**Expression of interest for MCH clinical placement**

To qualify for entry into a MCH program in Victoria, you must be a **registered nurse and midwife**, with at least one-year (full time equivalent) work experience in each area.

Please refer to Clinical Place Availability Table for instructions on how to approach different Local Government Areas (LGAs), which may be via phone, email or by direct application to their website.

Please apply to no more than three LGAs. If you accept an offer from an LGA, please advise the other LGAs you have applied for that you are no longer looking for a clinical place.

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| Qualifications | RN registration number -  RM registration number - | | |
| Experience | One-year full-time equivalent nursing experience  Yes  No  In Progress  One-year full-time equivalent midwifery experience  Yes  No  In Progress | | |
| First Name  Family name |  | | |
| Address |  | | |
| Email |  | Phone |  |
| Which Universities are you applying for? | Federation University  La Trobe University  RMIT University | | |
| Study mode | Full Time  Part time | | |
| Placement Requirements | FT = Federation, La Trobe & RMIT ……………… 30 days (2024)  PT = Federation & La Trobe …………………………15 days per year, for 2 years (2024 and 2025)  PT = RMIT …………………………………………………… 3 days (2024), 27 days (2025) | | |
| Clinical Placement  Availability | I am available to attend placement a minimum of 2 days / week  I am available to attend some placement in blocks  I understand I may have to travel outside my home municipality to secure placement | | |
| I give permission for the LGA and the universities to share information regarding my application for a clinical place. | | Signature and date | |
| **Confirmation**  I confirm that the above information is true and correct.  I understand selection of applicants is at the discretion of the MCH service provider (LGA) and subject to capacity.  I agree to notify the LGA and the universities within 5 working days to confirm acceptance of / or no longer requiring a clinical or university place. | | Signature and date | |