

Name:		
Ivaille		

Home Group: _____

Write your VCAL subject selections here, from first preference to last

SUBJECTS

VCAL CORE

BERWICK COLLEGE VET

TIMETABLED VET ELECTIVE

BLOCKED VET ELECTIVE

Indicate External VET Course*:

COURSE NAME & LOCATION

*Only select ONE Blocked course (either externally or at Berwick College)

VCAL

VCAL Core:

Literacy

Numeracy

Personal Development

Work Skills

VCAL VET Electives:

TIMETABLED

Cert II Automotive

(1st year only of a 2 year course)

Cert II Community Services

(1 year course)

Cert II Construction Pathways

(1st year only of a 2 year course)

Cert II Dance

(2 year course)

Cert II Outdoor Recreation

(1 year course)

Cert II Small Business

(2 year course)

Cert II Visual Arts

(2 year course)

BLOCKED

Cert II Applied Fashion

(Wednesday 1st & 2nd year of a 2 year course)

Cert II Automotive

(Friday 1st & 2nd year of a 2 year course)

Cert II Construction Pathways

(Wed 1st yr & Fri 2nd yr of a 2 year course)

Cert II Electrotechnology

(Wednesday $\mathbf{1}^{st}$ & $\mathbf{2}^{nd}$ year of a 2 year course)

Write your VCE subject selections here, from first preference to last



Year Level	SUBJECTS
	ENGLISH/ LITERATURE/EAL
	ELECTIVE 1
	ELECTIVE 2
	ELECTIVE 3
	ELECTIVE 4
	FIRST RESERVE
	SECOND RESERVE

VCE

English	numanities	Science
English Literature *if choosing Literature, it must be taken in conjunction with English. EAL	Global Politics Accounting Business Management Legal Studies History Geography Philosophy	Biology Chemistry Physics Psychology Environmental Science
Arts	Mathematics	Technology

		типозорну	
	Arts	Mathematics	Technology
	Art	General Maths	Design Technology
	Studio Arts General	Specialist Maths	Textiles
	Studio Arts	Math Methods	Design Technology
	Photography		Wood
	Dance		Food Studies
	Media		Information Technology
	Music		Computing
	Theatre Studies		
	Visual Communication		
	& Design		
Health and PE			LOTE

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Outdoor & Environmental Studies
Physical Education
Physical Education (Basketball Academy

Health & Human Development

Indonesian

Parent signature:	
Student signature:	Tick this box if you believe your son/daughter is eligible for EAL
Course counsellor:	(English as a second language)

		J		
Parent signature: Student signature:		Tick this box if you be	elieve your son/daughter is eligible for E	AL
Course counsellor:		(English as a second I	anguage)	