Application for non-local enrolment



Student Information

Family name		Date of birth	//			
Given name		Gender				
Address						
Suburb		Postcode				
Home phone						
Current school		Current scholastic year				
Parent/Carer Info	rmation					
Parent/carer name						
Relationship to student						
Mobile number						
Non-local school	placement request					
Proposed scholastic year		Proposed start date	//			
Criteria for consideration (please tick)	☐ siblings already enrolled at the school ☐ medical reasons ☐ compassionate circumstances ☐ proximity and access to school ☐ other circumstances as identified by the a	pplicant				
Please provide reasons for your application for non-local enrolment based on the selection criteria selected above and attach any supporting documentation.						
Parent/carer signature		Date	//			

School use only

Date received	/	Date of decision	/	Outcome	☐ Accept ☐ Decline		
Panel members	Executive: Staff: Community:				chairperson)		
Reasons for decision	☐ Enrolment cap	exceeded 🗆 C	Other (outline be	low):			
Chairperson signature				Date	/		
School use only – Exceptional circumstances							
Parent/carer informed by phone	☐ Yes ☐ No	Parent/carer informed by letter	□ Yes □ No	Principal endorsed	☐ Yes ☐ No		
Director contacted	☐ Yes ☐ No	Date of contact	//	Director endorsed	☐ Yes ☐ No		

Reasons for non-local placement.	
toucone for non room placement.	

Please attach any supporting documentation. May be continued on another page if necessary.