ADMISSIONS PORTFOLIO 2009 for 2010 UNIVERSITY OF WOLLONGONG										
Submit before: 4:00 PM Friday, 5th June 2009 (see guidelines for instructions on how to complete this form) Graduate School of Medicine										
Domestic & International Applicants										
First Name	0					Phone No.	02 4227 1234	4		
Last Name		Preferred Pilst Name 2.09			-	greg_house@	Ddoc.com			
Address	4.0	 Road					GAMSAT ID 1234567			
City		e	State NSW	Postco	de 1000	Date 09-02-2009				
Country	A	a	Cidio	1 0000	<u> </u>	_	54			
LEADER	SHIP									
	& address	Woonona High School 2517						Postcode 2715		
OT OF	rganisation Activities	Senior Boys Basketball Team						1 0310000		
D	osition title	Captain		Start 01/0	/1999 End	12/12/2001	Approx 3	Week Month Year Total		
'				date	date		hours	Per X		
Who can we contact to	Full Name	Mr Joe Caffoops			Position	Principal- Woor	nona High School			
	Phone No.	02 4227 4567			E-mail j	caffoops@woo	n.com.au			
2 Name	0									
1101110	& address rganisation	Kiama Squash Club, 30 Robins		nurra				Postcode 2533		
	Activities	Promotion of squash as a sport		24 1						
Р	osition title	Secretary		Start Feb 2	2006 End		Approx 3	Week Month Year Total		
Who can we	Full Name	Gregg Rowland			Danitian F	President				
Who can we Full Name contact to verify? Phone No		02 4227 7680			1 03111011	owlandg@squ	ash.com.au			
verity?	Phone No.				E-mail L					
	& address							Postcode		
of or	rganisation							Fostcode		
D	Activities osition title			Start	End		Approx	Week Month Year Total		
г	osition title			date	date		hours	Per		
Who can we	Full Name				Position					
contact to verify?	Phone No.				E-mail					
4 Name	[
1101110	& address rganisation							Postcode		
	Activities									
Р	osition title			Start date	End date		Approx hours	Week Month Year Total		
Who can we	F. II Managar				D. 1971					
contact to					Position					
verity?	Phone No.				E-mail					
	& address							Pastanda		
of or	rganisation							Postcode		
	Activities			Start	End		Approx	Week Month Year Total		
P	osition title			date	date		hours	Per		
Who can we Full Name					Position					
contact to verify?	Phone No.				E-mail					

NAME: Gregory Hou	use	GAMSAT ID: 1234567					
17 WILL		Grund/II 15.					
CAPACITY TO	WORK WITH OTHERS						
Name & address of organisation	House with no steps, Fairy Meadow	Postcode 2519					
Activities	Co ordinating activities with able hadied and handisanned com-						
Position title	Deputy Chairperson Start date Feb 1	996 End ongoing Approx 4 Week Month Year Total hours Per X					
Who can we Full Name	Ms L. Somadossi	Position Regional manager					
contact to verify? Phone No.	02 4221 9876	E-mail somadossi@hwns.com.au					
2 Name & address		Poetcodo 2671					
of organisation Activities	colling hardware as part of timber team	Postcode 2071					
Position title	toom mombor	2005 End Jan 2007 Approx 16 Week Month Year Total hours Per X					
Who can we Full Name	Jo Lumberjack	Position manager-timber					
contact to verify? Phone No.	02 5645 7524	E-mail hardwood@bunnings.com.au					
Name & address							
of organisation		Postcode					
Activities Position title	Start	End Approx Week Month Year Total date hours Per					
Who can we Full Name contact to verify? Phone No.		Position E-mail					
4 Name & address of organisation		Postcode					
Activities	Start	End Approx Week Month Year Total					
Position title	date	date hours Per					
Who can we Full Name contact to		Position					
verify? Phone No.		E-mail					
Name & address of organisation		Postcode					
Activities							
Position title	Start date	End Approx Week Month Year Total hours Per					
Who can we Full Name contact to		Position					
verify? Phone No.		E-mail					

