School based Apprenticeship/Traineeship Expression of Interest

Thank you for your interest in a School based Apprenticeship. This pathway will enable you to commence your apprenticeship/traineeship whilst completing your SACE. Students undertaking a School based Apprenticeship may attend school part of the school week; undertake on-job training in the workplace and formal off-job training with a Registered Training Organization (RTO). It is important that you discuss this opportunity with your families before returning this form. Note: Completion of this form does not guarantee that you will obtain a School based Apprenticeship or Traineeship.

Employers that will be participating in School Based Apprenticeships will have their own recruitment processes and criteria and will be making the final selection of candidates. You may also be required to do work experience (trial) as part of this process. If you or your parents/guardians would like any addition information, please do not hesitate to contact:

- Rachael Jensen School Apprenticeship Officer - Mobile: 0409 800 339

Prior to meeting with Rachael you must complete this form and return to your school VET Leader with a copy of your resume.

Home School: ________________________________________________

Date: ______________ Term: ______________ Year level: ______________

*Student Information: *ED ID No: ________________________________

Students Name: ____________________________ Student Email: ____________________________

Home Address: ________________________________________________

Mobile Phone: ___________________________________________________________________

Parent Name: ____________________________ Parent Phone: ____________________________

ATSI  ❑  FLO  ❑  Disability  ❑  Alternative Program  ❑  GOM  ❑  Risk of disengagement  ❑  NAP  ❑

* Background information: (for e.g.; schooling history – change schools, challenges, support systems in place)

____________________________________________________________________________________

____________________________________________________________________________________

*Parent/Guardian Details (Please Tick):

I am aware of my son/daughter’s interest in a School Based Apprenticeship ❑

I would like to arrange a meeting to find out more information ❑

Name: ____________________________ Signature: ____________________________

Phone: ____________________________ Email: ____________________________
Do you have any medical issues: Yes: ☐ If so: ___________________________ No: ☐

*Career Pathway Plan:*

What are you interested in: __________________________________________________________

Why are you interested in this career?
________________________________________________________________________________

VET in Schools Qualification: (if applicable) __________________________________________

Citizenship Status: Australian Citizen: ☐ Permanent Resident: ☐ Other:(e.g. VISA)________

Driver’s License: No License: ☐ P’s: ☐ Own Vehicle: ☐

L’s: ☐ When can you obtain P’s: __________________________________________________

*SACE Status:*

Are you on track for SACE: Yes: ☐ Current credits: ________________________________

No: ☐ If no, please explain: _______________________________________________________

*Please tick if completed*

Personal Learning Plan: ☐ Research Project: ☐ Maths: ☐ English: ☐

*Work Experience:*

Company: ___________________________ Contact Person: _____________________________

Phone Number: _____________________ Email: ________________________________

Company: ___________________________ Contact Person: _____________________________

Phone Number: _____________________ Email: ________________________________

Leader has cited form, please sign: ___________________________ Date: ______________

Follow up notes from meeting with Rachael: Date: __________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________