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## PRE- ENROLMENT REGISTER APPLICATION

### Student Personal Details

Family Name:

Given Names:

Preferred Name:

Date

Date of Birth:      Sex: Male  Female

What date are you seeking admission for?  
  
\_\_\_\_\_

What Year Level are you seeking admission for?  
  
\_\_\_\_\_

**What is the student's previous school or Kindergarten?**  
*If overseas, nominate country. If interstate, nominate state.*

If born Overseas, Date of Arrival

Cultural Background \_\_\_\_\_ Aboriginal /or Torres Strait Islander: No  Yes

Medical Condition if any:

### Residential Address (Of Parent/Guardian with whom student lives) *(Proof of residency is needed with pre-enrolment form)*

Address Line 1:

Address Line 2:

Suburb/Town:

Postcode:  Email

### Biological Parent or Legal Guardian 1

Mr/Mrs/Ms/Other:  Family Name:  Sex: Male  Female

Given Names:  P/G1 Mobile Phone:

Relationship to student:  Permission to contact previous school Yes  No

**Documents provided to school:**  
 Council Rates or copy of rental agreement with bond  Copy of Electricity or gas bill  Birth Certificate or Passport/Visa

### Biological Parent or Legal Guardian 2

Mr/Mrs/Ms/Other:  Family Name:  Sex: Male  Female

Given Names:  P/G1 Mobile Phone:

Relationship to student:

### Medical and Disability Information

Does your child have any diagnosed medical conditions? Yes  No  If yes, provide details

Does your child have any diagnosed disabilities? Yes  No  If yes, provide details