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NAME: Gree	gory Hou	GAMSAT ID: 1234567	
IVAIVIL.		CAWGAT ID.	
SERVICE	ETHI	IC	
	& address		do 2577
	ganisation Activities	Leader/Helper in comp for adults with disabilities	del
	sition title	Compile codes Start 44/04/2007 Fnd 24/04/2007 Approx 50 Week Mor	nth Year Total
Who can we	- Eull Name		
contact to verify?		4141 2000	
	& address ganisation		de 2830
	Activities		
Po	sition title	Course Trainer Start date 05/05/2004 End 01/08/2004 Approx 3 Week Mor Per X	nth Year Total
Who can we	- ull Name	Sam Halliway Position Manager	
contact to verify?		02.4268.3712	
3 Name 8	& address		
- Ivallie d	x auui coo		
of org	ganisation	Postco	de 2518
of org	Activities	Community Service Programs	uc
of org	ganisation	Community Service Programs Start 04/04/2002 Fnd	uc
of org Po Who can we	Activities position title	Community Service Programs Club member Start date 01/01/2003 End ongoing Approx 4 Week Mor hours 4 Per X	uc
of org Po	Activities sition title	Community Service Programs Club member Start 01/01/2003 End ongoing Approx 4 Week Mor date Per X Ben Broadhead Position President	uc
of org Po Who can we Foontact to verify?	Activities sition title -ull Name Phone No.	Community Service Programs Club member Start date 01/01/2003 End ongoing Approx 4 Week More Nours Postco Postco Postco President Postco Per X	uc
Who can we recontact to verify? P A Name & of org	Activities sition title Full Name Phone No. & address ganisation	Community Service Programs Club member Start date 01/01/2003 End ongoing Approx 4 Week Mor Per X Ben Broadhead 9941 639 181 Position E-mail Postco	nth Year Total
Who can we recontact to verify? P A Name 8 of org	Activities estition title Full Name Phone No. & address ganisation Activities	Community Service Programs Club member Start date 01/01/2003 End ongoing Approx 4 Week Mor Per X Ben Broadhead 9941 639 181 Position E-mail Postco President ben@apex.com.au Postco	nth Year Total
Who can we recontact to verify? P A Name 8 of org	Activities sition title Full Name Phone No. & address ganisation	Community Service Programs Club member Start date 01/01/2003 End ongoing Approx 4 Week Mor Per X Ben Broadhead Position President ben@apex.com.au Postco	de de
Who can we recontact to verify? P A Name 8 of org	Activities sition title Full Name Phone No. & address ganisation Activities sition title	Community Service Programs Club member Start date 01/01/2003 End ongoing Approx 4 Week Mor Per X Ben Broadhead 9941 639 181 Position E-mail Postco President ben@apex.com.au Postco	de de
Who can we recontact to verify? P A Name & of org	Activities sition title Full Name Phone No. & address ganisation Activities sition title Full Name	Community Service Programs Club member Start date O1/01/2003 End ongoing Approx 4 Week Mor Per X Position President ben@apex.com.au Postco Postco Postco President ben@apex.com.au Postco Postco President ben@apex.com.au	de de
Who can we recontact to verify? P Who can we recontact to verify? P Who can we recontact to verify? P	Activities sition title Full Name Phone No. & address ganisation Activities sition title Full Name	Community Service Programs Club member Start date O1/01/2003 End ongoing Approx hours Per X Per X Position President ben@apex.com.au Postco Postco Postco President ben@apex.com.au Postco	de d
Who can we recontact to verify? Powerify? Powe	Activities sition title Full Name Phone No. Activities address ganisation Activities sition title Full Name Phone No. Activities Activities Activities Activities Activities	Community Service Programs Club member Start of 1/01/2003 End date ongoing Approx App	de d
Who can we recontact to verify? P Who can we recontact to verify? P Who can we recontact to verify? P	Activities sition title Phone No. & address ganisation Activities Bull Name Activities Activities	Community Service Programs Club member Start of 1/01/2003 End date ongoing Approx Ap	de d
Who can we recontact to verify? P Who can we recontact to verify? P Who can we recontact to verify? P	Activities sition title Phone No. & address ganisation Activities estion title Full Name Phone No. & address ganisation Activities activities sition title Activities activities sition title Sanisation Activities	Community Service Programs Club member Start date 01/01/2003	de d

NAME: Gregory Hou	se		GAMSAT ID: 123	34567			
DIVERSITY OF	EXPERIENCE						
Name & address	Orange Youth Theatre Group, 1234 Somewhere Street.	, NSW		Postcode 2800			
of organisation Activities	Theatrical productions - not for profit group			i ostcode			
Position title	Stage & props manager Sta	1 ADIII 2000	Nov 2005 Approx hours	25 Week Month Year Total			
Who can we Full Name	Mary Smith	Position	heatre Group Co-ordinator				
contact to verify? Phone No.	02 6249 9956		nary_smith@email.com.au				
2							
Name & address of organisation	Taiwan English College, 356 Hu-Chow Road, Taipei, Ta	aiwan		Postcode 100			
Activities	Teaching english as a foreign language to university stu						
Position title	English teacher Sta		Dec 2000	Week Month Year Total			
Who can we Full Name	John Chen	Position	ollege Director				
contact to verify? Phone No.	+886-2-1234 5678						
Name & address							
of organisation	Cariberta Crion Cociety, 1 C Box 30321, Civic AC1			Postcode 2602			
Activities	Singing at community events, choir competitions choir member Sta	rt Feb 2007 End	present Approx	3 Week Month Year Total			
Position title	dat		hours	Per X			
Who can we Full Name contact to	Rosemary Jones	Position C	hoir master/conductor				
verify? Phone No.	02 6162 7998	E-mail ro	osemaryj@bigpond.com				
4 Name & address	Southern Stars Music Extraviganza			Destanda 2500			
of organisation	Postcode Postcode			Postcode 2000			
Activities Position title	Stage manager Sta	rt 01/01/2001 End	101/01/2000	10 Week Month Year Total			
	Stanley Showbis			rei A			
Who can we Full Name contact to		Position	irector				
verify? Phone No. 02 4227 6256 E-mail lights_up@theshow.com.au							
Name & address				Postcode			
of organisation Activities				. 000000			
Position title	Sta dat			Week Month Year Total Per			
Who can we Full Name		Position					
contact to verify? Phone No.		E-mail					
verny: I none No.		L-IIIall					

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NAME: Gr	egory Hou	6e	GAMSAT ID: 1234567						
INAIVIE.	<u> </u>				J GAINISAT	טו			
HIGH LE	VEL O	F PERFORMANCE IN AN AREA	A OF HU	IMAN END	EAVOUR				
4	e & address	Completed Phd in Education, University of Wollong					Postcodo 2500		
of o	organisation Activities	On Postcode Program of visual literacy in education					Postcode 2000		
F	Position title		Start 01/01/	/2002 End	10/06/2005 A	pprox 18	Week Month Year Total		
		Dr.L. Lookupr	date	_		hours Per			
Who can we contact to		Dr L. Lockyer 02 4221 9876		to	upervisor 	m au			
verify?	Phone No.	02 4221 3010		E-mail to	mysuper.@uow.com	ii.au			
	e & address organisation	Thirroul Seaside Festival, c/- PO Box 47, Thirroul					Postcode 2515		
OI O	Activities	Artist and prize winner abstract modern oil, and scu	ulpture-mixed	d media					
F	Position title	Artist	Start April 2	2000 End date		pprox 6 hours Pe	Week Month Year Total		
Who can we	Full Name	Ian Brown		Position	djudicator				
contact to	Phone No.	02 4221 3590		E-mail br	rowni@seaside.com	n.au			
3 Name	e & address	0 11 0 1511 1 0 11							
of o	organisation	South Coast Ethnic Council Enable communication between members of diverse	eo communit	ioc			Postcode 2500		
_	Activities	Interpretar	Start Jan 20	F. J	May 2005 A	pprox 15	Week Month Year Total		
ŀ	Position title		date	date		hours Pe	r X		
Who can we contact to					Position Manager				
verify?	Phone No.	02 4227 6578	themainman@ethnic.com.au						
	e & address								
of o	organisation Activities						Postcode		
F	Position title		Start date	End date		pprox hours Pe	Week Month Year Total		
				date		nouis i e			
Who can we contact to				Position					
verity?	Phone No.			E-mail					
	e & address organisation						Postcode		
	Activities								
F	Position title		Start date	End date		pprox hours Pe	Week Month Year Total		
Who can we	Full Name			Danition					
contact to	i uli ivallie			Position					

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	ADMISSIONS PORTFOLIO 2009 IOI 2010
NAME: Gregory Ho	GAMSAT ID: 1234567
TV WIE.	Oranovi iz.
EXPERIENCE	S / ACHIEVEMENTS NOT INCLUDED ELSEWHERE
Name & addres	St Josephs Primary School, 67 Main Road, Albion Park Rail
Activitie	s Annual P&F Fundraising Fete
Position tit	e Fete Convenor Start date 01/01/1999 End date 01/01/2001 Approx 3 Week Month Year Total hours 3 Week Month Year Total
Who can we Full Nam	John McKenzie Position President St Josephs P&F
contact to verify? Phone No	D. 02 4252 6772 E-mail president@stjo.gov.com.au
2 Name & addres	
of organisation	
Position tit	e Start End Approx Week Month Year Total date date hours Per
Who can we Full Nam	e Position
contact to verify? Phone N	o. E-mail
3 Name & addres	
of organisation	
Position tit	Start Fnd Approx Week Month Year Total
Who can we Full Nam	e Position
contact to verify? Phone N	o. E-mail
4 Name & addres	
of organisation	
Position tit	Start End Approx Week Month Year Total
Who can we Full Nam	e Position
contact to verify? Phone N	
5 Name & addres	s
of organisation	
Position tit	Start End Approx Week Month Year Total
Who can we Full Nam	e Position
contact to verify? Phone N	