

SCHOOL BASED APPRENTICESHIP AND TRAINEESHIP

2012 APPLICATION FORM

Name: _____ Date: _____

Address: _____
Postcode: _____

Phone: _____ Student Mobile: _____

Email: _____ Date of Birth: _____

Age: _____ Male Female (Tick one)

Parent/Guardian: _____ Phone: _____

Current Secondary School Attended: _____

Current Year/Level: _____

Do you hold a current Low Income/Health Care Card? **YES / NO**

Industry	Stream	Please tick one
Certificate II in Automotive	Vehicle Servicing	
	Paint and Panel Preparation	
Certificate II in Business		
Certificate II in Engineering	Production	
Certificate II in Hospitality	Kitchen Operations	
	Operations	
Certificate II in Retail Operations		
Certificate II in Horticulture	Nursery	
	Landscape Gardening	
	Turf Management	
	Floriculture	
Certificate II in Furniture Making	Cabinet Making	

If students wish to commence a SBAT in any other industry, then they **must** have a letter from an employer who will provide employment.

Completed industry aptitude assessment **YES / NO**

RESULT and COMMENT

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Have you had any 'work experience' in the industry you have chosen, or another industry?
Please give details.

1. Name of company _____

Contact person _____

Comments _____

2. Name of company _____

Contact person _____

Comments _____

Why do you want to complete a school-based apprenticeship or traineeship?

Tell us about yourself and your general interests/hobbies

Have you successfully completed "safe@work"? YES NO (tick one)

Which industry module have you completed? _____

The above information is true and correct to the best of my knowledge.

Signed _____ Date _____

Parent Signature _____ School Coordinator Signature _____

For further information, contact:

Jenny McComb "atEAST" Heathmont College, Waters Grove, Heathmont 3135
Phone: 9871 4856

Jenny Allen, David Stanley, John Breen at Rowville Secondary College 9755 4555