

ELECTROTECHNOLOGY PRE-APPRENTICESHIP PROGRAM
APPLICATION

OFFICE USE ONLY
Date received:

PERSONAL DETAILS:		
LAST NAME:		
FIRST NAME/S:		
PREFERRED NAME:		
GENDER: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE		
RESIDENTIAL ADDRESS:		
SUBURB:	POST CODE:	TELEPHONE NO:
POSTAL ADDRESS:		MOBILE NO:
SUBURB:	POST CODE:	EMAIL ADDRESS:
IF YOU ARE UNDER 18 YEARS OF AGE, PLEASE PROVIDE YOUR GUARDIAN'S DETAILS		
LAST NAME:		TELEPHONE NO:
FIRST NAME/S:		MOBILE NO:
RESIDENTIAL ADDRESS:		EMAIL ADDRESS:
SUBURB:	POST CODE:	RELATIONSHIP (EG MOTHER):
CITIZENSHIP		
<input type="checkbox"/> AUSTRALIAN CITIZEN/PERM. RESIDENT <input type="checkbox"/> NEW ZEALAND PASSPORT HOLDER		
<input type="checkbox"/> OTHER VISA DOCUMENT NUMBER:		EXPIRY DATE:
<i>(Document will need to be sighted & copied verifying entitlement to work in Australia)</i>		
I WISH TO PARTICIPATE IN THE ELECTROTECHNOLOGY PRE-APPRENTICESHIP PROGRAM. MY GOAL IS TO SECURE AN APPRENTICESHIP –		
IN THE _____ INDUSTRY		
BECAUSE: _____		

WHEN DID YOU COMPLETE SCHOOL? MONTH: _____ YEAR: _____		
WHAT WAS THE LEVEL YOU COMPLETED: <input type="checkbox"/> YEAR 9 <input type="checkbox"/> YEAR 10 <input type="checkbox"/> YEAR 11 <input type="checkbox"/> YEAR 12		
NAME OF SCHOOL: _____		
SINCE LEAVING SCHOOL HAVE YOU COMPLETED ANY OF THE FOLLOWING [PLEASE ATTACH COPIES OF RESULTS/CERTIFICATES/LICENCES]:		
<input type="checkbox"/> CERTIFICATE LEVEL II / III	YEAR COMPLETED: _____	
<input type="checkbox"/> TRADE – CERTIFICATE III	YEAR COMPLETED: _____	
<input type="checkbox"/> OTHER	YEAR COMPLETED: _____	

DO YOU HAVE CURRENT CERTIFICATION IN ANY OF THE FOLLOW:

- CONSTRUCTION GENERIC INDUCTION (WHITE CARD) MINING GENERIC INDUCTION
 FIRST AID CERTIFICATE OTHER _____

SKILLS / PERSONAL QUALITIES / HOBBIES

WHAT SKILLS / PERSONAL QUALITIES DO YOU HAVE THAT MIGHT SUPPORT YOUR APPLICATION?

WHAT ARE YOUR INTERESTS / HOBBIES?

ARE YOU A MEMBER OF THE FOLLOWING GROUPS?

(If you are Aboriginal & Torres Strait Islander, please tick both)

- ABORIGINAL AUSTRALIAN SOUTH SEA ISLANDER UNEMPLOYED FOR 12 MONTHS OR MORE
 LIVING IN A COUNTRY OR REMOTE AREA TORRES STRAIT ISLANDER

HAVE YOU PREVIOUSLY REGISTERED WITH TORGAS? YES NO

DECLARATION

I am aware of the nature and content of the information in my registration / attachments and agree to the release of information and/or document/s to prospective employers of the educational sector for the purpose of employment services to me.

I certify that, to the best of my knowledge, the information recorded in this registration form and attachments are complete, true and accurate.

I am aware that my personal information may be supplied to Federal and/or State Government authorities in accordance with reporting requirements.

Signature: _____ Date: _____

Guardian's Signature: _____ Date: _____
(if under 18 years of age)

Attached are copies of my:

- Resume [Registration will not be accepted without your resume]
 School Results [If out of school for 5 years of less]
 Training Results eg TAFE, Construction Generic Induction etc
 Licences