



warrandyte high school

Alexander Road, cnr Warrandyte Road, Warrandyte, 3113

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APPLICATION FOR ENROLMENT – YEAR 7, 8 & 9

Thank you for expressing an interest in enrolling at Warrandyte High School.
Please complete the below information and return it to the General Office via email on whs@warrandytehigh.vic.edu.au or fax on 9844 1813 or via post at the above address.

Student's Surname:	
Student's Given Names:	
Victorian Student Number (VSN):	
Home Address:	
Postcode:	D.O.B:
Is the student an Australian citizen (please circle): Yes No (if no, please attach a copy of passport and visa)	
Enrolment in (please circle): Year 7 Year 8 Year 9	
Any diagnosed disability (please state):	
Name(s) of Parent/Guardian:	
Parent/Guardian Contact Number:	
Parent/Guardian Email Address:	
School currently attended:	
Reason for leaving current School:	
Year Level in school currently attending:	Calendar year for enrolment:
Contact name and phone number of person at current school:	
Language other than English previously studied:	
Number of years studied:	

Reasons for requesting enrolment at Warrandyte High School (attach further pages if required)

Parent/Guardian's Signature _____

Date: _____

Please attach a copy of the latest school report and any other supporting material you feel is appropriate

The return of this application form to the school will ensure that your application will be considered when enrolments are being decided.