GLENUNGA INTERNATIONAL HIGH SCHOOL

Excellence[PB]
Opportunity[U]
International Mindedness
Harmony

2027 Yr 11 & 12 VET COURSE EXPRESSION OF INTEREST form

Name: _____ 2027 Mentor Group: _____

Date of Birth: _____ / _____ / _____ Student ID: _____ SACE ID: ☐☐☐☐☐☐☐☐☐☐

Daymap/Portfolio/Records/Registration ID Numbers

USI Number: ☐☐☐☐☐☐☐☐☐☐

Students undertaking 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: _____@schools.sa.edu.au

Australian Citizen ☐ Permanent Australian resident ☐ or Visa number _____

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

Gender: Female / Male / Non-binary

International Student: Yes / No

Support needs - Select any that are applicable:

☐ The student has a negotiated education plan

☐ The student has a known disability Details: _____

☐ The student is under the Guardianship of the Minister

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: _____

**Bigpond Email addresses are not accepted due to known issues with VETRO process.*

VETRO Evidence

You will need to provide evidence in one of the following categories related to your chosen VET course. This evidence is then assessed by the RTO through the VETRO process. It is at the training providers discretion to determine whether the evidence meets eligibility requirements. Approved VET evidence must be relevant to the Flexible Industry Pathway. Please note VETRO evidence is a compulsory requirement for full certificate VET courses.

Tick or highlight the evidence has been met:

Category of activity	Type of activity	Done/to do
Relevant Industry Exposure	Part Time / Casual Work Volunteering Family Business Unpaid Work Virtual Work Experience Onsite Work Experience Training Work Placement	☐ ☐ ☐ ☐ ☐ ☐
Relevant Accredited Training	Short VET course Certificate course Other:	☐ ☐ ☐
Relevant SACE Curriculum-based Project Work	Industry immersion activity Linked to EIF/AIF focus Workplace Practices Stage 1 or 2 Other SACE subject work	☐ ☐ ☐ ☐

OR: I will need to organise VETRO evidence ASAP: ☐

DECLARATION

I _____agree to _____

Parent / Caregiver name ***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.