



KEILOR VIEWS PRIMARY

EXPRESSION OF INTEREST APPLICATION FOR ENROLMENT

DETAILS OF APPLICANT

DATE: _____

STUDENT'S GIVEN NAME: _____

STUDENT'S FAMILY NAME: _____

STUDENT'S ADDRESS: _____

CURRENT YEAR LEVEL: _____ CURRENT SCHOOL: _____

ZONED SCHOOL: _____

NAME OF PARENT/GUARDIAN: _____

CONTACT NUMBER: _____

REASON FOR TRANSFER: _____

IS YOUR CURRENT SCHOOL AWARE OF THE TRANSFER? YES NO

REASON FOR ACCEPTANCE OR DECLINING ENROLMENT: _____
