



EXPRESSION OF INTEREST for OUT OF CATCHMENT

SURNAME	NAME(S):	D.O.B
1.		
2.		
3.		

Current Year Level and School	Year Level applying for	Proposed year to commence
1.		
2.		
3.		

Does the student have a sibling at Norfolk Village SS : Y/N	Name(s) of siblings:
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Please give a brief summary for wanting to enrol your child at Norfolk Village SS along with a separate letter addressed to the Principal outlining reasons for this enrolment.

Parent Guardian Name:

Address:	Postcode:
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Contact Number:

Contact Email:

I/We acknowledge this is only an Expression of Interest for Out of Catchment Area and NOT an Enrolment Form.

Parent/Guardian Signature(s) _____ Date ____/____/____

**This Expression of Interest for Out of Catchment Area form must be accompanied by the student's
LAST SEMESTER REPORT and NAPLAN Test Results if applicable**

NORFOLK VILLAGE STATE SCHOOL OFFICE USE ONLY

Reports received:	Y/N		
NAPLAN received if applicable:	Y/N		
Other relevant documents:	Y/N		
Date received:	Time:	Ref No:	Administration Officer: