



Glass House Mountains State School

APPLICATION FOR STUDENT ENROLMENT REQUIREMENTS

Please note: All required documents must be submitted **BEFORE** the enrolment process can proceed.

STUDENT NAME: _____ YEAR LEVEL: _____

In Catchment
 Out of Catchment
 Sibling
 Returning Student

To check if your home address is within our catchment area, please visit

<https://www.qgso.qld.gov.au/maps/edmap/>

Catchment	Non-Catchment
<p><input type="checkbox"/> The student's principal place of residence is within the catchment area</p> <p>Current proof of residency at the address indicated <u>must</u> be provided by way of one of each of the following:</p> <p>One primary source – a current rental/lease agreement, or rates notice, or unconditional contract of sale</p> <p style="text-align: center;">AND</p> <p>One secondary source – a utility bill (e.g. electricity, gas) showing this same address and parent's/legal guardian's name.</p> <p><i>Applicants should note that a false statement/assertion about the student's principal place of residence may amount to an offence and may be reported to police. The school Principal may repeal a decision to enrol a student in such circumstances.</i></p>	<p><input type="checkbox"/> Sibling of a student at time of intended enrolment</p> <p><input type="checkbox"/> Parent/Carer employed at Glass House Mountains State School</p> <p><input type="checkbox"/> Students verified with a disability wanting to attend the specific disability program if it is the closest program to their home and meets their individualized needs.</p> <p><input type="checkbox"/> Children and young people who are subject to child protection orders that grant guardianship or custody to the Chief Executive Officer of the Department of Child Safety.</p> <p><input type="checkbox"/> Students excluded from a school IF APPROVED by the Regional Director</p> <p><input type="checkbox"/> Any remaining students residing outside the catchment area. Please attach a detailed, written statement for consideration.</p>

I understand that supplying false or incorrect information on this form may lead to the reversal of a decision to approve enrolment. I believe that the information I have supplied on this form is true and correct in every particular, to the best of my knowledge.

Parent/Carer Signature: _____ Date: _____

Note that your application will not proceed until we have received all required supporting documents.

Address: PO Box 13, 58 Coonowrin Road, Glass House Mountains, Queensland 4518

Phone: (07) 5439 3222 **Email:** admin@glasshousemountainsss.eq.edu.au

Principal: Ian Persini **Deputy Principal:** Adam Vlieg

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Glass House Mountains State School

ENROLMENT CHECKLIST – FOR PARENTS

(To be submitted with Application for Student Enrolment)

<input type="checkbox"/> New Enrolment <input type="checkbox"/> Re-Enrolment	Parent Checklist √	Office Use Only √
APPLICATION FOR STUDENT ENROLMENT <ul style="list-style-type: none"> all sections must be completed and signed 		
PROOF OF RESIDENCY in the Glass House Mountains State School catchment. <ul style="list-style-type: none"> Either lease agreement, rates notice or unconditional sale agreement and utility bill (gas/electricity) showing the same address and parent name 		
STATE SCHOOL CONSENT FORM <ul style="list-style-type: none"> all sections must be completed and signed 		
FINANCIAL COMMITMENT FORM – completed and signed <ul style="list-style-type: none"> Student Resource Scheme – Participation Agreement 		
RELEVANT LEGAL DOCUMENTATION <ul style="list-style-type: none"> eg: Custody, Foster Care (Only verified copies of court orders are acceptable) 		
THIRD PARTY WEBSITE PERMISSION <ul style="list-style-type: none"> completed and signed 		
BIRTH CERTIFICATE <ul style="list-style-type: none"> please provide original, we will sight and return 		
MEDICATION AUTHORITY FORM <ul style="list-style-type: none"> if child requires medication to be administered at school 		

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