

Expression of interest form for 2018 intake EQIP Health Support Services

| | | | |
|--|---------|--|--|
| Student Name: | | Date of Birth: | |
| Address: | | School: | |
| Home phone: | | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say | |
| Parent/Guardian Details | Name: | | |
| | Mobile: | | |
| | Email: | | |
| Unique Student Identifier (USI) <i>From 1 January 2015, all students undertaking nationally recognised training need to have a Unique Student Identifier (USI). This includes students doing Vocational Education Training (VET) in schools.</i> <i>If you don't have one go to http://www.usi.gov.au/ to create.</i> Applications will not be considered without a USI number. | | | |
| What year are you currently in at school? | | <input type="checkbox"/> Year 10 <input type="checkbox"/> Year 11 | |

EQIP Health Support Services

Course offered – 1 year program commencing in year 11 or 12

Delivered in terms 2 and 3 of the 2018 school year

- Certificate II Health Support Services

Have you completed or undertaken any of the following?

Yes No

 Work experience. Name the industry and employer:

•

•

 Construction Industry White Card

 Another EQIP Program:

EBITS ED2CC PREQIP ETCGR EPMA EHSS EESC

Are you an Australian Citizen or permanent resident? YES NO

Do you identify as Aboriginal or Torres Strait Islander? YES NO

- I am aware applications are considered by preference and I may have to participate in an interview
- I am aware there is a student levy of \$180 to participate in the program
- I have attached my current report card, resume and teacher references
- I have included my USI number of this form

Student Signature: _____ Parent Signature: _____

Office use only: Received:/...../..... Processed...../...../.....

How to return completed forms:

Complete this form, attach your report card, resume and two teacher references. Submit no later than 8th December 2017.

Email: admin@eqjggladstone.com.au

Post: EQIP Gladstone
 PO Box 260, Gladstone QLD 4680

In person: Senior School Coordinator at your State High School
 OR
 EQIP Technical College, Boles Street, Gladstone QLD 4680

Contact: Phone: 07 4976 6129 or 0418 745 848



Student Application Teacher Reference

Student Name: _____

Student Year Level: _____

Teacher's Name: _____

Subject taught: _____

Dear Teacher,

Due to limited places and an anticipated high demand for applications into EQIP Programs, we are asking students to apply for a position in the 2018 intake.

Part of the application process for entry into an EQIP Program requires the student to submit a completed application form and supporting references from their current teachers. Your comments and the information regarding this student will assist centre staff to determine their suitability for the program.

Regards,
EQIP Gladstone

(Please indicate your rating for the above student in the following areas. Any additional comments would be welcome)⁴

| | A | B | C | D | E |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Positive attitude to his/her studies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Effort in completing his/ her work to the best of ability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cooperation with the teacher in in-class activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Level of politeness to yourself | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Completion of homework | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Completion of tasks in class time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attempting assessment task to the best of his/her ability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cooperation and willingness to work with fellow students | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Consistency of attendance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Punctuality to class | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Additional comments: _____ _____ | | | | | |
| Signature: _____ | Date: _____ | | | | |



Student Application Teacher Reference

Student Name: _____

Student Year Level: _____

Teacher's Name: _____

Subject taught: _____

Dear Teacher,

Due to limited places and an anticipated high demand for applications into EQIP Programs, we are asking students to apply for a position in the 2018 intake.

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Regards,
EQIP Gladstone

(Please indicate your rating for the above student in the following areas. Any additional comments would be welcome)

| | A | B | C | D | E |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Positive attitude to his/her studies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Effort in completing his/ her work to the best of ability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cooperation with the teacher in in-class activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Level of politeness to yourself | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Completion of homework | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Completion of tasks in class time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attempting assessment task to the best of his/her ability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cooperation and willingness to work with fellow students | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Consistency of attendance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Punctuality to class | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Additional comments: _____ _____ | | | | | |
| Signature: _____ | Date: _____ | | | | |