



**EXPRESSION OF INTEREST (EOI)
KAWANA WATERS STATE COLLEGE
HEALTH EDUCATION UNIT 2025**

Please complete EOI and return to your host school by Friday 16th August 2024.

Student name			
School			
Date of Birth		YEAR LEVEL (in 2025)	
Student school email address			
Parent/Guardian name			
Home address			
Parent email address			
Parent/Guardian Phone numbers	Home:	Mobile:	
SIGNATURES	_____ (Student)		
	_____ (Parent/Guardian)		

	(School Contact - VET Coordinator/ Industry Liaison Officer)		
	Date: ____ / ____ / ____		
VETis Funding	Have you accessed your VET in Schools (VETis) funding? YES <input type="checkbox"/> NO <input type="checkbox"/> (see your VET Coordinator/ Industry Liaison Officer at school if you are unsure)		

Host School contact person (VET Coordinator/Industry Liaison Officer), please email this document to the Enrolment Officer at Kawana Waters State College health_enrolments@kawanawaterssc.eq.edu.au or post to: PO Box 1049, BUDDINA QLD 4575
Phone: Secondary Campus: (07) 5436 9388