

We can help you fill out this form if you like.

# APPLICATION FOR INTERVIEW

## FOR ALL COURSES

## DEPARTMENT OF WORK EDUCATION

The Work Education Department at Melbourne Polytechnic, provides high quality pre-vocational and Vocational Education and Training (VET) to students with a range of disabilities to improve their employability, work readiness and life skills.

This is an Application for Interview prior to consideration of entry into any of the above courses. Interviews form part of the selection process to determine suitability.

**All applicants must be 16 years and over and not attending school.** All applicants will be acknowledged by mail and will be contacted with regard to an interview.

In making your application for consideration of acceptance into the course of your interest, you are agreeing to the Department of Work Education checking on your previous educational history and requesting further details from the referring person / agency.

**Please fill in the attached form and return to:**

KATHY KONDEKAS  
Manager  
Melbourne Polytechnic  
Department of Work Education  
Building W106  
77 St Georges Road  
PRESTON 3072

Phone: 9269 8390 / 8450      Fax: 9269 8395  
Email: [kathykondekas@melbournepolytechnic.edu.au](mailto:kathykondekas@melbournepolytechnic.edu.au)

# SECTION A

<b>Name of Applicant:</b>	<b>Male [ ] Female [ ]</b>
<b>Address:</b>	
	<b>Postcode:</b>
<b>Telephone No: (H)</b>	<b>Applicant's Mobile:</b>
<b>Date of Birth:</b> /                    /	
<b>Applicant's Email:</b>	
<b>Are you an Australian citizen / permanent resident?</b> [ ] Yes                    [ ] No	
<b>What language do you speak at home?</b>	
<b>Do you require an interpreter?</b> [ ] Yes                    [ ] No                    [ ] AUSLAN	
<b>Signature of Applicant:</b>	<b>Date:</b>
<b>Parent / Advocate / Guardian Name</b>	
<b>Relationship to Applicant</b>	
<b>Parent/Advocate/Guardian Tel:</b>	<b>Mobile:</b>
<b>Parent / Advocate / Guardian Email</b>	

<b>Referred by:</b>	_____
<b>Position / Title of Referee</b>	_____
<b>School / Agency</b>	_____
<b>Address:</b>	_____
	<b>Postcode</b>
<b>Telephone No:</b>	<b>Mobile:</b>
<b>Fax No:</b>	_____
<b>Email:</b>	_____
<b>Signature:</b>	_____
<b>Date of Referral</b>	/                    /

<b>Does the application's family/guardian/advocates know about this referral?</b> Yes [ ]    No [ ]
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**Please tick below to indicate your preferred Course and Mode of Study**

