



## Alliance Française de Melbourne Y10 French Immersion Weekend 2016

## Subsidy application form for government school students

Email to coursecoordinator@afmelbourne.com.au or fax to 9525 5064

Student's Details							
Student S							
First Name:					********		
Last Name:							
Date of Birth:				I am: (	□ Male	☐ Female	
Address:							
Suburb:				Postcode:			
Telephone:		E-mai	l address:		100		
Have you ever been on an exchange program to a French speaking country?							
Yes 🔲	No If yes, for how long?						
Allergies? Dietary requirements?							
Name of School	ame of School: Teacher's name:						
Teacher's e-mail address:							
Application for DET subsidy – to be filled in by student  Why should we select you? To apply for a \$300 subsidy to assist with the cost of the camp, please outline why you wish to participate in the camp and how it will assist with your French studies in the future (written in English). Rural and regional students will be given preference.							





#### Basic Immersion Camp Rules - to be signed by student

Courteous behavior is required throughout the weekend. Lunch tables are to be set and cleared by students. Smoking or drinking will not be permitted.

I have read and understood the above rules and agree to abide by them.

Date: Student's signature:

#### French Assessment - to be filled in by student

Did you start learning French in Year 7?  ☐ Yes ☐ No - If no, when did you start learning French?  Have you ever been on an exchange program to a French-speaking country?  ☐ Yes ☐ No - If yes, where and for how long?	10. Ils sont mariès pendant depuis pourun an.  11. Si nous avions de l'argent, nous
Please complete this test - without any assistance or dictionary. Tick the right answer (If you are unsure, please leave blank)	pourrions pouvions pourronspartir en vacances.  12. Il faut que vous saviez savez
1. Nous habitent en habitens à habitez dansMelbourne.	fairece que vous voulez  fairece que vous voulez  13. Qu'est-ce que tu aimes faire le week-end ?
2. Hier, nous ☐ avons allé ☐ vont ☐ sommes allés …à la plage.	14. Qu'est-ce que tu as fait hier soir ?
3. Tu veux	14. Gu est-ce que tu as fait filei soil ?
4. Avant mon accident, ☐ je faisais ☐ j'ai fait ☐ je faisbeaucoup de vêlo.	15. Qu'est-ce que tu ferais si tu gagnais tout à coup beaucoup d'argent ?
5. M. et Mme Durand partent en vacances avec □ ses □ leurs □ leurenfants.	16. Pourquoi veux-tu participer au week-end d'immersion en français? Qu'est-ce que tu souhaites y faire ?
6. Tu finis finirascet exercice plus tard.	
7. Il court autant aussi sivite que son frère.	
8. Est-ce que tu as envoyé cette lettre à Annie ? Oui, je lui en la lui lui laai envoyée.	





# Permission Form & Payment - to be filled in by parent

### Parent's or Guardian's Details

First Name:
Last Name:
Address:
Suburb: Postcode:
Telephone: Mobile:
E-mail address:
Parental Permission Form
I, (parent/guardian's name) have read the information provided by
the Alliance Française de Melbourne and give permission for my child
(student's name) to take part in the Alliance Française de Melbourne Year 10 French Immersion Weekend at
Portsea Camp from Friday 09 to Sunday 11 September 2016 as well as to participate in a scavenger hunt in
Portsea and its surroundings under supervision of the Alliance Française staff on Sunday 11 September 2016.
authorise the Alliance Française de Melbourne to use photographs and videos of my child taken during the
weekend in their publications. I confirm that I have entered into this Release voluntarily.
<b>Consent to Medical Attention</b> – in case of an emergency only
I, (parent/guardian's name) authorise the staff in charge of the
program to consent, where it is impossible to communicate with me, to my child
(student's name) receiving such medical or surgical
treatment as may be deemed necessary.
Other contact in case of emergency (please give details of a person other than above):
Last name: First name:
Mobile: Email:
Date: Parent's signature:
Payment
Payment by $\square$ cheque $\square$ cash $\square$ visa $\square$ mastercard $\square$ other (please specify:
Card number: Expiry date: /
Name of card holder: Date:
Total amount (circle): \$95 \$75 (current AFM members & students) Signature: