

Expression of interest form for 2018 intake

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.			
Confirm you will commence year 10 in 2018?		<input type="checkbox"/> YES	

Have you completed or undertaken any of the following?

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Work experience. Name the industry and employer: |
| | | • |
| | | • |
| <input type="checkbox"/> | <input type="checkbox"/> | Construction Industry White Card |

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 \$70 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 and two teacher references.

Email: admin@eqipgladstone.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

PREQIP

Course offered – 1 year program commencing in year 10

*Available to students who identify as Aboriginal or Torres Strait Islander
Delivered in terms 2 and 3 of the 2018 school year*



Which traditional owner group do you identify with?

- Gooreng Gooreng
- Gurang
- Tarebilang Bunda
- Bailai
- Other

Sponsored by Australia Pacific LNG, Shell QGC and Santos GLNG



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.

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)

	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: _____				