

PROGRAM DETAILS

Name: **History Enrichment Program Levels 7-10**
Victorian Regional Government Schools
Date: **Tuesday 28 and Thursday 30 June 2022**
Time: **1.00pm - 5.00pm**

Applications close: **Friday 24 June 2022**
Venue: **Online, Zoom**

STUDENT EXPRESSION OF INTEREST FORM

*Please return this form to Kaye De Petro via email at k.depetro@htav.asn.au.
Please **DO NOT** submit applications through your internal school LMS such as Compass. These cannot be accessed by HTAV*

I, _____ Age _____ of (school) _____

would like to be considered for the History Enrichment Program. I understand that the program is for students who are fast learners and advanced thinkers. It is for students who like to be challenged and have fun while learning. The program is designed for students who have a passion for History.

1. Please describe what you like about History and why you would like to be part of the History Enrichment Program:

2. In what ways are you a 'fast learner' or an 'advanced thinker'?

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This program is best suited for students who are independent, creative thinkers and students who are fast learners or think and perform above the level of their peers in some way (though they may not be the most successful academically) and demonstrate high potential.

This program will also suit students who are recognised as Gifted and Talented, high achievers and/or those who could benefit from accelerated learning.

PARENT/GUARDIAN APPROVAL FORM

Please return this form to Kaye De Petro via email at k.depetro@htav.asn.au

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By signing and submitting this form for consideration, we give our permission for our child to participate in the online HTAV History Enrichment School Holiday Program, should they be accepted into the program.

My child and I acknowledge that:

we have read, and agree that they will abide by, the History Enrichment Program Digital Code of Conduct

my child should not share any personal contact information whilst online during the program

my child will need to have their camera switched on during the Zoom sessions.

Student/Child Signature _____

Parent/Guardian Name (please print) _____

Parent/Guardian Signature _____

Parent/Guardian Email _____

Parent/Guardian Phone Number _____