



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: _____



Western Adelaide Secondary Schools Network

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:*** _____

