

## EXPRESSION OF INTEREST (EOI) KAWANA WATERS STATE COLLEGE HEALTH EDUCATION UNIT 2024

## Please complete EOI and return to your host school by Friday 11<sup>th</sup> August 2023.

Student name	
School	
Date of Birth	YEAR LEVEL (in 2024)
Student school email address	
Parent/Guardian name	
Home address	
Parent email address	
Parent/Guardian	Home: Mobile:
Phone numbers SIGNATURES	
SIGNATURES	
	(Student)
	(Parent/Guardian)
	(School Contact - VET Coordinator/ Industry Liaison Officer)
	Date:/ /
VETis Funding	Have you accessed your VET in Schools (VETis) funding? YES INO I
	(see your VET Coordinator/ Industry Liaison Officer at school if you are unsure)

Host School contact person (VET Coordinator/Industry Liaison Officer), please email this document to the Enrolment Officer at Kawana Waters State College **health\_enrolments@kawanawaterssc.eq.edu.au** or post to: PO Box 1049, BUDDINA QLD 4575 Phone: Secondary Campus: (07) 5436 9388