



Student Application Form

| STUDENT DETAILS | | | |
|---|--|--|--|
| Surname: | | Given Name/s: | |
| Date of Birth: | | | |
| Course Applying For? | | | |
| Current School: | | Current Year Level | |
| Student School Email: | | | |
| Student Personal Email: (Not parent) | | | |
| Student Personal Mobile: (Not parent) | | | |
| LUI Number | | USI Number: (Mandatory) | |
| Aboriginal or Torres Strait Islander? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Non-English Speaking Background? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Medical Conditions or Allergies: | | | |
| Have you completed or are you enrolled for a fully funded course using your Career Ready funding? (Please check with your VET Co-ordinator or HOD at your school to answer correctly) | | | |
| <input type="checkbox"/> No <input type="checkbox"/> Yes | | If YES – please list the course: | |
| APPLICATION SUPPORTING DOCUMENTATION CHECKLIST | | | |
| Please ensure the following is completed and/or attached to your application | | | |
| <input type="checkbox"/> Current Report Card <input type="checkbox"/> Current Resume <input type="checkbox"/> Current Reference <input type="checkbox"/> Base school Endorsement <input type="checkbox"/> Signature Declaration | | Have completed your White Card Course? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes please provide a copy of your White Card and Statement of Attainment. | |
| PRIMARY CARE GIVER DETAILS (1) | | | |
| Parent/Carer's Name: | | | |
| Relationship to Student: | | | |
| Residential Address: | | | |
| Mobile Number: | | Work Number: | |
| Email Address: | | | |
| PRIMARY CARE GIVER DETAILS (2) | | | |
| Parent/Carer's Name: | | | |
| Relationship to Student: | | | |
| Residential Address: | | | |
| Mobile Number: | | Work Number: | |
| Email Address: | | | |

STUDENT APPLICANT TO COMPLETE THIS SECTION

1. What is the name of the course you are applying for at the Sunshine Coast Technical Trade Training Centre?

2. Why do you want to undertake this course?

3. List the subjects you have selected for next year. Why did you choose these?

4. What is the best thing about school? Why?

5. What is your least favourite thing about school? Why?

6. Are you punctual to school and your classes? Do you have any unexplained absences from school? Why?

7. What is your behaviour and effort like at school? Have you received in school Detentions or been suspended from school? Please Explain?

8. List any special achievements (eg. Awards, Certificates, Community Involvement). Which one are you most proud of and why?

9. Have you completed work experience whilst at school? Tell me more about this experience.

10. Do you have a part time job? How did you get this job? How long have you worked? What are your shifts?

11. What interest and commitments do you have outside of school? Including sports, community or social interests and personal hobbies.

12. Why do you want to work in your chosen trade?

13. What do you know about the industry and what are your career aspirations or goals?

14. What are 3 personal qualities that best describe you as a person?

15. Why do you think you are the best candidate for a place in the course?

BASE SCHOOL TO COMPLETE THIS SECTION

For Student:

By acknowledging this application, the staff member agrees:

- The student applicant has been fully vetted against SCTTTC eligibility criteria for academic achievement, attendance, effort and behaviour.
- All school financial obligations have been met to date.

Has this student accessed or are likely to access their VETis/Career Ready funding?

ie Cert II Construction Pathways

☐ No ☐ Yes

If YES – please list the course:

Additional Information

Identified Medical Conditions:

Identified NCCD Disability:

Identified Learning Challenges:

Recommendation Comments:

For State School Students, please email students OneSchool Profile to sctttcadmin@caloundrashes.eq.edu.au as an extension to this application

Staff Member Name:

Position HOD or above:

School Name:

Signature:

Date:

STUDENT AND CARE GIVER TO COMPLETE THIS SECTION

Student and Parent/Care Giver Declaration

I/we understand:

- This is an application to study a nominated course at the Sunshine Cast Technical Trade Training Centre
- I declare that the information supplied by me is true, correct and complete in every aspect.
- I understand that following this application, the student will be required to attend an interview to ascertain eligibility and commitment to the course of study.
- I understand this application does not guarantee acceptance of placement as SCTTTC.
- I agree to the terms and conditions of enrolment at SCTTTC, including payment of all associated fees.

I have provided the following documents with this application:

- ☐ Current Report Card
☐ Current Resume
☐ Current Reference

For State School Students only:

☐ Parental Approval given for students OneSchool Profile be emailed to SCTTTC Initial here_____

Student Signature:

Parent/Carer Signature:

Date:

Date: