ENRICHMENT PROGRAM
APPLICATION FORM YEAR 7 2020

__Please complete and return to: Jayne Arnold-Harsley, Enrichment Program Coordinator__

Personal Details of Students:

First Name:	Surname:
Date of Birth:	Gender: Male Female
Current School:	
Current Year Level:	Year Level to Enrol:

Home Addresses:

No. & Street	
Suburb:	State:
Postcode:	Tel Number:
Mobile:	
Parent/Guardian Email Address (required):	

Please attach with this application copies of your previous school report, Attendance Data and NAPLAN report.

Character References (Classroom Teacher)

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Referee Name: _____Signature:_____

Contact Phone Number:_____

Character References (Classroom Teacher)

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Referee Name: _____Signature:_____

Contact Phone Number:_____

Why do you want to be a part of the Enrichment Program?

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What have been some of your academic achievements?

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What are some of your short and long term aspirational goals in academics?

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All statements on this form are true and correct, and I understand that the submission of this form does not imply any commitment by the education provider to admit me to the program.

NOTE: INCOMPLETE APPLICATION FORMS WILL NOT BE CONSIDERED

Applicant's Name:	
Applicant's Signature:	Date:

Parent / Guardian's Name:	
Parent / Guardian's Signature:	Date: