



Trade Training Course Application Form.

- I wish to apply for enrolment at Saint Yon Trade Training Centre at LaSalle Catholic College. I acknowledge that all lessons will be conducted at LaSalle (Times to be confirmed) and my school will have to approve this application. I understand that my application is not confirmation of a place and that I will be informed in due course of my success with this application.
- I realise if applying for the Industry Based Learning (*School based apprenticeship*) Class that I will also need to complete the enrolment process/forms for full-time enrolment at LaSalle Catholic College. I will also need to attend a formal enrolment interview.

Course Details

Course Name			
Intended Pathway: Which statement best describes your plan for year 11 and 12	I intend to undertake a School Based Apprenticeship <i>(If 'Yes' please complete Application for Enrolment at LaSalle Catholic College Bankstown)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I intend to undertake an ATAR pathway	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I intend to undertake a NON-ATAR pathway	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I am currently in year 9 and will be starting this course as a year 10 student	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Student Details

Name of Student			
Current School		Current Year Level	
Board of Studies No:	<i>(Please see your year coordinator if unsure)</i>		
USI number*	<i>(You need to apply for this at www.usi.gov.au)</i>		
Date of Birth		Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality		Religion	
Do you speak a language other than English at home?			
Indigenous Identifier	Is the student of Aboriginal or Torres Strait Islander origin? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>(If yes please <input checked="" type="checkbox"/> one below)</i> <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both		
Residency Status	<input type="checkbox"/> Australian Citizen <input type="checkbox"/> New Zealand Citizen <input type="checkbox"/> Australian Permanent Resident <input type="checkbox"/> Other		
Medical Details	Doctor Name:		
	Phone:		
	Medicare No:	Expiry date	
	Medical Conditions: <i>e.g Anaphylaxis</i>		



Additional needs Please explain and Attach additional documentation if required	Please indicate whether the student applying for enrolment has any known or suspected additional needs		
	Physical Needs <input type="checkbox"/> Yes <input type="checkbox"/> No	Medical Needs <input type="checkbox"/> Yes <input type="checkbox"/> No	Educational Needs <input type="checkbox"/> Yes <input type="checkbox"/> No
	Sensory Needs (<i>Vision and/or hearing impairment</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No	English Language support <input type="checkbox"/> Yes <input type="checkbox"/> No	Any other additional needs (<i>please specify</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No
	Does this student currently receive support for these additional needs? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Explanation:		

Contact Details

Contact Parent Name			
House / Unit Number		Street Name	
Suburb		Postcode	
Email Address (Parent)		Mobile (Parent)	
Email Address (Student)		Mobile (Student)	
Work Phone		Home Phone	
Mailing Address (if different)			

Documentation & Evidence

Have you completed or are you currently completing any VET studies?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>If 'Yes' please give details, attach appropriate documentation</i>)
Do you have a WH&S White Card?	<input type="checkbox"/> Yes <input type="checkbox"/> No (<i>If 'Yes' please include a copy with this application</i>)
Explain in the space provided why you want to undertake a program of training in the course/s chosen	



Why you want to join the apprenticeship class? (if applicable)			
Attitude – Commitment - Safety	I am willing to behave appropriately, commit to my Training and wear the Saint Yon uniform, as required. <input type="checkbox"/> Yes		
Student Signature		Date	

Parent Declaration

Please indicate in the space provided why you support your child's application			
The fee structure for external students in 2017 is \$285 per year for each course <i>This fee is for Systemic Sydney Catholic Colleges, other applications will attract higher fees You will be billed at the school where you have full time enrolment. Fees for LaSalle students are as per the school subject handbook</i>	I am willing to support this financial commitment: <input type="checkbox"/> Yes		
Parent Name <small>Please print</small>			
Parent Signature			
Date			

Principal Support I Support this student application

Principal Name <small>Please print</small>			
Principal Signature		Date:	