



Campus: _____

EXPRESSION OF INTEREST FOR ENROLMENT FORM

1. Student's Surname: _____ First Name: _____

Second Name: _____ Preferred name: _____ Gender: M F

2. Date of Birth : _____ Place of Birth: _____ Country of Birth: _____

3. Current School : _____ Year of Enrolment: _____

4. Year in which student seeking to enrol : K 1 2 3 4 5 6 7 8 9 10 11 12

5. Child's Residential Status: Australian Citizen Resident Temporary Visa Holder Overseas Student

Arrival Date: _____ Visa Code: _____

Language spoken at home: _____ Emergency Phone: _____

6. Does your child have any special learning or physical needs? If yes, please provide brief information:

7. Mother's/ Carer's Name: _____ Occupation: _____ Nationality: _____

Country of birth: _____ Business Phone: _____ Mobile Phone: _____

8. Father's/ Carer's Name : _____ Occupation: _____ Nationality: _____

Country of birth: _____ Business Phone: _____ Mobile Phone: _____

9. Residential Address: _____ Postcode: _____ Phone No: _____

10. Email: _____ Medicare No: _____

11. Has your child been suspended or expelled from school? Please provide details (if any):

12. Does the child have other siblings attending Al Amanah College? Yes No

13. For you application to be processed, please attach to this form a copy of:

- a) The most recent **progress report** from the current school
- b) Official evidence of your **residential/ citizenship** status in Australia
- c) Birth Certificate
- d) Immunisation record/certificate

(Please note that the information above will be used for school administration and education purposes only)

I confirm that the information above is true and accurate.

Parent's signature: _____ Date: _____

In the event that a place is available, you will be contacted and your child will be required to sit for an entrance exam. If your child is placed on the waiting list, please note that an updated Expression of Interest for Enrolment Form needs to be submitted in six months' time. The acceptance of this form does not guarantee an offer of enrolment.

OFFICE USE ONLY:

Date Received: _____ By: _____ Signature: _____

DECISION: Not successful Further action-Comments: _____

PRINCIPAL/ DEPUTY PRINCIPAL (Signature): _____ Date: _____