7KH LQIRUPDWLRQ UHTXHVWHG LQ WKLV IRUP LV UHTXLUHG IRU HQUROPHQW S
VXSSRUW WKH HGXFDWLRQDO QHHGV RI VWXGHQWV

7KLV IRUP VKRXOG EH FRPSOHWHG E\ SDUHQWV RU FDUHUV ZKR DUH UHVSRQVLE
UHVSRQVLELOLW\ RI WKH SHUVRQ FRPSOHWLQJ WKLV IRUP WR FRQVXOW ZLWK
HQUROPHQW SURFHVV 3DUHQWV RU FDUHUV FDQ FR VLJQ WKH VDPH IRUP RU FR
XQDEOH WR EH VKDUHG EHWZHHQ WKHP

,I UHTXLUHG LQIRUPDWLRQ LV QRW SURYLGHG RU WKHUH LV D GLVSXWH EHWZHH
SULQFLSDO LV UHTXLUHG WR FRQVLGHU WKH VWXGHQW V HGXFDWLRQ DQG ZH
HQUROPHQW

2QO\ RQH HQUROPHQW IRUP VKRXOG EH VXEPLWWHG SHU VWXGHQW %\ FRPSO
DFFHSWLQJ D SODFH IRU \RXU FKLOG DW WKH KLJK VFKRRO \RX DUH DJUHHLQJ WR

$OO VFKRRO URROV $XVWUDOLD DUH H[SHFWHG WR FROOHFW WKH VDPH HDUOLHVW GDWD
UHTXLUHPHQW RI WKH &RPPRQZHDOWK *RYHUQPHQW WR PHHW GDWD FROOHFW
$XVWUDOLDQ (GXFDWLRQ 5HJXODWLRQV

678'(17 '(7$,/6

Surname:

First * L Y HQame:

Second * L Y HQame: (if applicable)

Preferred First Name: (if applicable)

™Gender: 0DOH)HPDOH 6HOI GHVFULEHG BBBBBB.BBBBBBBBBBBBBBBBBBBBBBB

Date of Birth: (dd-mm-yyyy) Student Mobile Number: (if applicable)

:hich year are you seeking to enrol this student?

…Foundation …1 …2 …3 …4 …5 …6 …7 …8 …9 …

If No, provide details for other schools:					
Other school Qame:		Days / week:		Has enrolment been accepted?	…Yes …No
Other school Qame:		Days / week:		Has enrolment been accepted?	…Yes …No

Student’s Permanent

STUDENT S

STUDENT TRAVEL DETAILS

How will the stude

OFFICE USE ONLY

Can the student Individual Education Plan (IEP) include travel training?

ATTACHMENT – PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. Please indicate your current occupation –

ATTACHMENT – ADDITIONAL PARENT/CARER DETAILS

Enrolling Adult

Surname:		Title:	
First * L Y HNQame:			
* H Q G H U	0 D O H) H P D O H 6 H O I G H V F U L E H G B B B B B B B B B B B B B B B B		

No. & Street $ G G U H V V:			
Suburb:			
State:		Postcode:	
Preferred language of notices:			
Mobile:		Work Phone:	
Home Phone:		Email:	

Can we contact Adult d uring school hours?	…Yes	…No
Is Adult u sually hom e dur ing school hour s?	…Yes	…No
SMS Notifications:	…Yes	…No
Email Notifications:	…Yes	…No

Adult 's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)

…Mobile …Email Mail

…Home Phone : R U N 3 K R Q H

Specify any other special conditions or times related to contact?	

6 W X G H Q W Z H L W K G X O W

$ O Z D \ V 0 R V W O \ % D O D Q F H G

2 F F D V L R Q D O O \ 1 H Y H U

Adult J ob Title:	
Adult Employer:	

Is Adult i nterested in being involved in school

Relationship to student:

…Parent …Step Parent Foster Parent

…Host Family …Relative …Friend

…Self …Other: B B B B B B B B B B B B B B B B B B B B B B B B B B B B B B B B

In which country was Adult born?

…Australia

…Other (please specify): _____ B B B B B B B B

™Does Adult s peak a language other than English at home?

…No, English only

…Yes (please specify): _____

Please indicate any additional languages spoken by Adult :		
Is an interpreter required?	…Yes	…No

6 W X G H Q Y H L W K G X O W