

Gamma(L-R)

Delta(S-Z)

Preliminary Enrolment Form

Details of Student to Enrol:									
Family Name:									
Given Name:				Middle	Middle Names:				
Date of Birth:				Gende	Gender:		☐ Male ☐ Female		
Current School									
Attending:			Г						
Entry into Year:	□ 7	□ 8	□ 9		10		1	□ 12	
Residential Address:									
Email:									
Phone 1:				Phone	Phone 2:				
Do you have siblin	Oo you have siblings at Nerang State High School:			☐ Yes ☐ No					
If Yes, provide name of sibling, year level, date of birth									
Name:				Year Le	vel:		DOB:		
Please indicate if your student has accessed any of the following services:									
(please provide supporting documentation)									
☐ Guidance Officer ☐ Learning Support									
☐ Special Education Program									
Please ensure the following documents are completed and returned to the School for the processing of your									
Child's Enrolment ☐ Completed and Signed Student Resource Scheme Agreement									
□ State School Consent Form									
We must sight the following documents at time of enrolment									
Birth Certificate or acceptable Official documentary evidence of date of birth and name e.g. Immunisation Letter - It is a Commonwealth Government proviso that for Australian births after 20 August 1986 that the child's birth certificate must be accompanied by evidence that, at the time of birth, at least one of the parents was an Australian citizen.									
☐ School Academic Reports for Previous Two Semesters (Not applicable if moving from Primary School to first year of High School)									
Australian Citizenship Certificate : Of Student or Parent (if applicable), Or									
 Australian or New Zealand Passport : Of Student Not Parent (if applicable), Or 									
☐ Appropriate Visa (if applicable)									
□ Court Orders									
□ Medical									
Other Information:									
The following information will be helpful in ensuring my child has a smooth transition:									
Parent Signature:				Date	Date:				
Office use only Check Enrolment F	Form	□ State Med	ia Consent Form		☐ Signa	ture Progi	am (Vea	r 7 only)	
 phone no's & e permission bo parent/studen House Alpha(A-D) 	email address xes ticked	☐ Birth Certi	ficate esources Scheme orm uments		☐ Come ☐ Instru ☐ Statio	et Progran	ı (Year 7		