**Apprenticeship/Traineeship Application Form**

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| **Personal details** |
| First name | Surname | Date of Birth ........../........./.................. Current Age:  |
| Address |
|  Suburb Post code |
| Phone | Mobile |
| Email |
| Australian citizen or permanent resident Yes No |  Male Female | Indigenous/Torres Strait Islander Y/N  |
| **I am interested in applying for** |
|  Full-time Apprenticeship Part-time School-based Traineeship/Apprenticeship |
| **Highest school level completed** |
|  Year 10 Year 11 Year 12 Other (please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TCE or Equivalent  |
| **Have you started or completed an Auto VET course/Certificate II or III in Automotive or any other course?** |
|  Yes Course name: |
|  No Other (please specify): |
| **Have you completed work experience?** |
|  Yes No If Yes, state the type of work experience and where it took place: |
|  |
| **Select the trade you are interested in (number boxes in order of preference)** |
|  Light Vehicle Technician Heavy Vehicle Technician Panel Beating Spray Painting Windscreen Fitter |
|  Spare Parts/Warehousing Motorcycle Engine Reconditioning Auto Electrician |
| **How did you find out about this employment/training opportunity?** |
|  Newspaper TACC Representative Internet (TACC) Career Advisor Career Expo Seek School Facebook |

**Important**

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| **Checklist** Complete all relevant sections of the form  Attach supporting documentation Mail to the address  detailed at right |

**For your application to be considered you must supply the**

**Please mail to**

The Administrator

TACC Auto Apprenticeships

PO Box 25

MOONAH TAS 7009

Or

Email: enquiries@tacc.com.au

 **following supporting documentation:**

* **Copies of latest school reports with teachers comments**
* **Hand written covering letter**
* **Resume**
* **Other References**

**For further information visit: tacc.com.au**

**or contact:**

**South: Nigel Fox 0418 509 482**

**North/NW: Cameron Lawrence 0400 442 203**