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Imagine Believe Achieve

## **ENROLMENT CHECKLIST**

STUDENT NAME:		D.O.B :				
Trans	sferring from:		Year level:			
In Ca	tchment Area D Outside Catchn	nent $\square$	Sibling $\square$	Staff D	]	
	se ensure you have all of the document lling your student.	ation listed	l below when		Parent check	Office check
	ENROLMENT FORM Digital pdf. and printable versions of our element under the Enrolment tab. Birth Certificate or Passport	nrolment fo	rm are available fro	om our		
	Visa details (if applicable)					
	Proof of Usual Residence (minimum 2 documents, eg rates bill, rentastatement, drivers license)  Most recent School Report/NAPLAN		nt, electricity, gas,	bank		
	Family Court Orders provided (if applicable)					
	Medical Information Provided (if appli (doctors letters of diagnoses, medication of relevant information)	cable)	tion plan, any othe	r		
	Enrolment Agreement Signed					
	Media consent form signed					
	Sport Permission signed					
	Internet Agreement (ICT) signed					
	SRS discussed & signed					
	(which parent is financially responsible – t	ney must a	gree)			
Yr	Subject Selection					
10-	- Laptop Program					
12	Guidance Officer contacted					
OFFI	CE USE ONLY					
Inte	rview Date:/	Interv	view Time:		{ {AM / F	PM}
Inte	view Completed By:					
BEFO	DRE ARRIVAL	ON ARRIV	/AL			
	Create student file Enrol on One School - Class and House Add to - email contact list; Future Tally Welcome letter and interview booked	Ta Pr St	neSchool –ACTIVE of the ID photo int Timetable udent diary s 5-12: email support@e	·		
	EQID & school email address					