES STRAIT ISLANDER STATUS:								
I am: [] Indigenous [] Torres Strait Islander [] Neither								
OTHER:								
[] I am from a non-English speaking background								
I have a Health Care Support Plan (Please attach a copy to this application) Outline accommodations you require:								
I have a Negotiated Education Plan (Please attach a copy to this application) Outline accommodations you require:								
PARENT DETAILS:								
Name:	Relationship:							
Address:								
Home phone:	Mobile:							
Email:								
Emergency contact name and number:								
Do you allow your child's image to be used for EASC events and promotions? Yes [] No []								
VET PROGRAM CHOICE (please refer to EASC program):								
PROGRAM NAME	HOST SCHOOL SEMESTER/FULL YEAR							

UNDERSTANDING MY VET COURSE:						
I am aware of the venue and how to get there		YES []	NO []	
I am aware of the program costs to me (if applicable)		YES []	NO []	
I am aware of any special equipment purchases I need to ma	ke (if applicable)	YES []	NO [1	
I am aware of any Structured Workplace Learning requireme	nts (if applicable)	YES [1	NO [1	
STUDENT SUPPORT INFORMATION (PROVIDED BY PARENT):						
Please outline any information the provider needs to be participation of this course:	e aware of in relation	n to best	suppo	rting your	child i	n their
STUDENT COMMITMENT:						
 Meet deadlines for assignments, tasks, proj Use my study time at school and home well Notify the VET trainer and Home School Rej Behave in a manner that is expected of appropriately Follow all rules and appropriate instructions Actively seek assistance from my VET trained completion of my VET and school programs 	to support my success presentative if I will be f me, and that repre s in relation to my VET er and/or school teach	s in the VE absent fro sents my program	om a VE home	T lesson school ar	nd host	school
AGREEMENT:						
I/we have read, understand and accept the above in signing for the duration of the training. I give permission for my deta as required.						
Parent:	Date:					
Student:	Date:					
SCHOOL ENDORSEMENT OF TRAINING:						
We (home school) support this student's application and agrithis program.	ee to support the stud	dent, whe	re possi	ble, to ach	iieve sud	ccess in
Home School Representative Name:			Date	:		
Home School Representative Signature:						

Position: