

## Expression of Interest

AVI50222 Diploma of Aviation (Commercial Pilot Licence Aeroplane) – Partial (VETiS)

Student Name:	Date of Birth:
School:	Year Level (start VETiS):
Parent/Guardian:	
Address	
Home Phone:	Parent Mobile:
Email:	

VET Co-ordinator:
VET Co-ordinator email:
VET Co-ordinator signature
Date:

Location the student will attend for Aviation VETiS Course (Please tick)
<input type="checkbox"/> Xavier College
<input type="checkbox"/> Mordialloc Secondary College
<input type="checkbox"/> Brentwood Secondary College
<input type="checkbox"/> Scotch Oakburn College
<input type="checkbox"/> Launceston Church Grammar

Please return this form to Tristar Aviation Email: <a href="mailto:vetis@tristaraviation.com.au">vetis@tristaraviation.com.au</a>
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