

# Victoria PROGRAMS

## EXPRESSION OF INTEREST FORM 2017

Spots are limited so please fill out the EOI form below to secure your place in one or more 2017 program/s.



Please complete this form and return by e-mail to [emilie.biggar@hearforyou.com.au](mailto:emilie.biggar@hearforyou.com.au)

### Mentee Details

First name

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Surname

---

Date of birth

---

Name of school

---

School year in 2017

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### Residential Information

Street Address

---

City/Suburb

---

State

---

Post Code

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### Parent/Guardian Details

Parents' Name(s)

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Phone

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Email

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How would you prefer to be contacted?

Email

Phone

SMS

How were you made aware about **Hear For You**?

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Degree of hearing loss  Mild  Moderate  Severe  Profound

Do you wear hearing aid(s)?  Yes  No

If yes, how many?

Do you have a cochlear implant?  Yes  No

If yes, how many?

Do you have any other disability in addition to hearing loss?  Yes  No

If yes, please provide details:

### **2017 Mentoring Programs**

In 2017 Hear For You is offering two programs for Victoria. We are an NDIS provider where if you are an NDIS participant, may be able to use your NDIS funding to cover the fee. However if you are not on the NDIS or don't have the allocation yet, we do have limited support from the Deaf Lottery to cover your fees which is available on application.

There program details on offer this year are:

## Life Goals and Skills Blast Mentoring Program for Melbourne

Two days of four short sessions of face to face mentoring by trained deaf or hard of hearing mentors on a variety of issues and topics. These range from Teamwork / Leadership / School subject choices / multi-class tactics / Careers / Casual Work / Friendships / making new ones / Drama / Technology / Social Media safety / Communication / Conflict Resolution / Identity / Deaf teen issues / Confidence. Mentoring includes both individual, small group, and peer to peer.

Location: HearingCRC, 550 Swanston St, Melbourne.

Enrolment deadline – Wednesday 23rd August

Session 1: Sun 10th September Session

2: Sun 1<sup>st</sup> October

Fees for the Life Goals & Skills Blast Mentoring Program:

Fee	Amount/Hours
Enrolment Fee	\$50
NDIS Hours required	14 hours inclusive of all four sessions
Non-NDIS participants Fee	Covered by the generous support from the Deaf Lottery Australia

I am interested in attending the Life Goals & Skills Blast Melbourne

## Life Goals and Skills Blast Mentoring Program for Shepparton

One day of two short sessions of face to face mentoring by trained deaf or hard of hearing mentors on a variety of issues and topics. These range from Teamwork / Leadership / School subject choices / multi-class tactics / Careers / Casual Work / Friendships / making new ones / Drama / Technology / Social Media safety / Communication / Conflict Resolution / Identity/ Deaf teen issues / Confidence. Mentoring includes both individual, small group, and peer to peer.

Location: TBC in Shepparton.

Enrolment deadline – Wednesday 23rd August

Session 1: Between Sept to Oct

Fees for the Life Goals & Skills Blast Mentoring Program Shepparton:

Fee	Amount/Hours
Enrolment Fee	\$50
NDIS Hours required	7 hours inclusive of all four sessions
Non-NDIS participants Fee	Covered by the generous support from the Deaf Lottery Australia

I am interested in attending the Life Goals & Skills Shepparton

If any questions or you would like more information, email [emilie.biggar@hearforyou.com.au](mailto:emilie.biggar@hearforyou.com.au)

### **Agreement**

This is to certify that I am the  
parent or legal guardian of: \_\_\_\_\_

I give permission for my child and myself to be contacted by **Hear For You** for the 2017 programs. I hereby release and indemnify **Hear For You** including each of its officers, directors, employees and volunteer staff from all claims which I and/or my child may have and from and against all liability arising out of or in connection with the **Hear For You** program and my child's participation therein.

By typing my name below, I acknowledge that I have read, understood, and accept this Agreement and affirm that all the information provided in this Expression of Interest Application is true and correct to the best of my knowledge.

My full name \_\_\_\_\_

Date \_\_\_\_\_

**When completed, please forward to [emilie.biggar@hearforyou.com.au](mailto:emilie.biggar@hearforyou.com.au)**

**Hear For You will supply further information, including invoicing, NDIS details (if applicable) and program details to confirm your enrolment and to finalise payment arrangements**