Wanguri Primary School Expression of Interest

Today's Date_____ Expected commencement date_____

STUDENT DETAILS

Name_____ DOB_____ Yr Level _____ Male / Female

Name_____ DOB_____ Yr Level _____ Male / Female

Name_____ DOB_____ Yr Level _____ Male / Female

ADDITIONAL NEEDS/MEDICAL DETAILS

Please indicate below if your child/ren requires support.

_____

_____

_____

PARENT DETAILS

Defence Force posting YES/NO Please circle ARMY AIRFORCE NAVY

Mother First name_____ Surname_____

Mobile Ph _____ Daytime Ph_____

Email _____

Father First name_____ Surname_____

Mobile Ph_____ Daytime Ph _____

Email _____

HOME ADDRESS

_____

_____

_____

_____

POSTAL ADDRRESS

_____

_____

_____

_____

PREVIOUS SCHOOL DETAILS

Name of School_____ State_____ Date of leaving_____

IF YOU HOLD A VISA, PLEASE COMPLETE SECTION BELOW

Visa Sub Class _____

Visa issue date _____ Visa expiry date _____

OFFICE USE ONLY

Date - Enrolment pack handed out _____

Date – Enrolment pack returned _____