

Ferny Grove State School

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EXPRESSION OF INTEREST FOR STUDENT ENROLMENT: PREP TO YEAR 6

Please complete a sepa	arate form for each student i	n the family. Indicate th	ne number of separate ap	plications:
Name of Student		Male	Female Date of Birth	
Current School		EOI for Year	Birth Certificate MUST be sighted at interview Commencing in	
1. Parent/Guardian	Details (child resides with)	Name:		
Address:			Post Code:	
Home phone:	Mobile:		Work phone:	
Workplace:		Email:		
2. Parent/Guardia	n Details Name:			
Address:		Post Code:		
Home phone:	Mobile:		Work phone:	
Workplace:	Email:			
Please provide the	details of all other school	age (including Pre-Pr	rep) residential siblings	
	Sibling 1	Sibling 2	Sibling 3	Sibling 4
Sibling Name				
Current School				
Year level				
Office use only – Please do not write in this space				
EOI status:				
Enrolment appointment made with: Enrolment Pack sent://Sign				
Date:// _ Time: Sign				

Please indicate if either of the following applies so we can involve the appropriate people for your interview

Medical Condition requiring regular medication or monitoring at school

Disability requiring adjustment to learning or school environment

Please provide basic information

Please provide basic information

Was your child born in Australia?

Yes

No

If your child was NOT BORN in Australia, evidence of Australian Citizenship or current visa status MUST be sighted at interview.

Please select one or more of the relevant boxes which relate to your child's application.

Local Catchment Area http://www.qgso.qld.gov.au/maps/edmap/

Parents or legal guardians who wish to enrol their child at the school will need to demonstrate that the student's principal place of residence is within the catchment area.

Current proof of residency at the address indicated <u>must</u> be provided by way of one of **each** of the following:

One primary source: a current lease agreement, a current driver's licence or unconditional sale agreement

One secondary source: a utility bill (e.g. electricity, gas), or rates notice showing this same address and parent's/legal guardian's name

Parent/Guardian employed at Ferny Grove State School

General entry (for all applicants who do not fit into any of the categories listed above)

I understand that supplying false or incorrect information on this form may lead to the reversal of a decision to approve enrolment. I believe that the information I have supplied on this form is true and correct in every particular, to the best of my knowledge.

Parent/Guardian Signature:

Please type your name in the box to sign

Date:

NOTE THAT YOUR APPLICATION WILL NOT PROCEED UNTIL WE HAVE RECEIVED ALL SUPPORTING DOCUMENTATION

Ferny Grove State School, Finvoy Street Ferny Grove 4055

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