



FORM QA REQUEST FOR INTERSTATE WORKPLACE LEARNING APPROVAL
(for NSW government school students being placed in QLD)

Section A NSW HOME SCHOOL (or TAFE NSW institute delivering VET course to school students)

Instructions (Please print all details)

- This section is to be completed by the NSW home school or TAFE college or campus and then sent to the work experience coordinator at the school closest to the proposed work experience placement, **at least three weeks prior to the placement date**. It **must** be accompanied by the completed Student Placement Record.
- The placement must not proceed until Form QA has been returned with approval.

1. Placement details

Student's Name: _____ Male Female Year: _____ Age: _____

Employer's Name: _____ Contact Person: _____

Telephone: _____

Tick to indicate NSW Student Placement Record is attached NSW Form A is attached (overnight accommodation)

Reason for this placement: _____

Dates of placement: _____ Number of days: _____

Is supervision by host QLD school requested by NSW? YES NO

Home school/TAFE NSW college or campus _____

Town: _____

Workplace Learning Coordinator: _____

Telephone: _____ Fax: _____

Signature of Principal/TAFE College Manager

Date

Section B HOST QUEENSLAND SCHOOL (acknowledgement)

Instructions (Please print all details)

This section is to be completed by the school work experience coordinator and a copy faxed to the NSW home school/TAFE college or campus **at least two weeks prior to the placement date**.

1. Host School: _____

City: _____ Postcode: _____ Phone: _____ Fax: _____

Work experience coordinator: _____ Approval: YES NO

2. Supervision arrangements if requested

Name of Supervisor: _____ Phone: _____

Signature of Principal or nominee: _____ Date: _____