CHELTENHAM SECONDARY COLLEGE VET ENROLMENT FORM 2015

Please print clearly

Surmame: Date of Birth: Given Name: Gender – Male/Female Postal Address: Subarb: Post code: Mometelephone number: Student Mobile Number: Email: VCE or CAL student Mobile Number: Email: VCE or CAL student Mobile Number: Email: VCE or CAL student Mobile Number: Email: VCE VCE VCE Aboriginal/Torres Strail Islander descent? Yes / No Non-English Speaking background? Yes / No Do you any disabilities? Telearing Physical Intellectual Itearing Physical Other (specify) On or require assistance for any of the above disabilities? Emergency Contact Details Name: Contact Number: Program Details Program Details Iteranoper and the above disabilities? Program Details Program and obtain the VET/Pathways Certificate I must meet the requirements of the VET course and my VCE/VCAL. I will endeavour to keep up to date with my studies. I agree to abide by the rules of Chethenham Secondary College Student Information Manual incorporating the Code of Conduct and Pataver and the Complex and the discusted or safety, punctuality, attendance and the coordination of the VET co	Student Details					
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	□ No, I do not agree					

School Endorsement			
The VET/VCAL/Careers Coordinator must endorse that the student is deemed suitable for the program. I endorse that			
the above named student has undertaken course/careers counselling and is deemed suitable to undertake this program.			
School Representative:	Position:		
School Name:			
Phone Number:	Email Address:		
Signature:	Date:		
Please return this completed form Attention to the Careers & Pathways Leader, Cheltenham SC			
Bernard St Cheltenham 3192			
Phone: 9555 5955	Fax: 9555 8857		