

EXPRESSION OF INTEREST - YEAR 7 2025 STUDENT ENROLMENT OUT OF CATCHMENT

Overview

Students residing in catchment have the right to enrol and receive preference. Documentary evidence is required as proof of residence in catchment beyond the intended date of attendance commencing. In catchment students may also wish to apply for Programs of Excellence offered by the school. Students are selected for these programs on a merit basis and must meet selection criteria of the program.

Interview Upon receipt of list. Students an Application fee Following an invof-Catchment. Tenrolment decis	your Expression of Internal diparents may then be ritation to attend an internal file guarantees an intersions. Student applicant a waiting list for 12 m	erest your student w invited to attend an erview an application erview but not auto ats unable to be place	n interview in Term on fee of \$100 will b matic enrolment. ced in their year o	n 2. De charged The Princ f enrolme	d for students ipal is wholly ent for which	s applying f y responsik	rom Out- ole for all
Name of Stud		пете аррисации		Male 🗆	Female		
Date of Birth:	/ /	Current	Current School:				
Parent/Care	er 1 Details (child ı	resides with)	Parent/Care	r 2 Deta	ils		
Name:		,	Name				
Address:			Address:				
Contact No:			Contact No:				
Email:			Email:				
	Parent/Carer 1" is who s parent/carer will rece		·	pal place	of residence.	. Until the	child has
Please select o	ne or more of the re	levant boxes which	relates to your	child's ap	plication.		
SIBLING Yes	□ No □						
Please provide	details of all resident	ial siblings current	ly enrolled at Cav	endish R	oad State H	igh Schoo	l .
Sibling Name		Year Level			ne student e emy? If yes,		_

Programs of Excellence (Please indicate and attach relevant forms/s if applicable) https://cavendishroadshs.eq.edu.au/curriculum/excellence-programs						
☐ Academy of Ideas (Including the Academic Explorers Program extra-curricular opportunities)						
☐ Instrumental Music Excellence Academy						
□ Football Academy						
☐ Touch Football Academy						
□ Netball						
Additional Support Does your student receive additional support services at primary so disability. Please check the box below and provide details:						
□ Verified Disability:						
□ EALD:						
Parent/Carer Name:						
Parent/Carer Signature:	Date: / /					
To submit your application please ensure you have attach	ned the following documents:					
(Scanned PDF documents preferred) ☐ Copy of student's Year 5 Semester 1 report						
Copy of student's Year 5 Semester 2 report (when issued)						
Year 5 Naplan Report						
Program of Excellence application form (if applicable)						
Return your application to : enrolments@cavendishroadshs.eq.edu.au or Cavendish Road State High School, PO Box 156, Holland Park Q 4121.						
Please ensure that ALL documentation is attached as incomplete applications will not be processed .						
Office use only - Date Received: Tir	me:					