



EXPRESSION OF INTEREST FOR ENROLMENT PREP-6

This Expression of Interest for Enrolment Form must be completed and submitted to the Administration Office by post or in person, or emailed to enrolments@hambletonss.eq.edu.au along with a copy of the relevant paperwork, **before an enrolment will be considered.**

An Administration Officer will contact you to advise the outcome of your application. If successful, Enrolment paperwork will need to be completed an Enrolment Interview will be made for you to attend **with your student.**

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|---|--|--|--|
| STUDENT NAME: (as stated on Birth Certificate) | | Year level: | |
| Date of birth: | | <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Student residential address | | | |
| Name of school most recently attended: | | <input type="checkbox"/> Still attending or Date left: | |
| Has the student been enrolled at Hambleton SS previously? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is the prospective student of Aboriginal or Torres Strait Islander origin? | | <input type="checkbox"/> No <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both Aboriginal & Torres Strait Islander | |
| English as a second language <input type="checkbox"/> Yes <input type="checkbox"/> No Language spoken: _____ | | Translator required: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Does the student require Special Education Support | | <input type="checkbox"/> Yes <input type="checkbox"/> Verification <input type="checkbox"/> No | |
| Medical condition: | <input type="checkbox"/> Yes <input type="checkbox"/> No | Details: | |
| Custody orders: | <input type="checkbox"/> Family Court orders | <input type="checkbox"/> Other Court orders | <input type="checkbox"/> Out-of-home Care Arrangements |
| Are there siblings who may require enrolment? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, please complete 'Future Enrolment' section on the back of this form: | | | |
| Parent/Carer 1-Name: | | Relationship to student: | |
| Residential address: | | | |
| Phone number: | | Email: | |
| Parent/Carer 2- Name: | | Relationship to student: | |
| Residential address: | | | |
| Phone number: | | Email: | |
| <p>If parents/carers live separately or do not reside with student, which is the primary place of residence for the student:</p> <input type="checkbox"/> Parent/carers 1 <input type="checkbox"/> Parent/carers 2 <input type="checkbox"/> 50/50 shared care <input type="checkbox"/> Residential care/house | | | |

Future Enrolment Information

Please list sibling names and Date of Birth below

| Full Name | DOB |
|-----------|-----|
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Parents/carers wishing to enrol their child must demonstrate that the student's principal place of residence is within the Hambledon State School catchment area.

Boarding students living away from home- parents/carers must provide:

- A statutory declaration advising the guardianship of student and residential address of carer, and
- a copy of proof of residency, as listed above, must be provided by the person the student will be boarding with
- Name of the person who the student will be boarding with and will be responsible for their care

Additional requirements:

- Student's birth certificate- if student not born in Australia, birth certificates (parent/carers and student), passports (parent/carers and student) and relevant visa paperwork is required.
- The two most recent Report Cards received from previous school/s
- Most recent NAPLAN test results, if applicable
- Current custody/legal orders, if applicable
- Any relevant specialist medical reports, eg. paediatrician, occupational therapist, speech therapist

Your Enrolment Interview

If the student's *Expression of Interest for Enrolment* is approved, the student and parent/carers must attend an interview. You will be contacted by an Administration Officer to make an appointment time.

Please be punctual (10 minutes prior to appointment time) - lateness may require rescheduling your appointment. Please advise the school on 40 408 666 to reschedule if unable to attend.

OFFICE USE ONLY: Date received: Date phoned:

- Successful
 - Unsuccessful -reason
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