

## Application for Course Enrolment

**\*\*YOU MUST RETURN THIS FORM EVEN IF THIS COURSE IS DELIVERED BY YOUR HOME SCHOOL\*\***

**Name of Course:**            **Cert 1 Hospitality – Kitchen Operations**

**Delivery School / Location:**        **-- Ardrossan Area School --**

### STUDENT DETAILS – please complete all sections

<p><b>Family Name:</b> _____</p> <p><b>Given Name(s):</b> _____</p> <p><b>Date of Birth:</b> _____ / _____ / _____</p> <p><b>Residential Address:</b></p> <p>No/Street/Section: _____</p> <p>Town _____</p> <p><b>Postcode</b> _____</p> <p><b>Gender:</b>    <b>M</b>    /    <b>F</b></p>	<p><b>Home School:</b> _____</p> <p><b>Year Level in 2010:</b> _____</p> <p><b>Phone: Home:</b> _____</p> <p style="text-align: right;"><b>Mobile:</b> _____</p> <p><b>E-Mail Address:</b> _____</p> <p><b>Preferred Method of Contact:</b> (please circle one or more)</p> <p style="text-align: center;">Home Ph    /    Mobile    /    E-Mail    /    Post</p>
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### EMERGENCY CONTACT – Parent/Caregiver

Name .....	Address .....
Phone Home.....	Work ..... Mobile .....

I undertake to meet the expectations of this program and I understand that:

- ✓ *It is my responsibility to make the necessary transport arrangements*
- ✓ *Full attendance is a requirement of the course.*
- ✓ *Accreditation will be issued through a Registered Training Organisation on satisfactory completion of the course*
- ✓ *Final enrolment will need to be confirmed by the home school VET Coordinator*

Signed: \_\_\_\_\_

(Student)
(Parent / Caregiver)
(Course Counselor)

(Forms must be signed by Parent / Caregiver if student under 18 Years of age)

#### Selection Guidelines - selection for entry to courses will be based on one or more of the following guidelines:

Identified relevant interest and/or previous experience; demonstrated capacity for independent learning; identified career pathway; recommendation by school VET Coordinator / Course Counsellor:

**Students are encouraged to provide evidence through a written statement, which can be attached to this Application form.**

I confirm that ..... has met the selection guideline requirements for the above named course.

VET Coordinator: ..... Date:        /        / 2009

**\*\*PLEASE RETURN COMPLETED FORM TO THE VET COORDINATOR AT YOUR HOME SCHOOL\*\***