Expression of interest form

YWCA Canberra provides quality training in a supportive learning environment. If you are interested in training with YWCA Canberra, please complete **all** areas of this form. Once submitted, our training team will be in touch.

Note: if your chosen course is not currently being offered, we will place you on a wait list and contact you when it is next offered.

# Your details

|  |  |  |  |
| --- | --- | --- | --- |
| First name | Your first name | Middle name | Your middle name, if any |
| Last name | Your last name | Preferred name | Your preferred name, if any |
| Date of birth | Date of birth | Gender | [ ]  man [ ]  woman [ ] non-binary |
| Home phone | Your home phone number | Mobile phone | Your mobile number |
| Email address | Your email address |
| Residential address | Your street addres |
| Suburb/town | Your suburb/town | State/territory | Your state/ territory | Postcode | Your postcode |
| Postal address | [ ]  same as residential addressYour postal address if different to residential |
| Suburb/town | Suburb or town | State/territory | State or territory | Postcode | Postcode |

## What course do you want to enrol in?

[ ]  BSB51918 Diploma of Leadership and Management

[ ]  BSBSS00095 Cross-sector Infection Control Skill Set (available until 15/03/2022)

[ ]  CHC30113 Certificate III in Early Childhood Education and Care

[ ]  CHC50113 Diploma of Early Childhood Education and Care

Please submit this form to training@ywca-canberra.org.au

If you have any questions, call the Education and Training Unit on 02 6185 2000.