



ENROLMENT APPLICATION

(\$100 non-refundable application fee payable at time of lodgement)

Student Details

Family Name _____ Given Name _____

Date of Birth _____ Age _____ Male/Female _____

Proposed Calendar year of entry _____ Proposed class of entry _____

Nationality _____ Country of birth _____

Australian Citizen Australian Permanent Resident Other (please provide visa details)
Aboriginal Torres Straits Islander Aboriginal/Torres Straits Islander Not applicable

Home Address _____

Suburb _____ Postcode _____

Student lives with (Mother, Father, Both Parents, Guardian, Other - Please specify) _____

Languages spoken at home _____

Siblings

Name	Gender	Age	School	Grade
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_____	_____	_____	_____	_____
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Parent 1

Given Name _____

Family Name _____

Occupation _____

Australian Citizen Australian Permanent Resident
Other (please provide visa details)

Address _____

Home Phone _____

Mobile _____

Business Phone _____

Email _____

Parent 2

Given Name _____

Family Name _____

Occupation _____

Australian Citizen Australian Permanent Resident
Other (please provide visa details)

Address _____

Home Phone _____

Mobile _____

Business Phone _____

Email _____

History of student - education (to be filled out by Year 1-12 applicants only)

Present school _____ Grade _____ Dates _____

Previous school _____ Grade _____ Dates _____

Reason for leaving _____

Has your child has been assessed by any of the following health professionals? Yes/No _____

If so, please provide the following information about the student’s needs as part of the individual planning process.

- psychologist’s report documenting functional skills and recommended strategies for working with the student
- speech pathologist’s report documenting receptive and expressive language skills and any recommendations for programs or technology in the classroom
- occupational and physiotherapy reports documenting self help skills and mobility, including assistive technology reports recommending equipment and access audits regarding access to premises
- medical specialist reports identifying issues which need to be considered by the school
- vision and hearing reports documenting level of functioning and recommended strategies.

Agreement Declaration

- I/We desire to enrol my/our chld (as shown in the Student Details section) at Korowal School in accordance with the terms and conditions of enrolment.
- I/We understand that if this application is successful, enrolment can only be confirmed with a formal letter of offer from the Enrolment Administrator or Principal, following an interview.
- I/We declare that the information provided on this form is true and correct.

Both parents are required to sign

1. Parent signature

Print initials and surname

Relationship to student

1. Parent signature

Print initials and surname

Relationship to student

Date _____

Payment of \$100 being application of enrolment fee.

Cash Cheque Mastercard Visa

Name on card _____ Card Number _____

Signature _____ Expiry __/__/__

<p>Please complete the following checklist</p> <ul style="list-style-type: none"><input type="checkbox"/> Complete and sign this Enrolment Application<input type="checkbox"/> Include non-refundable application fee (applications will not be processed without this fee)<input type="checkbox"/> A copy of the applicant's birth certificate<input type="checkbox"/> (Years 1- Pathways) copies of recent school reports<input type="checkbox"/> (Years Kindy - Pathways) any relevant medical or psychological reports	<p>Please return completed form plus all documentation to:</p> <p>The Enrolment Administrator Korowal School PO Box 561 Hazelbrook NSW 2779</p>	<p>FOR OFFICE USE ONLY</p> <p>Application fee _____</p> <p>Receipt No _____</p> <p>Amount _____</p> <p>Date _____</p>
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