

# VCE Units 1 & 2 2019 Acceleration Application Form

**Name:** \_\_\_\_\_ **Homeroom: 9** \_\_\_\_\_

Please complete all sections of this form and attach it to your 2019 Year 10 Subject Planning form. This application is due to your Year 10 Homeroom Teacher by **Thursday 6<sup>th</sup> September 2018**

NB/ Unit1 / 2 Acceleration Applications will be processed on a case by case basis and may involve an interview in addition to the application itself.

## **PART ONE**

### **A Year 9 2018 Semester One results**

CORE UNITS	%	ELECTIVE	%
ENGLISH		1.	
HEALTH & P E		2.	
HUMANITIES		3.	
MATHEMATICS			
RELIGIOUS EDUCATION			
SCIENCE			

### **B Proposed Year 10 Learning Program**

MANDATED UNITS (both semesters)		NON-MANDATED UNITS	
ENGLISH(option)		1.	
RELIGIOUS EDUCATION		2.	
MATHEMATICS(option)		3.	
SCIENCE (selection)		4.	
		5.	

### **C Year 11 2020 VCE Proposed Program: Record your subject preferences in the space provided.**

SUBJECT	SUBJECT
ENGLISH or LITERATURE ( <i>Circle</i> )	4.
RELIGION & SOCIETY	5.
UNIT 3	6.

### **D Year 12 2021 VCE Proposed Program: Record your intended 3 / 4 Sequenced studies in the box below.**

SUBJECT	SUBJECT
1. ENGLISH or LITERATURE ( <i>Circle</i> )	3.
2. RELIGION & SOCIETY or SCHOOL-BASED RE	4.
	5.

## **PART TWO**

To complete the application process, you need to discuss your application with each of the following College staff representatives **prior** to submitting the application form.

In the box below, indicate the Unit 1/2 subject that you wish to study at an accelerated level in 2018 and provide your reasons for this selection.

**UNIT 1/2 SUBJECT:** \_\_\_\_\_

**REASON/S:**

**1/ Learning Area Leader** (eg. Biology – Science Learning Area Leader)

Unit 1 / 2 Subject \_\_\_\_\_

Learning Area Leader - Name \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_

Application Request supported Yes  No  Unsure

Comment

**2/ Year 9 Level Coordinator** – Mr Ben Collyer

Signature \_\_\_\_\_ Date \_\_\_\_\_

Application supported Yes  No  Unsure

Comment

**3/ VCE Coordinator**– Mrs Anna Oliver

Signature \_\_\_\_\_ Date \_\_\_\_\_

Application supported Yes  No  Unsure

Comment

**4/ Parent / Guardian** Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Application supported Yes  No

Comment