Elective Form (Year 10)
(February 2016 New Students)

Name: ___________________________ Date: _____________

Choose one subject from each line. The shaded subjects are full.

<table>
<thead>
<tr>
<th>Elective Line 1</th>
<th>Elective Line 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Year 10</strong></td>
<td><strong>Year 10</strong></td>
</tr>
<tr>
<td>□ Commerce</td>
<td>□ Elective History</td>
</tr>
<tr>
<td>□ Food Technology</td>
<td>□ PASS</td>
</tr>
<tr>
<td><strong>Industrial Technology - Timber</strong></td>
<td>□ Drama</td>
</tr>
<tr>
<td>□ Information &amp; Software Technology</td>
<td>□ Graphics Technology</td>
</tr>
<tr>
<td>□ Visual Arts</td>
<td></td>
</tr>
<tr>
<td>□ I have studied this elective at my present school in Year 9</td>
<td></td>
</tr>
<tr>
<td>□ I have not studied this elective at my present school in Year 9</td>
<td></td>
</tr>
</tbody>
</table>

Thank you for your application.

________________________________  ___________________________________
Student Signature                  Parent/Carer Signature

Please return the completed form to the College Office