

Student Training Agreement Form

Fill in and hand into the VET Coordinator

Student Details:	
Name:	
LUI Number:	
VET USI Number	

Registered Training Organisation (RTO) details:	
School RTO Name:	MOUNTAIN CREEK STATE HIGH SCHOOL
National Provider No.	30411
Address	100 Lady Musgrave Drive, MOUNTAIN CREEK 4557
Contact Name:	Sandro Cossa (VET Manager)

Ask your teacher to help you fill in the following details if needed.

Training Details:			
Qualification Name:			
<i>Eg: Certificate II</i>			
NTIS Code:			
<i>Eg: SIT20207</i>			
Commencement Date:		Planned Completion Date:	

Competencies being undertaken:	
Code:	Name:

School Responsibilities

“The School must have qualified teachers and specific equipment to run this course. If the School loses access to these resources, it will provide students with alternative opportunities to complete the course and the related qualification. The School retains the right to cancel the course if it is unable to meet requirements.”

If a student enrolls late into a Vocational Education and Training course, that student may not complete all competencies to enable them to attain the full Qualification. If this is the case, the student will receive a Statement of Attainment outlining the competencies they have completed.

Student Responsibilities

I acknowledge that I have been provided with a *VET Student Handbook*. I acknowledge that I have read this Handbook and understand that I can access further information on these topics should I wish to do so from my Vet Teacher/s or the VET Coordinator. I also understand that this information is available on the School’s Intranet g:\VET

CONSENT

I _____ (Student’s Name), a senior student at this School, hereby consent to the school providing relevant information about me to the Queensland Curriculum and Assessment Authority (QCAA), and any other government organisation in order to facilitate the recording of my results and the issuing of relevant certification.

I also understand that I can access all fee information in the Subject Selection Guide.

I understand that student work is required in order to satisfy the QCAA that all assessment is correct and to industry standard. This acknowledgement form will be valid for the full delivery period of any certificated vocational course spanning Years 10, 11 and/or 12.

Student Signature:			
School Contact:		Contact Signature:	