



Munno Para

PRIMARY SCHOOL

Respect, Responsibility, Success



EXPRESSION OF INTEREST

The following information will need to be completed for consideration of enrolment at Munno Para Primary School.

Child/rens' Name: (First name, Surname)	DOB	Current Year Level	Custody Order Copy Taken
1. _____	_____	_____	Y/N
2. _____	_____	_____	Y/N
3. _____	_____	_____	Y/N
4. _____	_____	_____	Y/N
5. _____	_____	_____	Y/N

Parent / Care-giver's Name: _____

Address: _____

Home Number: _____

Mobile Number: _____

Current School or Pre School: _____

Previous School / Pre School within the last three years: _____

Does your child/ren have any special considerations we need to be aware of? If yes, what?

Reason for moving: _____

Office Use Only

- Proof of Address
- Proof of date of birth
- Previous school contacted
- Parent / Caregiver contacted





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OFFICE USE ONLY

Child's name:	Year Level:
Aboriginal: Yes/No	GOM: Yes/No
NEP: Yes/No Level: Client of any services: Any reports available: Ever been assessed: Yes/No	Disability:
Attendance concerns: Yes/No Details:	
Behaviour concerns: Yes/No Details:	
Academics:	

