Welcome to Our College

APPLICATION FOR ENROLMENT
(Years 7-12)

Enrol in: ☐ Niddrie Campus (Year 7-9) ☐ Essendon Campus (Year 10-12)

Requested year level for enrolment: ☐ Year 7 ☐ Year 8 ☐ Year 9 ☐ Year 10 ☐ Year 11 ☐ Year 12
When does the student wish to enrol: ☐ As soon as possible ☐ Start of next semester ☐ Start of next year

Details of Student

Given Name: _____ Family Name: _____

Date or Birth: _____ /_____ /_____ Gender: ☐ Male ☐ Female ☐ Other _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Will the above address be the same if attending our College? ☐ *Yes* ☐ *No*

If No please provide details*:* _____

Details of Current School:

School Name: _____

School's Phone Number: _____ Current Year Level: _____

Year Level Co-ordinator/s Name: _____

Parent/Guardian Contact Details:

Given Name: _____ Family Name: _____

Email: _____

Business Phone: _____ Mobile: _____

Reason for School Transfer: _____

_____

Post-school Intention (if known): _____

Subjects Interested In (for Year 10,11,12): _____

If a brother or sister currently attends Essendon Keilor College, please supply their name and Year level.

Sibling name (s): _____ Year level: _____
Campus _____

Before this application can be processed you need to Mail, Deliver or Email (in pdf format) the following:

1. A copy of your child's most recent school report
2. A copy of your child's most recent NAPLAN report

Email: Your application and reports (PDF's) can be lodged electronically. ***essendon.keilor.co@education.vic.gov.au***
Deliver: **At reception of any campus**

Signature of Parent/Guardian: _____ Date: _____

Office Use Only
Application Received _____ *Report Received on* _____ *by* _____ *(staff name)*

About your student		
Reason/s for enrolment Please provide details		
Is your child participating in any special programs at the current school? E.g. extra literacy/numeracy support? If yes, please give details	Yes	No
Are there any agencies we would need to contact to support your child with his/her/their learning? If yes, please list	Yes	No

Essendon Keilor College

Reference by Current School

Instructions: Parents should take this form to the current school for feedback. The school will complete the form and email to Essendon Keilor College at their earliest convenience.

Email: Essendon.keilor.co@education.vic.gov.au

The student listed below has applied to attend our College. In the best interests of all, we are requesting some information, which will assist us meeting the student's needs. Thank you for your time and effort.

STUDENT NAME: _____

CURRENT SCHOOL: _____

CURRENT YEAR LEVEL: _____

To be completed by Assistant Principal, Year Level Coordinator (or equivalent) and / or Student Wellbeing Coordinator

In supporting the student both academically, physically and emotionally please outline any areas of concern, if appropriate that you feel the staff of Essendon Keilor College should be made aware of so as to maximise the student's growth.

General Skills	*Needs Attention*	*Acceptable*	*Very Good*	*Excellent*
Effort				
Class behaviour				
Organisation				
Attendance				
Punctual to School				
Punctual to Class				
Participate in classroom activities				
Adheres to full school uniform policy				

Is the student presently making academic progress? ☐ Yes ☐ No

Has the student been suspended in the time they have been at your school? ☐ Yes ☐ No

If yes, we require a brief summary of all suspensions in the previous 12 months.

DATE	REASON	No. of Days

Has the student been linked to outside agencies for support? Please add details:

Is the student PSD Funded? ☐ Yes ☐ No Level of funding:

Has the student been involved in any school based intervention or support program? ☐ Yes ☐ No

If yes, please elaborate:

Additional comments if required:

NAME: SIGNATURE:

ROLE: DATE:

PHONE:

EMAIL: