

EXPRESSION OF INTEREST FOR OUT OF CATCHMENT ENROLMENT

Please complete a separate form for each child along with the following documentation:

- a copy of the child's most recent report card
- the child's Birth Certificate and
- any other documentation you wish to provide.

Student Name:		Year Level for enrolment:	
Date of Birth:		Male	Female
Current School:		Current Year Level:	
Intended Start Date:			
Name of sibling/s already attending KWSC: (Siblings of Program of Excellence students are not automatically entitled to enrol)			
Parent/Guardian:	Mr/Mrs/Ms	Mr/Mrs/Ms	
Parent/ Guardian:			
Home Address:			
Mobile No:			
Email Address:			

Kawana Waters State College also offers a number of Programs of Excellence. If you wish to apply for any of the Programs of Excellence listed below, please complete the applicable application/s available on the college website or from the Secondary Administration office and return along with this Out of Catchment form.

Academic Curriculum Extension (ACE)	Aquatics Excellence Program
Arts Excellence Program - Dance	Football Excellence Program (Soccer)
Arts Excellence Program - Drama	

Reason for Out of Catchment Enrolment Form:

A non-refundable administration fee of \$22.00 per application applies.

METHODS OF PAYMENT	
Cash / Cheque Payment	Return money/ cheque to the Secondary Campus office. (Cheques made payable to Kawana Waters State College)
EFTPOS	EFTPOS facilities are available at the Secondary Campus office.
Payment through Qkr App 	Step 1: Download Qkr! App on your mobile phone or tablet Step 2: Register – select your country of residence as 'Australia' and follow the steps to register Step 3: Search for our School Step 4: Register as a 'Guest' Step 5: Under payment choose Out of Catchment Fee \$22



OFFICE USE ONLY	POSITION ON WAIT LIST:
Date Enrolment Request Received:	
Staff Member Accepting Request:	
School Catchment of Residential Address:	
Exemption Type:	<input type="checkbox"/> Exclusion <input type="checkbox"/> DOC's <input type="checkbox"/> Program of Excellence: <input type="checkbox"/> Sibling <input type="checkbox"/> Staff <input type="checkbox"/> Other Notes: _____ _____ _____
Exemption Granted by College Principal:	<input type="checkbox"/> Yes <input type="checkbox"/> No Reason: _____ _____ _____ _____ Date: _____ Mr Brett Burgess Executive Principal

Parent Notified of Decision:	<input type="checkbox"/> Phone Date:
	<input type="checkbox"/> Email Date:
	<input type="checkbox"/> Letter Date:
Appeal Received:	Date:
Appeal Decision:	<input type="checkbox"/> Enrolment Approved <input type="checkbox"/> Enrolment Declined _____ Date: _____ Mr Brett Burgess Executive Principal
Parent Notified of Appeal Decision:	<input type="checkbox"/> Phone Date:
	<input type="checkbox"/> Email Date:
	<input type="checkbox"/> Letter Date: