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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant details** | | | | | | | | | |
| **Given name (first name):** | |  | | **Surname (family name):** | | |  | | |
| **Title:** | | Mr  Mrs  Miss  Ms | | | **Gender:** | | Male  Female | | |
| **Address:** | |  | | | | | | | |
| **Date of Birth:** | |  | **Current age:** | | |  | | | |
| **Phone number:** | |  | **Email address:** | | |  | | | |
| **Unique Student Identifier:** | |  | **Do you have a concession/pension card?** | | | | | | Yes  No |
| **Parent / guardian details** | | | | | | | | | |
| **Full name:** | |  | | | | | | | |
| **Phone number:** | |  | **Email address:** | | |  | | | |
| **Education** | | | | | | | | | |
| **High School:** | |  | | | | | | | |
| **Highest school level completed:** | | Year 10  Year 11  Year 12  Other (provide details below) | | | | | | | |
| **Year of completion:** | |  | | **Current School year level:** | | | |  | |
| **School name:** | |  | | | | | | | |
| **Other Qualifications (if any)** | | | | | | | | | |
| **Qualification level:** | | Certificate IV  Certificate III  Certificate II  Certificate I  Other | | | | | | | |
| **Name of course:** | |  | | | | | | | |
| **Course provider** | |  | | | | | | | |
| **Date commenced:** | |  | | **Date completed:** | | | |  | |
| **Traineeship information** | | | | | | | | | |
| **Have you previously worked as an apprentice / trainee?** | | Yes  No | | **Are you currently undertaking other studies?** | | | | Yes  No | |
| **Preferred Traineeship:** | Horticulture  Warehousing | | | **Can you attend 2 days a week?** | | | | Yes  No | |

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| **Why would you like to do a traineeship at Mambourin?** |
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| **Parent / guardian authorisation** (trainee may sign if over 18) |
| In signing this form, I am confirming that I am aware that my child is interested in pursuing a traineeship with Mambourin.  I authorise Mambourin to use the information on this form to assess my child’s suitability to undertake a traineeship. I understand that at times, Mambourin might need to provide relevant third-parties (such as training providers, apprenticeship centres and government regulators) with some of the information on this form for the purpose of determining my child’s eligibility.  Mambourin’s privacy policy can be found at <http://www.mambourin.org/wp-content/uploads/2014/12/Policy-Privacy-1.pdf>.  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

* Please attach your resume to this Expression of Interest Form, if you have one.
* return this form via email to [traineeships@mambourin.org](mailto:traineeships@mambourin.org)

or in person at: 159 Derrimut Drive, Derrimut VIC 3030

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| **OFFICE USE ONLY** | | | |
| **Date EOI received:** |  | **Date assessed:** |  |
| **Date applicant contacted:** |  |  |  |
| **Notes:** |  | | |