

**Victorian International Academy Internship Application Form**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you completed your (SHB30416) Certificate III in Hairdressing? (Please circle) Yes / No

**Please answer the following questions:**

What can you bring to the Hairdressing Industry?

What has inspired you to apply for this Internship?

What are you hoping to achieve after completing the Internship?

Why do you believe you are the best candidate for the Internship?