

DATE:

TIME:

77 Ziegenfusz Road, Thornlands Q. 4164

Phone (07) 3206 5222

# Application for Enrolment

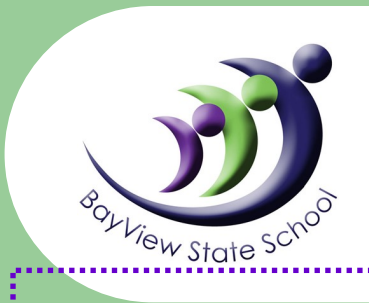


(Student's Name)

Prep	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5	Yr 6
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(Please ✓)

In Catchment	
Out of Catchment (\$50 Application Fee Req)	
Sibling of Current Student	



## BayView State School

### With this Application Please Enclose

- \$50 Application Fee. OUT OF CATCHMENT ONLY— Does NOT apply if Sibling already Enrolled.
- Copy of Birth Certificate or Visa/Citizenship.
- Copy of most recent Report Card. (Year 1-6)
- Childcare Centre consent for transition statement. (Sign at Childcare Centre)
- Copy of most recent NAPLAN test.
- Proof of Residency If In Catchment Area (Rates Notice / Rental Agreement + Utility Bill).
- Any confidential matters addressed to the Principal.
- Academic & Specialist Info (Paediatric, Speech, Verification, Guidance, Learning support).
- Student Absence SMS Notification YES / NO—Preferred Mobile: \_\_\_\_\_
- Classroom Correspondence / Newsletter—Preferred Email: \_\_\_\_\_


All information relevant to your child's educational needs must be enclosed with this Application.

Enrolment Database	<input type="checkbox"/>	Medical Alert	<input type="checkbox"/>
OneSchool	<input type="checkbox"/>	Custody Alert	<input type="checkbox"/>
SEP Referral	<input type="checkbox"/>	Guidance Referral	<input type="checkbox"/>
Learning Support Referral	<input type="checkbox"/>	<b>OFFICE USE ONLY</b>	<input type="checkbox"/>



**\$50 Non Refundable Enrolment Application Fee  
Payment Details (OUT OF CATCHMENT ONLY)**

Student Name: \_\_\_\_\_

CASH:

CHEQUE:

CARD:

CARD NUMBER: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

EXPIRY DATE: \_\_\_\_ / \_\_\_\_      CARD CHECK VALUE: \_\_\_\_\_

MASTER CARD / VISA (Please Circle)

NAME ON CARD: \_\_\_\_\_

AMOUNT: \$ 50.00

SIGNATURE: \_\_\_\_\_

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