

ENROLMENT APPLICATION

(Please Print Clearly)

A separate enrolment form is required for each student / child in the family. Please lodge this form with your application fee payment of AUSS\$200 (non-refundable) per application form. Application fee is subject to change. Please ring the office to confirm the cost at time of lodgement. Applications are placed on a waiting list from date of fee payment.

Child's Surname: _____ Given Names: _____ Middle Names: _____

Known as (if different from first name): _____ Date of Birth: ___/___/___ Present Age: _____ Gender: Male Female
(Please tick one)

Nationality: _____ Country & Place of Birth: _____ Arrival Date (if not born in Australia): ___/___/___

Language Spoken: _____ Are you Aboriginal or Torres Strait Islander? Yes No

Religion: _____ Current School: _____ Current Grade: _____ Year to be Enrolled: _____
(Eg. 2018, 2019, 2020 etc)

FATHER'S / GUARDIAN'S DETAILS

Surname: _____ First Name: _____ Nationality: _____

Address: _____ Postcode: _____

Home Phone: _____ Mobile: _____ Email: _____

Marital Status (Please tick one of the following): Married Separated Divorced Defacto Re-Married (please fill in next line)

New Spouse's Name: _____ Occupation: _____ Phone: _____

Employment Details

Employer: _____ Occupation: _____

Address: _____ Postcode: _____

Work Phone: _____ Mobile: _____ Email: _____

MOTHER'S / GUARDIAN'S DETAILS

Surname: _____ First Name: _____ Nationality: _____

Address: _____ Postcode: _____

Home Phone: _____ Mobile: _____ Email: _____

Marital Status (Please tick one of the following): Married Separated Divorced Defacto Re-Married (please fill in next line)

New Spouse's Name: _____ Occupation: _____ Phone: _____

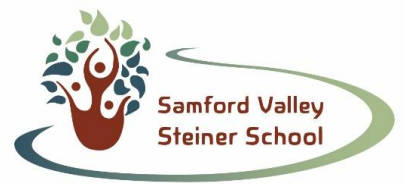
Employment Details

Employer: _____ Occupation: _____

Address: _____ Postcode: _____

Work Phone: _____ Mobile: _____ Email: _____

Special Family Circumstances (e.g. Custody Order, Access Details, Parental Health)



FINANCIAL RESPONSIBILITY

Name of person/s financially responsible for student's / child's education:

Name: _____ Relationship: _____ Occupation: _____

Address: _____ Ph. /Mob: _____

Name: _____ Relationship: _____ Occupation: _____

Address: _____ Ph. /Mob: _____

B. Residency: Permanent Temporary (please give details: Name of people child will be living with: _____)

Relationship: _____ Address: _____ Ph/Mob: _____

REFERENCES

For Student: Teacher References from Last School Attended

Name of School: _____ Name of Teacher: _____

Phone: _____ Fax: _____ Email: _____

SIBLINGS

Please list this child's siblings & their birth dates: _____

DECLARATION (This section MUST be filled in)

I / We hereby apply to have the above-named student / child placed on the enrolment waiting list. Should he / she be accepted, following an interview, I / we undertake to support the rules and regulations of the school, and to be responsible for the payment of fees. I will update the school with any changes to postal / email addresses.

Father's / Guardian's Name: Signature: Date:/...../.....
 (Please print clearly)

Mother's / Guardian's Name: Signature: Date:/...../.....
 (Please print clearly)

FOR YOUR INFORMATION

Have you been on a guided tour of the school?

As part of the application process, it is recommended that you go on a guided tour of the school.

Please call the office on (07) 3430 9600 to make a booking for the next scheduled tour. look. Tour dates are listed on our website.

FOR OUR INFORMATION

Please tell us how you heard of Samford Valley Steiner School.

- Word of Mouth
- Website
- Newsletter
- Newspaper
- Other

**THANK YOU FOR YOUR APPLICATION.
 PLEASE ENSURE THAT A NON-REFUNDABLE FEE OF
 AUS \$200 ACCOMPANIES THIS FORM.**

**THE FEE CAN BE PAID DIRECTLY INTO THE
 SCHOOL'S BANK ACCOUNT: National Australia Bank**

**BSB: 084 209
 Account Number: 538 620 260
 Reference: [CHILD'S NAME]**

A RECEIPT WILL BE ISSUED WHEN FEE IS RECEIVED.

OFFICE USE ONLY		Application Received:	
Application Fee Received	<input type="checkbox"/> Yes <input type="checkbox"/> No		Receipt No:
	<input type="checkbox"/> Amt owing \$.....		<input type="checkbox"/> EFTPoS <input type="checkbox"/> Other
Entry Status	<input type="checkbox"/> Accepted (Starting Date: Term: Year:) <input type="checkbox"/> Not Accepted (Reason:) <input type="checkbox"/> Deferred to Class: Year: By		