

APPLICATION FOR ENROLMENT

This is an application form and does not necessarily guarantee a place. Please complete **one form for each child**.
If completed online, this application form needs to be **printed and signed** before submitting.

STUDENT DETAILS

Office use only ID #

Applicant to enter Year Level	<input type="text"/>	in 20	<input type="text"/>	If enrolling for Pre-Prep, do you intend to remain for Prep?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	
Student Family Name	<input type="text"/>			Given Names	<input type="text"/>				
Preferred Name	<input type="text"/>			Date of Birth	<input type="text"/>	Sex	<input type="checkbox"/>	Position in family	<input type="text"/>
Country of Birth	<input type="text"/>			Nationality	<input type="text"/>				
Student's residential address	<input type="text"/>			Student's Postal address (if different from residential)	<input type="text"/>				
	<input type="text"/>			Postcode	<input type="text"/>				
Telephone	<input type="text"/>	Mobile	<input type="text"/>	Language spoken at home	<input type="text"/>				
Your child lives with	<input type="checkbox"/>	Both Parents	<input type="checkbox"/>	Father only	<input type="checkbox"/>	Mother only	<input type="checkbox"/>	Other	<input type="text"/>
Present School (or Pre-school)	<input type="text"/>						Current Year Level	<input type="text"/>	
Please list any special needs/learning difficulties your child may have	<input type="text"/>								
Victorian Student Number (if known)	<input type="text"/>								
Is your child	<input type="checkbox"/>	An Australian Citizen	<input type="checkbox"/>	A permanent Resident of Australia *	<input type="checkbox"/>	A temporary Resident of Australia *	If yes, please specify Visa type	<input type="text"/>	

PARENT/GUARDIAN DETAILS

Parent A

Parent B

Relationship to Student	<input type="text"/>			
Title	<input type="checkbox"/>	Surname	<input type="text"/>	
First Name/s	<input type="text"/>			
Address (if different from above)	<input type="text"/>		Postcode	<input type="text"/>
Home Phone	<input type="text"/>			
Mobile	<input type="text"/>			
Email	<input type="text"/>			
Occupation	<input type="text"/>			
Employer	<input type="text"/>			
Business Phone	<input type="text"/>			
Are you an Australian Citizen?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No*
*If No, are you	Permanent Resident	<input type="checkbox"/>	Temporary Resident	<input type="checkbox"/>
Are you a former student of The Knox School?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Year Left	<input type="text"/>	House (if known)	<input type="text"/>	

Relationship to Student	<input type="text"/>			
Title	<input type="checkbox"/>	Surname	<input type="text"/>	
First Name/s	<input type="text"/>			
Address (if different from above)	<input type="text"/>		Postcode	<input type="text"/>
Home Phone	<input type="text"/>			
Mobile	<input type="text"/>			
Email	<input type="text"/>			
Occupation	<input type="text"/>			
Employer	<input type="text"/>			
Business Phone	<input type="text"/>			
Are you an Australian Citizen?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No*
*If No, are you	Permanent Resident	<input type="checkbox"/>	Temporary Resident	<input type="checkbox"/>
Are you a former student of The Knox School?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Year Left	<input type="text"/>	House (if known)	<input type="text"/>	

OTHER CHILDREN IN THE FAMILY AT THE KNOX SCHOOL

<input type="checkbox"/>	Current student/s	Name	<input type="text"/>			
<input type="checkbox"/>	Future Enrolment	Name	Proposed Year of Entry	<input type="text"/>	Entry Year Level	<input type="text"/>
<input type="checkbox"/>	Future Enrolment	Name	Proposed Year of Entry	<input type="text"/>	Entry Year Level	<input type="text"/>

(Please submit a separate application for other children)

CONDITIONS OF ENROLMENT

- I/We wish to register the student described on page 1, for enrolment at The Knox School ("the School") for admission in the Level and Year stated and enclose the Enrolment Application Fee which I/we understand is not refundable.
- I/We understand that this application for our child does not guarantee a place for the year level requested. In the event that a place does not become available, the application shall be deferred to the following year.
- I/We agree that should a place be offered to our child, I/we will advise the School in writing of my/our acceptance within 14 days of the offer being made, or within such other time frame as advised by the School, after which the offer will lapse.
- I/We acknowledge that if the offer of a place is accepted by me/us, then I/we agree to sign and return an Enrolment Agreement and lodge the appropriate Confirmation Acceptance Fee in accordance with the Enrolment Agreement.
- I/We agree to advise the School in writing of any changes to the information provided in this Application for Enrolment. If we fail to do so, I/we acknowledge that the School may not make an offer of enrolment for our child, or may withdraw any offer made.
- I/We agree to advise the School in writing of any changes to the information provided on page 1.
- I/We acknowledge that the School's current terms of enrolment are contained in the Enrolment Agreement, a copy of which is published on the School's website. The Enrolment Agreement is subject to change.

Parent A
Signature

Date

Parent B
Signature

Date

SUBMISSION PROCESS

Please Note: **Individual applications for siblings must be lodged separately.** There is a \$110.00 fee (inc GST) per application for new enrolments.

Please return the following:

- Completed Application for Enrolment Form
- Non Refundable Fee of \$110.00 (if applicable)
- Copy of Birth Certificate
- Passport and copy of Australian visa if born outside Australia
- Immunisation History Statement

Mail to:
The Registrar
The Knox School
Reply Paid 4508
Knox City Centre Victoria 3152

Address: 220 Burwood Highway, Wantirna South, 3152, Victoria, Australia
Postal Address: P.O. Box 4508, Knox City Centre, Wantirna, 3152, Victoria, Australia
 Telephone: (+613) 8805 3800 | Fax: (+613) 9887 1850
 Email: registrar@knox.vic.edu.au | www.knox.vic.edu.au
 The Knox School Limited ACN 095 158 222 Registered School No. 1841

APPLICATION FEE

The \$110.00 (inc GST) Application Fee may be paid via:

Cheque
 Payable to "The Knox School"

EFTPOS
 Processed at the Finance Department at The Knox School

Cash
 Processed at the Finance Department at The Knox School

Credit Card
 Visa Mastercard Amex

Card No.

Expiry /

Name on card

Signature

Office Use Only

Application Fee Received Amount \$