

2016 DESIGN, MULTIMEDIA & ART SUPPLEMENTARY APPLICATION FORM

VTAC Course Code: 6100161644 – Diploma of Screen & Media (Radio and TV)
Course Code: CUF50107 Chadstone Campus

INFORMATION AND INSTRUCTIONS TO APPLICANTS

(PLEASE RETAIN THIS SHEET FOR YOUR INFORMATION)

GENERAL INFORMATION

| 1. | Applicants currently in Year 12 must apply through VTAC (www.vtac.edu.au). The VTAC course code for this course is 6100161644. |
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| | Mature Age applicants <u>not applying for any other course</u> may apply direct to Holmesglen using this supplementary application form. |
| 2. | ALL applicants must complete the enclosed Diploma in Screen & Media (Radio and TV) Application form |
| | ☐ Attach a passport size photograph of yourself |
| | Attach any further relevant information to support your application (e.g. resume, references, employer support, results). |
| 3. | Return from to Holmesglen at the address supplied below by early December 2015. |
| | DO <u>NOT</u> RETURN THIS FORM TO VTAC |
| 4. | Book an appointment time for an interview by calling 95641602. Interviews will be held early December. |
| | Late applications may be considered, please contact 9564 1602 for information. |

HOLMESGLEN CONTACT DETAILS

The Admissions Officer
Design, Multimedia and Art Department
Holmesglen
PO Box 42
HOLMESGLEN VIC 3148

Telephone: (03) 9564 1602
Fax: (03) 9564 1776
Email: arts@holmesglen.edu.au



SUPPLEMENTARY APPLICATION FORM

| OFFICE USE ONLY: | |
|------------------|--|
| NAME: | |
| INTERVIEW: | |
| HOBSONS ID: | |

Diploma of Screen & Media (Radio and TV)

VTAC Course Code: 61001616444 Chadstone Campus

| PERSONAL DETAILS - to b | e completed by all | applicants. | | | |
|-------------------------------------|-------------------------|-------------------------|----------------------|--------------------|----------|
| Surname or Family Name | | | | | |
| Given Name(s) | | | | | |
| | | | | | |
| Date of Birth (dd/mm/yyyy) | Title (Mr,Mrs,Miss,M | s,Other) | Gend | | |
| Address (Number and Street) | | | (1 | M)ale or (F)emale | |
| | | | | | |
| Suburb or Town | | | | | Postcode |
| Home Phone Number | Mobile Phor | ne Number | Work | Phone Number | |
| | INIOSIIO I IIOI | | | | |
| Email | | | | | |
| How did you hear about Holmesgle | n2 | | | | |
| How did you flear about Hollifesgle | .11 | | | | |
| VTAC ID No. | | | | | |
| | | | | | |
| SECTION B: Educational I | Details | | | | |
| Last School/College/University atte | | | | | Year |
| ADDITIONAL INFORMATIO | | | | | |
| State why you wish to complete this | course, the career path | you would like to follo | w and any relevant e | xperience you have | to date. |
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| Signature of Applicant: | | | | | |
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| TO BE DETACHE | ED ONLY BY AD | OMISSIONS OFF | ICER |
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CONFIRMATION OF RECEIPT

If you wish to receive confirmation of receipt from Holmesglen, **YOU MUST SUPPLY A STAMPED SELF-ADDRESSED ENVELOPE** and complete the information below.

The Admissions Officer cannot confirm that Application forms have been received via the telephone.

| Applicant's Name: | |
|-------------------|--|
| | |
| Course Title: | |
| | |
| Date: | |