

Yr 9 2025 VET COURSE EXPRESSION OF INTEREST form

Name: _____ 2025 Mentor Group: _____

Date of Birth: ____ / ____ / ____ Gender: Female / Male / Non-binary

USI Number: Student ID: _____

Students intending to undertake a Vocational Education and Training (VET) course are required to provide a USI number. To generate a USI number go to www.usi.gov.au

Student Mobile: _____ Student Email: _____

Does the student identify as Aboriginal or Torres Strait Islander? Yes / No

Support needs - Select any that are applicable:

The student has a negotiated education plan

The student has a known disability Details: _____

VET Course Name: _____

VET Course Code: _____ Course Provider: _____

Course Location: _____ SACE Credits: _____

Course duration: _____ Course Cost: \$ _____ (this will be invoiced to the family)

Parent/Caregiver Information

Parent/Caregiver name: _____

Parent/Caregiver contact number: _____

Parent/Caregiver contact Email: _____

DECLARATION

I agree to _____ (*Student name*)

applying for the above VET Course and understand and agree to the payment of the VET course costs.

Signed (Parent/Caregiver) _____ Date ____ / ____ / ____

Signed (Student) _____ Date ____ / ____ / ____

Please Note

Completion of this form does not guarantee entry into any program

I understand that by signing this agreement the total cost to participate in this program will become legally recoverable.