

## **Glenelg and Southern Grampians LLEN**

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www.workplacements.education.vic.gov.au/

## 2024

## **Work Placement**

## **Student Enquiry Form**

Name:			
School:			
VCE Level (please circle): VCE		VM VPC	
DOB	Placement Day Required MTWTH F (Please circle)		
Are you enrolled in a VET Program? YES/NO  If Yes, please detail what program name and level:			
Placement Type required:	☐ Structured Workplace Learning (SWL)	☐ School Based Apprenticeship ☐ Work Experience (SBAT) (WE)	
Industry/Occupation	Preference #1	Preference #2	Preference #3
Interests	No. #1	No. #2	No. #3
Please tick to indicate:			
☐ I have an employer who is willing to offer me a Work Placement			
Please provide employer details below:			
Name of Employer:			
Phone Number:			
☐ I would like help to find a suitable work placement/SBAT			





