

Welcome to Our College

APPLICATION FOR ENROLMENT (Years 7-12)

Enrol in: East Keilor Campus
(Year 7-9) Niddrie Campus
(Year 7-9) Essendon Campus
(Year 10-12)**Requested year level for enrolment:** Year 7 Year 8 Year 9 Year 10 Year 11 Year 12**When does the student wish to enrol:** As soon as possible Start of next semester Start of next year**Details of Student****Given Name:** _____**Family Name:** _____**Date or Birth:** _____ / _____ / _____**Gender:** Male Female**Address:** _____
_____**Suburb:** _____**State:** _____**Postcode:** _____**Details of Current School:**

School Name: _____

School's Phone Number: _____ Current Year Level: _____

Name of Co-ordinator: _____

Parent/Guardian Contact Details:

Given Name: _____ Family Name: _____

Email: _____

Home Number: _____ Business Number: _____ Mobile: _____

Reason for School Transfer: _____
_____**Post-school Intention (if known):** _____
_____**Subjects Interested In (for Year 10,11,12):** _____
_____**If a brother or sister currently attends Essendon Keilor College please supply their name and Year level.**

Sibling name (s): _____ Year level _____

Campus _____

Before this application can be processed you need to Mail, Deliver or Email (in pdf format) the following:

1. A copy of your child's most recent school report
2. A copy of your child's most recent NAPLAN report

Post to:Att: Enrolment Administrator
Essendon Keilor College
P.O. Box 142, Niddrie 3042**Deliver:**

At reception of any campus

Email:Your application and reports (PDF's)
can be lodged electronically.**essendon.keilor.co@edumail.vic.gov.au****Signature of Parent/Guardian :** _____ **Date:** _____*Office Use Only*

Application Received _____ Report Received on _____ by _____ (staff name)