

VET Teacher Training (VTT) IDT

Application Form and Evidence Portfolio

This form and supporting documentation must be attached to your online Teacher Training application.

Title	First name		Last name	
Do you hav	e a disability, impairme	ent or long-term condi	tion	Yes / No
Basic descri	ption of disability			
Assistance ı	required			

TEACHING QUALIFICATIONS

Detail your relevant **teaching** qualifications. Must supply copies. (Masters, Post-Graduate Diploma, Degree, Diploma, Associate Diploma, Certificate IV, etc.)

Qualification level and name	Institution	Year completed	Copy attached
			Yes / No
			Yes / No

TEACHING	EXPERIENCE						
Detail you	relevant teaching experience. (IPT, SDD, IST, etc.)						
Subjects ta	ught	2024	2023	2022	2021	2020	Years prior to 2020
Example:	Software Design and Development	 ✓ 	×			√	3

INDUSTRY RELEVANT QUALIFICATIONS Detail your relevant IDT industry qualifications. Must supply copies of transcripts. (SOA, Cert 1, Cert 2, Cert 3, Cert 4, Diploma, Advanced diploma, Degree, etc.) Year Copy Qualification level and name Year Copy Qualification level and name Yes / No Yes / No Image: State of the s



EVIDENCE TO SUPPORT YOUR APPLICATION FOR ENTRY INTO THE TRAINING PROGRAM

To assist in identifying your existing qualifications and experience you are required to outline your industry experience (in industry). You should include reference to any recent industry specific experience or qualifications you may have. Refer to <u>https://training.gov.au/Training/Details/ICT30120</u>

The term "recent" refers to within the last five years. This may include:

- **Employment** in the industry (duties should be verified by letters from employers, community organisations)
- **Experience** from extra-curricular school activities, activities and role should be verified by letter from school principal
- Other experience or skills relevant to this nomination (verified by appropriate person).

INDUSTRY EXPERIENCE

EMPLO	YER DETA	ILS	TYPE OF WORK	
Please include all	details reque	ested below	Outline the requirements of your work and attach validated evidence of your experience (eg job description).	
Company:				
Address:				
Supervisor:				
Phone:				
TYPE OF EMPLOYMENT	F/T	Casual		
	P/T	Voluntary		
DATES OF EMPLOYMENT	From:			
For P/T or Casual work - specify total time and/or frequency eg	То:			
hours/week	Frequenc	xy:		
	YER DETA			TYPE OF WORK
EMPLO Please include all				TYPE OF WORK Outline the requirements of your work and attach validated evidence of your experience (eg job description).
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Please include all Company: Address: Supervisor:				Outline the requirements of your work and attach validated
Please include all Company: Address: Supervisor: Phone:	details reque	ested below		Outline the requirements of your work and attach validated
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EMPLO	YER DE	TAILS			TYPE OF WORK		
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Please include all Company: Address: Supervisor: Phone:	details re						
Please include all Company: Address: Supervisor: Phone:	details re		Casual				
Please include all Company: Address: Supervisor: Phone: TYPE OF EMPLOYMENT	details re		Casual				

OTHER INDUSTRY EXPERIENCE OR SKILLS RELEVANT TO APPLICATION

Please attach documents supporting your experience, copies must be appropriately verified.