Personal Details

Blue Care Individual Student Placement Request Form

Student Name:

Phone:

Email:

YES / NO

Do you identify as Aboriginal or Torres Strait Islander?

Placement Requirements

Residential / Community / \*Pinangba

Type of service:

(\**Pinangba is our Aboriginal & Torres Strait Islander provider of aged care services*)

Location preference:

Qualification studying for:

Course/subject:

Education provider:

Preferred dates/timeframe:

Number of placement hours:

Additional information

----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------