

# EXPRESSION OF INTEREST FOR ENROLMENT



## PERSONAL INFORMATION

|                    |                |                                      |  |
|--------------------|----------------|--------------------------------------|--|
| Student's Surname: |                | First Name:                          |  |
| Second Name:       | Date of Birth: | Gender:                              |  |
| Country of Birth:  |                | Place of Birth:                      |  |
| Nationality:       |                | Language Spoken at Home:             |  |
| Current School:    |                | Year of Enrolment at Current School: |  |

## ENROLMENT INFORMATION

|   |                             |
|---|-----------------------------|
| Grade in which you seek to enrol:       | Child's Residential Status: |
| Arrival Date:<br><i>(if applicable)</i> | Visa Code:                  |

## OTHER IMPORTANT INFORMATION

|   |   |
|---|---|
| Does the Child have any special learning/physical needs?                  | Can you provide any medical/professional reports? |
| If you have answered "Yes" above, please provide brief information below: |   |

## OTHER IMPORTANT INFORMATION

|   |
|---|
| Has the child ever been suspended or expelled from school?<br>If "Yes", please provide details below: |
|---|

## PERSONAL INFORMATION

|                     |                   |
|---------------------|-------------------|
| Mother's Full Name: | Occupation:       |
| Nationality:        | Country of Birth: |
| Mobile Number:      | Business Number:  |
| Email:              |                   |

## SECOND PARENT INFORMATION

|                     |                   |
|---------------------|-------------------|
| Father's Full Name: | Occupation:       |
| Nationality:        | Country of Birth: |
| Mobile Number:      | Business Number:  |
| Email:              |                   |

## RESIDENTIAL INFORMATION

|   |        |                                       |
|---|--------|---------------------------------------|
| Child's Main Address:   |        |                                       |
| Suburb:   | State: | Postcode:                             |
| Which parent lives at the above address:  |        | Please indicate parent address below? |
| Second Parent Address:<br><i>(please complete if one parent is residing at a different address)</i> |        |                                       |
| Suburb:   | State: | Postcode:                             |

## INFORMATION ON SIBLINGS ATTENDING GLENROY PRIVATE

|   |                    |
|---|--------------------|
| Does the Child have any siblings currently attending Glenroy Private? | If "Yes" how many? |
| Add siblings Name and Grade below:                                    |                    |
| Child 1:  | Grade:             |
| Child 2:  | Grade:             |
| Child 3:  | Grade:             |
| Child 4:  | Grade:             |

## CHECKLIST

For your application to be process, please attached:

- Child's Birth Certificate
- Child's Immunisation Certificate
- Most recent progress report from current school
- Official evidence of your residential/citizenship status in Australia

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

In the event that a place is available, you will be contacted, and your child will be required to sit 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.

**The information above is true and accurate.**

Parent's Signature:

Date:

### OFFICE USE ONLY

Received by:

Signature:

Date:

Decision:

Date:

Contacted:

Further Action Comments:

Principal/Deputy Principal Signature:

Date:

**Please return completed form via email to  
[enrol@glenroyprivate.vic.edu.au](mailto:enrol@glenroyprivate.vic.edu.au) or  
in person at **93 Daley St, Glenroy VIC 3046****