**STUDENT ENROLMENT**

**EXPRESSION OF INTEREST FORM**

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| **SACRED HEART CATHOLIC PRIMARY SCHOOL**227 York Street, Launceston 7250http://sacredheartl.tas.edu.au/ |
| **Seeking enrolment for Grade: Year:** |
| **STUDENT DETAILS** |
| **Surname:** |
| **First Name/s:** | **Middle Name:** |
| **Date of Birth:** |  **Religion:** |
| **Gender:**  |  |  |  |
| **Home Address:** |
| **Suburb:** | **Postcode:** |
| **Home Phone:***(indicate if a silent number)* | **Mobile:** |
| **Postal Address (If different from above):** |
| **Other Children at School** |
| **Name of Children:** | **School Name:** | **Grede:** |
| **Mother/Guardian** |
| Surname: | Title (e.g. Mrs/Ms/Dr): |
| First Name:Former Name/Maiden Name: | Middle Name:Date of birth: |
| Home Ph:*(indicate if a silent number)* | Business Ph: |
| Mobile: | Work Mobile: |
| Email: |
| **Father/Guardian** |
| Surname: | Title (e.g. Mr/Dr): |
| First Name:Former Name: | Middle Name:Date of birth: |
| Home Ph:*(indicate if a silent number)* | Business Ph: |
| Mobile: | Work Mobile: |
| Email: |

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| --- | --- | --- | --- |
| Signature: |  | Signature: |  |
|  | *Father / guardian* |  |  *Mother / guardian* |
| Date: |  | Date: |  |
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