

## VET Program Enrolment / Withdrawal Form

PLEASE PRINT CLEARLY

### 1. Student Details

Surname																								
Given Names																								
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>																						
Postal Address																								
Suburb																			Postcode					
Home Telephone	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Mobile																						
Email Address																			VCE <input type="checkbox"/>	VCAL <input type="checkbox"/>	<i>if applicable</i>			
School Currently Attending																			Current Year Level					
Are you of Aboriginal or Torres Strait Island descent?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are you from a Non-English Speaking Background?	Yes <input type="checkbox"/>	No <input type="checkbox"/>																			
Do you have any disabilities?	Visual/Sight/Seeing <input type="checkbox"/>	Hearing <input type="checkbox"/>	Physical <input type="checkbox"/>	Intellectual <input type="checkbox"/>	Chronic Illness (e.g. asthma) <input type="checkbox"/>																			
	Learning <input type="checkbox"/>	Other <i>please specify</i> <input type="text"/>																						
Do you require assistance because of your disability?	Yes <input type="checkbox"/>	No <input type="checkbox"/>																						

### 2. Program Details

Program Name																								
	First Year <input type="checkbox"/>	Second Year <input type="checkbox"/>	Withdrawal <input type="checkbox"/>	If you are WITHDRAWING please go to section 8																				
Training Location																								

### 3. Emergency Contact Details

Name																								
Relationship to student																			Contact Number					
Name																								
Relationship to student																			Contact Number					

### 4. Student Agreement

I have read the Students Guidelines and have discussed my participation in the program with my parents/guardians. I understand that to complete the program and gain the VET Certificate I must meet the requirements of both the VET course and my VCE or VCAL. I will endeavour to keep up to date with my studies. I agree to abide by the rules of the training centre, Youth Connect's work placement requirements and companies in which I work, including those rules relating to safety, punctuality, attendance and the coordination of work placements.

Student's Signature																			Date			
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### 5. Parent/Guardian Endorsement

I consent to my child taking part in this program. My child has consulted me about his/her involvement in the program and I understand the commitment required. I agree that he/she will be subject to the direction and control of the nominated supervisor of the employer and/or training centre and I expect my child to obey all reasonable rules governing safety and behavior. I also acknowledge that it is my child's responsibility to attend all classes throughout the year. In the event of illness or accident to my child, I understand I will be notified as soon as possible, but where it is not possible to communicate with me within a reasonable time frame (in the circumstances), I authorise the person in charge at the workplace or training centre to consent to my child receiving such medical and surgical treatment (including the administration of an anesthetic) as may be deemed necessary by a legally qualified medical practitioner. I understand that the employer and/or training centre will take all reasonable care for the safety and health of my child.

Student's Signature																			Date			
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Please continue your enrolment application form on the other side →

PLEASE PRINT CLEARLY

## 6. Photo Release

I give permission for Youth Connect to use and publish my child's first name with the photographs and/or videos that contain images of my child in publications (including newsletters, websites, brochures, newspaper articles or press releases and guides) that will be shared with the wider community and public or for reporting purposes.

Yes, I agree to having my child's images released for marketing purposes  No, I do not wish my child's images to be used for marketing purposes

## 7. School Endorsement- VET, VCAL or Careers Coordinator, Principal or Vice/Assistant Principal

The school 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/career counselling and is deemed suitable to undertake this program.

School Representative	<input type="text"/>		
Position	<input type="text"/>	School Name	<input type="text"/>
Telephone	<input type="text"/>	Email	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>

## 8. Withdrawals

Why have you decided to exit from your VET Program?

Were you happy with the service provided to you by Youth Connect (e.g. work placement support)? Yes  No

Any suggestions about how Youth Connect can improve its service?

## 9. School Endorsement- VET, VCAL or Careers Coordinator, Principal or Vice/Assistant Principal

The school has read the 'Withdrawals Procedure' and will be responsible for any expenses that may have been incurred during the student's enrolment period.

School Representative	<input type="text"/>		
Position	<input type="text"/>	School Name	<input type="text"/>
Telephone	<input type="text"/>	Email	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>

### Privacy Information:

The information provided on this form is for the registration and administration of students participating in Youth Connect administered VET Program and related structured workplace learning arrangements and in addition to your school, will be disclosed to the person in charge at the workplace or training centre. The information may be used for government reporting purposes, in a statistical format only. The information provided will not be used for any other purposes.

### Withdrawals Procedure:

Students have a four-week "cooling off" period to withdraw from their Youth Connect VET program, without incurring the full training cost (includes their fourth class/ week of training), as long as the withdrawal is given in writing to a Youth Connect staff member within this time-frame. A Withdrawal Form must be completed and signed by the student, their parent/guardian and their VET, VCAL or Careers Teacher/Coordinator- this is available on the Youth Connect website. Any Withdrawal Form received after the four week cooling off period will incur the full course costs, including the Youth Connect fee.

### OFFICE USE ONLY

Received	<input type="text"/>	Confirmation Form Sent	<input type="text"/>
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