



## OUT OF AREA EXPRESSION OF INTEREST APPLICATION

Please attach to this application:

- a copy of your birth certificate
- last school report
- any other supporting documentation to support your application.

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex:  M  F

Year to enrol: \_\_\_\_\_ Current School: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Parents/Carers whom child is living with: \_\_\_\_\_

\_\_\_\_\_

Reason for seeking out of area enrolment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please return completed application to the front office. Your name will then be placed on a list.  
You will be contacted if a place becomes available.

