



								•		
School:										
Address:						These applications are based on the suitability of the programs meeting the individual learner needs as determined by the school coordinator making the applications.				
							leted form to: vetis@			
Contact name:						Monday 4th Se	All fields must be completed. Applications for 2024 courses open Monday 4th September and close on Friday 17th November 2023. Late applications will be added to a waiting list.			
Telephone: Email address:						Jenny Anthony	ormation please con	tact		
VETDSSS school coordinator signature:  Date:				T: 03 9209 5109 E: vetis@holmes						
By submitting this applie	ation form you acknowledge t	that your scl	nool is comm	itting to a VET	iS Purchasing	g Contract with	Holmesglen.			
1. Student name (First and surname):					Date of birth:		Gender:	Australian C	itizen:	
Address:	Address:									
Suburb: Postcode:	Student mobile:		Student e-mai	I address:						
Program:						Campus:		Time:	Year:	
Does this student have the appropriate Language literacy and numeracy (LLN	) skills for this program?: Yes	No Doe	s this student ha	ve a disability:	Yes No	If yes, give det	ails:			
Does this student require additional support for this VET program: Yes	No If yes, what arrangeme	ents have you p	ut in place to fac	ilitate this support	i:					
2. Student name (First and surname):					Date of birth:		Gender:	Australian C	itizen:	
Address:										
Suburb: Postcode:	Student mobile:		Student e-mai	l address:						
Program:						Campus:		Time:	Year:	
Does this student have the appropriate Language literacy and numeracy (LLN	) skills for this program?: Yes	No Doe	s this student ha	ve a disability:	Yes No	If yes, give det	ails:			
Does this student require additional support for this VET program: Yes	Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



3. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:						
4. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:										
Address:	Address:									
Suburb: Postcode: Student mobile: Student e-mail address:										
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:						
5. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program: Campus: Time: Year:										
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:										



6. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:								
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:					
7. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	: Postcode: Student mobile: Student e-mail address:								
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:					
8. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



9. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									
10. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:									
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	udent e-mail address:					
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	s this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
11. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:									
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



12. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	Ooes this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:								
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									
13. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:									
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	s this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
14. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:									
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



15. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:										
16. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:										
Address:	Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	e-mail address:						
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:	-					
17. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program: Campus: Time: Year:										
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:										



18. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:	Student e-mail address:						
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:										
19. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:										
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
20. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program: Campus: Time: Year:										
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:										



21. Student name (First and surname):				Date of birth:		Gender:	Australian C	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
22. Student name (First and surname):     Date of birth:     Gender:     Australian Citizen:									
Address:									
Suburb:	Suburb: Postcode: Student mobile: Student e-mail address:								
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
23. Student name (First and surname):				Date of birth:		Gender:	Australian C	litizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:									
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



24. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:										
25. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:										
Address:	Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	ent e-mail address:						
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:	-					
26. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program: Campus: Time: Year:										
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:										



27. Student name (First and surname):				Date of birth:		Gender:	Australian 0	litizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
							1		
28. Student name (First and surname):     Date of birth:     Gender:     Australian Citizen:									
Address:									
Suburb:	Suburb: Postcode: Student mobile: Student e-mail address:								
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	s this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
29. Student name (First and surname):				Date of birth:		Gender:	Australian (	litizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:									
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



30. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	Oces this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:								
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									
31. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:									
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	tudent e-mail address:					
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
32. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:									
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



33. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	Oces this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:								
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									
34. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:									
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	Student e-mail address:					
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:	-				
35. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:									
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



36. Student name (First and surname):	36. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:								
Address:							J L		
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:								Year:	
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:					
37. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	dress:					
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:					
38. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:							Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



39. Student name (First and surname):				Date of birth:		Gender:	Australian	Australian Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:	Student e-mail address:						
Program: Campus: Time: Year:								Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
40. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
41. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for the	Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



42. Student name (First and surname):				Date of birth:		Gender:	Australian (	Australian Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:							Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	s this student have a disability:	Yes N	o If yes, give det	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you pu	ut in place to facilitate this support	t:					
43. Student name (First and surname):				Date of birth:		Gender:	Australian (	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	ent e-mail address:					
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	s this student have a disability:	Yes N	o If yes, give det	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you pu	ut in place to facilitate this support	t:					
44. Student name (First and surname):				Date of birth:		Gender:	Australian (	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Yea						Year:			
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?:  Yes  No  Does this student have a disability:  Yes  No  If yes, give details:									
Does this student require additional support for t	Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:								



45. Student name (First and surname):				Date of birth:		Gender:	Australian	Australian Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:	Student e-mail address:						
Program: Campus: Time: Year:								Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
46. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:	iil address:						
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
47. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						



48. Student name (First and surname):  Date of birth:  Gender:  Australian Citizen:								Citizen:	
Address:				<u> </u>					
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:								Year:	
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:					
49. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:	dress:					
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this suppor	t:					
50. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:							Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



51. Student name (First and surname):				Date of birth:		Gender:	Australian	Australian Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:	Student e-mail address:						
Program: Campus: Time: Year:								Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
<b>52. Student name</b> (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:	il address:						
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
53. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						



54. Student name (First and surname):				Date of birth:		Gender:	Australian Ci	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Гime:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	s this student have a disability:	Yes N	o If yes, give det	ails:			
Does this student require additional support for t	his VET program: Yes	No If yes, what arrangements have you pu	ut in place to facilitate this support	t:					
55. Student name (First and surname):				Date of birth:		Gender:	Australian Ci	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Гіme:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	s this student have a disability:	Yes N	o If yes, give det	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you pu	ut in place to facilitate this support	t:					
56. Student name (First and surname):				Date of birth:	:	Gender:	Australian Ci	itizen:	
Address:				-					
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:							Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



57. Student name (First and surname):				Date of birth:		Gender:	Australian	Australian Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:	Student e-mail address:						
Program: Campus: Time: Year:								Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
58. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:				
Does this student require additional support for the	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:						
59. Student name (First and surname):				Date of birth:		Gender:	Australian	Citizen:		
Address:										
Suburb:	Postcode:	Student mobile:	Student e-mail address:							
Program:					Campus:		Time:	Year:		
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:										
Does this student require additional support for the	Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									



60. Student name (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program: Campus: Time: Year:								Year:	
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
<b>61. Student name</b> (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language	e literacy and numeracy (LLN)	skills for this program?: Yes No Doe	es this student have a disability:	Yes N	o If yes, give deta	ails:			
Does this student require additional support for t	this VET program: Yes	No If yes, what arrangements have you p	ut in place to facilitate this support	t:					
<b>62. Student name</b> (First and surname):				Date of birth:		Gender:	Australian C	itizen:	
Address:									
Suburb:	Postcode:	Student mobile:	Student e-mail address:						
Program:					Campus:		Time:	Year:	
Does this student have the appropriate Language literacy and numeracy (LLN) skills for this program?: Yes No Does this student have a disability: Yes No If yes, give details:									
Does this student require additional support for this VET program:  Yes  No  If yes, what arrangements have you put in place to facilitate this support:									