



Expression of Interest to undertake 2020 Apprenticeship

Student's Name			School		
Address		Suburb		Post Code	
Date of Birth	Home Phone	Mobile Phone	Email		School Year in 2020
Are you Aboriginal or Torres Strait Islander? <input type="checkbox"/> Yes <input type="checkbox"/> No			Language spoken at home? <input type="checkbox"/> English <input type="checkbox"/> Other (Please specify)		
Do you have a Disability? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Reason for wishing to undertake an Apprenticeship in the Automotive Industry?					
Are you currently undertaking <u>any</u> (or have you in the past) paid part-time employment?					<input type="checkbox"/> YES <input type="checkbox"/> NO
Have you previously completed any work experience in the area of Automotive?					<input type="checkbox"/> YES <input type="checkbox"/> NO
Have you previously completed any studies in the area of Automotive?					<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please describe:					
Please nominate your preferred work location if successful <input type="checkbox"/> Warwick Farm <input type="checkbox"/> Narellan <input type="checkbox"/> Campbelltown					
Any additional information you would like to add?					

Completed forms (together with current Resume) should be sent to:
apprenticeships@peterwarren.com.au

