



## APPLICATION FOR NON LOCAL SCHOOL ENROLMENT

### STUDENT DETAILS

Family name: \_\_\_\_\_ Given name(s) \_\_\_\_\_

Date of Birth: \_\_\_\_ (dd) / \_\_\_\_ (mm) / \_\_\_\_ (year)

Address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Previous / current school / or preschool \_\_\_\_\_

Scholastic year applied for: \_\_\_\_\_ (yr. K – 6) for \_\_\_\_\_ (yyyy)

### FAMILY DETAILS

Parent / Carer name(s): \_\_\_\_\_

Phone contact: \_\_\_\_\_ email: \_\_\_\_\_

Please indicate if your child requires additional support or is under the care of:

a paediatrician

an occupational therapist

a speech pathologist

other (please specify) \_\_\_\_\_

*see over page*

Please indicate your reasons for wishing to enrol your child/ren at Ermington West Public School. Examples of reasons may include proximity and access to the school, current sibling enrolment, medical reasons, safety and supervision before and after school, availability of programs or combination of programs offered, special interests or abilities, school structure and organisation or compassionate circumstances.

### **PLACEMENT PROCEDURES**

1. In accordance with Departmental policy, preference will always be given to the enrolment of local in-area children
2. Out of area applications will be considered by the Placement Committee
3. All current educational settings for your child will be contacted prior to any offer of enrolment

I have contacted my locally designated primary school which is

\_\_\_\_\_ and the name of executive member of staff I have spoken with is \_\_\_\_\_

I have read the placement procedures outlined above.

Signature of parent / carer: \_\_\_\_\_ Date: \_\_\_\_\_

Name (*please print*): \_\_\_\_\_