NORTH ROCKS PUBLIC SCHOOL

ENROLMENT ENQUIRY

STUDENT DETAILS		DATE OF APPLICATIO	N:
Student Name:			
Parent/Guardian Name:			
Home Address:			
Contact Telephone Number/s: Home:	Work:	Mobile:	
SCHOOL DETAILS			
Current/Last School Attended:		Telephone No:	
Date of Enrolment at this school:		_	
Name of Contact Person e.g. Principal, Deputy	Principal:		
Current year Group of Student (please circle):	K 1 2 3 4	4 5 6	
OTHER MATTERS RELATING TO ENROLMENT I	ENQUIRY		
Reason for enrolment enquiry:			
Year Group in which enrolment is sought (circl	e): K 1 2 3	4 5 6	
If accepted, preferred time of commencement	t (please circle):	immediate next term	next year

Please attach copies of <u>all</u> school reports for the last 2 years and any relevant documentation to this application.

If the student is from overseas include copies of their passport and current visa

The information provided on the enrolment enquiry is being obtained for the purpose of processing the student's enquiry about a place at North Rocks Public School. It will be used by the school to provide you with advice about appropriate educational options and class placement. While the provision of this information is voluntary if you do not provide all or any of this information it may delay or prevent the processing of this enquiry. It will be stored securely. You may correct any personal information provided at any time by contacting the school.