



KEW HIGH SCHOOL

1393 Burke Rd
East Kew 3102
Tel: 9859.8652
Fax: 9819.7880

Aspire Strive Achieve

Expression of Interest : Enrolment - Year 7 in 200 ___

Thank you for your application for enrolment at *Kew High School*. Each year the number of applications for enrolment at Year 7 exceeds the number of available places.

Whilst initial applications are submitted through the Primary Schools, it is necessary to consider additional information relating to students who reside out of the designated neighbourhood area (zone) when determining priorities for enrolment.

Parents may wish to provide this additional information to assist Kew High School in its decision.

Clare Entwisle - Principal

FAMILY NAME (surname) of pupil:	
Pupils other names in full (underline first name used):	
Sex:	Boy <input type="checkbox"/> Girl <input type="checkbox"/>
Date of Birth: / /	
Home address:	Postcode:
No. of years at this address:	
Home phone no:	
Email contact address:	
Current Primary School:	
Brothers / Sisters: <i>Name:</i> <i>School:</i>	
.....	
.....	
FATHER: Name:	MOTHER: Name:
<i>Occupation:</i>	<i>Occupation:</i>
<i>Work phone:</i>	<i>Work phone:</i>
<i>Mobile phone:</i>	<i>Mobile phone:</i>
Any other Secondary Schools applied for:	
<i>School</i>	<i>Preference</i>
.....	<input type="checkbox"/>
.....	<input type="checkbox"/>
.....	<input type="checkbox"/>

Curriculum strengths:
Curriculum needs:
Compassionate reasons (if any):
Attach additional information (Current copies of school reports must be attached to this application):
Signed: Date: / /

Privacy Notice:
Kew High School is collecting your personal information to establish that you reside within the school’s enrolment zone. Your information will not be disclosed to any other organisation without your consent, or unless authorised or required by law. You can access your personal information held by the school by contacting the school on 9859 8652. If you choose not to provide some or all of the information requested we may not be able to enrol your child in *Kew High School*

OFFICE USE ONLY:

- In zone Yes No

- Verification of residential address – documents sighted:
 - Sale / Lease agreement - Length of Lease agreement _____
 (*Lease must be for 12 months plus in the year of entry*)
 (*All lease agreements must be with a bona fide real estate agent*)

 - Utilities bills (**at least 3**)

Telephone <input type="checkbox"/>	Rates <input type="checkbox"/>	Other _____
Electricity <input type="checkbox"/>	Gas <input type="checkbox"/>	

- Appointment / Reports sighted _____

- Enrolment confirmed Yes No

Registrar’s signature: **Date:** / /