22302VIC Certificate I in Work Education	
<p>The course prepares you for a job. It involves hands-on activities in different workplaces, work experience and career planning.</p> <p><b>Please Note:</b> If you undertake the Hospitality Stream you also have an opportunity to complete FBP10117 Certificate I in Food Processing.</p>	<p><b>Preston</b> [ ] <b>Prahran</b> [ ] <b>Greensborough</b> [ ] (General Stream ONLY)</p> <p><b>General Stream</b></p> <p>[ ] Full Time : 1 year (4 - 5 days per week) [ ] Full Time : 2 years (3 days per week)</p> <p>[ ] Part Time : 1 full day per week [ ] Part Time : 2 full days per week [ ] Part Time : 1 half day per week</p> <p><b>Ignition Theatre Stream</b></p> <p>[ ] Full Time : 2 years (3 days per week)</p> <p><b>Hospitality Stream</b></p> <p>[ ] Full Time : 1 year (4 - 5 days per week) [ ] Full Time : 2 years (3 days per week) [ ] Part Time : 1 day per week</p>
22301VIC Certificate I in Transition Education	
<p>The course focuses on you. It will help develop independence, decision making and self confidence.</p>	<p><b>Preston</b> [ ] <b>Prahran</b> [ ] <b>Greensborough</b> [ ]</p> <p>[ ] Full Time : 1 year (4 - 5 days per week) [ ] Full Time : 2 years (3 days per week)</p> <p>[ ] Part Time : 1 full day per week [ ] Part Time : 2 full days per week [ ] Part Time : 1 half day per week</p>
22293VIC Certificate I In Initial Adult Literacy & Numeracy	
<p>Support development of Literacy &amp; Numeracy skills.</p>	<p><b>Preston</b> [ ] <b>Prahran</b> [ ] <b>Greensborough</b> [ ]</p> <p>[ ] Full Time : 1 year (2 ½ days per week) [ ] Part Time: 1 day per week [ ] Part Time: ½ day per week</p>
22294VIC Course in Initial Adult Literacy & Numeracy	
<p>Support development of Literacy &amp; Numeracy skills – BEGINNERS.</p>	<p><b>Preston</b> [ ] <b>Prahran</b> [ ] <b>Greensborough</b> [ ]</p> <p>[ ] Full Time : 1 year (1 ½ days per week) [ ] Part Time: ½ day per week</p>
FBP20117 Certificate II in Food Processing	
<p>This course provides hands-on training to prepare you for an excellent food processing kitchen-hand position. The course features training in food safety and hygiene.</p> <p>You will also undertake units from 22235VIC Certificate I in General Education Adults - Introductory to underpin Literacy &amp; Numeracy.</p>	<p><b>Preston</b> [ ] <b>Prahran</b> [ ]</p> <p>[ ] Full Time: 1 year (3 days per week)</p>

## SECTION B

1) a Does the applicant have a learning difficulty / disability / intellectual disability?

YES  NO

b What difficulties / disabilities and /or other issues does the applicant have, that affects his/her learning?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) Has the applicant participated in any other work preparation courses? Please give details.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Is the applicant a client of an agency? Eg Employment Agency etc

YES [ ] NO [ ] If YES please give details.

Name of Agency:

Name of Caseworker:

Phone No:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Is the applicant a client of the Department of Health and Human Services or NDIS ?

YES [ ] NO [ ] If YES please give details.

Name of Region:

Name of Caseworker:

Phone No:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) Has the applicant had any formal educational or other professional assessment/s?

YES [ ] NO [ ] If YES please give details.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6) Is the applicant registered with Centrelink?

YES [ ] NO [ ]

**REGISTERED AT:**

**Benefit Type:**

**Benefit Number:**

**Expiry Date:**

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**7) Has the applicant had any career counselling?**

**YES [ ] NO [ ]** If YES please give details.

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**8) Which secondary school LAST attended / attending?**

**What is the highest year level of secondary schooling LAST completed / completing?**

Name of Secondary School	Year Level	Year Completed

**9) Has the applicant been involved in any work experience, SBAT or voluntary work?**

(Eg at school etc)

**YES [ ] NO [ ]** If YES please give details.

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**10) Has the applicant been in any form of employment?**

**YES [ ] NO [ ]** If YES please give details.

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**(ONLY Ignition Theatre Applicant)**

11) Has the applicant been involved in Performing Arts programs?

YES [ ]

NO [ ]

If YES please give details.

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**(ONLY Hospitality / Food Processing Applicant)**

12) How could this course assist the applicant to gain employment into the Hospitality Industry?

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**Please make comments on the following with particular reference to meeting survival needs.**

13) **Reading:** eg TV guide, timetable, book, newspaper, recipes, community signs

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14) **Writing:** eg complete basic form, personal details, email

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15) **Numeracy:** eg money handling, time, measurement, direction

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16) **Speech / Oral Communication:** eg greetings, conversation, initiating conversation

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17) **Communication with Others:** eg greetings, conversation, initiating conversation, asking for help, protective behaviours

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18) **Areas of Independence:** e.g. Banking, Shopping, travel

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19) **Outline applicant's STRENGTHS when relating to others:**

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20) **Outline applicants LIMITATIONS when relating to others:**

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