

SCIPS Application
Australian School-Based Traineeship/Apprenticeship

SCIPS USE ONLY

Application No:
 Date:
 Received:

Please complete all details and attach a current **Resume & Cover Letter**. Return both to your School Coordinator, or the SCIPS Coordinator.

Surname: First Name/s:.....
 Gender: Date of Birth:
 Address: Post Code:
 Home Phone No: Mobile No:
 Email:
 School: 2011 Year level:

Give brief details of any previous paid or unpaid work experience:

Employer Details	When e.g. June 2006	How long e.g. Months / Years	Type of Work

In which Industry do you wish to work? :
(Please indicate position reference number if applicable)

Describe why you wish to do this School-based Traineeship / Apprenticeship:

Include why this Industry appeals to you; why you feel you are well suited to this type of work; what can you bring to the job.

.....

Student Signature: **Date:**

Parent / Guardian's authorisation.

If you are under eighteen (18) years of age your parent or guardian is required to complete this section:

Name:
Address:
Home Phone No: **Work Phone No:** **Mobile No:**

Signature:..... **Date:**