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**HOLLAND PARK STATE SCHOOL WAITING LIST FORM**

**IMPORTANT: This form must be filled in and handed to administration at the school office. Please bring your child’s original Birth Certificate with you, forms will not be accepted without the Birth Certificate. We will notify you if your enrolment has been accepted.**

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| --- | --- |
| **Family Name:** | **Student Name:** |

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| --- | --- | --- |
| **Date of Birth:** | **Today’s Date:** | **Gender:** |

|  |  |
| --- | --- |
| **Year to Commence:** | **Commencing Year Level:** |

|  |
| --- |
| **Reasons for wishing to enrol:**  (Please use separate sheet if more room required) |

|  |  |
| --- | --- |
| **Email Address:** | |
| **Street Address:** | |
| **Suburb:** | **Post Code:** |

|  |  |
| --- | --- |
| **Parent/Guardian (1) Name:** | **Phone:** |
| **Relationship to Student:** | **Mobile:** |

|  |  |
| --- | --- |
| **Parent/Guardian (2) Name:** | **Phone:** |
| **Relationship to Student:** | **Mobile:** |

***Office use only:***

|  |  |
| --- | --- |
| **Date and Time Received:** | **Priority No:** |
| **Birth Certificate/Passport sighted, number recorded and**  **DOB confirmed:**  **YES / NO** | **Number on Birth Certificate:** |

**Record of Communication**

|  |  |  |
| --- | --- | --- |
| **Date** | **Details** | **Signature** |
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