



Enoggera State School

Expression of Interest / Waiting List

Student:	Surname:	
	Given Name:	
	Date of Birth:	
	Gender:	
	Intended Year Level:	
	Year of commencement:	
Previous Schooling:	Pre-Prep/Kindy Name:	
	Childcare/Other Name:	
Parent/Guardian 1:	Surname:	
	Given Name:	
	Mobile:	
	Home Phone:	
	Email:	
Parent/Guardian 2:	Surname:	
	Given Name:	
	Mobile:	
	Home Phone:	
	Email:	
Residential Address:	No. and Street:	
	Suburb and Post Code	
This student has/had siblings at Enoggera SS		<input type="checkbox"/> Yes <input type="checkbox"/> No Name and class:
Why do you want an out-of-catchment enrolment at Enoggera State School?		
Signature: _____ Date: _____	<i>For office use only</i>	
	Time: _____	
	Date: _____	
	Catchment	A
	Sibling	S
	Out of catchment	B

Please return this form to the school office, or via email to admin@enoggerass.eq.edu.au