

APPLICATION FOR ENROLMENT FORM

***Please read the attached general information sheet and submit to the school of your choice.*



OFFICE USE ONLY:

Date received: _____

Category: _____

Application for: _____ (year level) _____ (year)

1. PERSONAL DETAILS (PLEASE PRINT ALL DETAILS BELOW)

Child's surname	Given names	Date of birth	Sex (M /F)
Surname of parent/guardian	Given names	Mr/Mrs/Ms	
Residential Address (must be completed)			Postcode
Postal Address (if different from residential address)			Postcode
Telephone – Home	Mobile Phone No.		
Work (if convenient)	Email		
If applicable, name of school at which the child is currently or was last enrolled:	Name of School:		
Are there any brothers or sisters attending this school? Please indicate(√) YES <input type="checkbox"/> NO <input type="checkbox"/>	Names and year levels:		
Are there any Family Court Orders regarding the day to day or long term care, welfare and development of the child?	Please indicate(√) YES <input type="checkbox"/> NO <input type="checkbox"/>		
** Is your child currently under suspension / been excluded from a school? Please indicate(√) YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>	If yes, name of school:		

2. PERMANENT RESIDENT OF AUSTRALIA?

Please indicate(√) YES NO

If no, please indicate date entered Australia: _____ VISA SUB CLASS NO: _____

3. DISABILITY/MEDICAL CONDITION?

This information will assist the school principal with considering whether any specific or additional resources are required and available to assist the school with providing the best educational program for your child. Please indicate (√)

Physical	Intellectual	Other	Medical Condition
YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

Please outline nature of disability/medical condition: _____

I declare that the information provided on this form is true.
If applying for a Kindergarten or Pre-primary program, I also declare that this is the ONLY application I have made.

Signature of parent/guardian _____ Date _____

*** These questions are unlikely to apply to Kindergarten and Pre Primary children.*