

# Flexible Learning Program Application

Applying for (please tick)

Yr 11

Yr 12

## Student Details:

Name:	Date of Birth:
Address:	Home phone:
	Mobile phone:
Email:	

## Parent/Guardian 1 Details:

Name:	Relationship to student:
Address: (if different from above)	Home phone:
	Work phone:
Email:	Mobile phone:

## Parent/Guardian 2 Details:

Name:	Relationship to student:
Address: (if different from above)	Home phone:
	Work phone:
Email:	Mobile phone:

## Section to be completed by the Student

Why would you like to be in the Flexible Learning Program?

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How would you benefit from the program?

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Where would you like to be 'post school'?

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What are your main interests?

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## **Section to be completed by the Parent/Guardian**

How do you believe that your child could benefit from the Flexible Learning Program?

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What do you consider to be the most important outcome for your child?

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**Signed:** \_\_\_\_\_

Parent/Guardian

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Student

### **What happens next?**

- Submit this application form to the school
- We will interview your child and conduct a background review of school-based information to gain a better understanding of their needs
- We will then advise you about the outcome of the application
- If accepted both the parent and student will need to meet with the flexible learning program teacher to establish an Individual Education Plan so we can together work to achieve the best outcome for your child.

### **Enquires please contact:**

#### **Brian Gould**

Head of Learning (VET)

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Brian.Gould@education.wa.edu.au

#### **Misha Mamo**

Flexible Learning Co-ordinator

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### **Return application by post or in-person to:**

Brian Gould – Head of Learning (VET)

Kent Street Senior High School

Kent Street

East Victoria Park WA 6101