

Attachment B Enrolment Procedures

NOTIFICATION OF EMPLOYMENT AND/OR TRAINING ARRANGEMENTS

STUDENT DETAILS

Surname:

Student First/Given Name:

Gender: Male Female Date of Birth:

School where Year 10 was completed:

Last school of enrolment:

PARENT DETAILS (or Independent Student)

Parent Name:

Relationship to student:

Address:

Suburb/Town:

Mailing Address (if different to home address)

Town: Postcode:

Telephone No: Mobile No: Email:

EMPLOYER/TRAINER/EDUCATION PROVIDER DETAILS

Business Name:

Business Address:

Postal Address (if different to above):

Business Contact: Position Held:

Phone No: Email:

Employment Type: Full-time Casual/Part-time Apprentice/Trainee Training/Education

Start Date: Hours per week employed/training/education

***This form must be forwarded to the Enrolment and Attendance Division - Department of Education
Post: GPO Box4821 Darwin 0801 NT. Email: learnorearn.det@nt.gov.au***