



## ENROLMENT APPLICATION International Student

### 1. STUDENT INFORMATION

|  |   |           |
|--|---|-----------|
| Surname  | Given Name/s  |           |
| Preferred Name                                     | Date of Birth   |           |
| Nationality  | Country of Birth                                      |           |
| First Language                                     | Other Language(s) spoken                              |           |
| Language spoken at home                            | Passport Number                                       |           |
| Passport Expiry Date                               | Do you hold a current Australian Visa? [ ] Yes [ ] No |           |
| Visa Type and Subclass                             | Visa Expiry Date                                      |           |
| Country of Citizenship (as shown on your Passport) |   |           |
| Student's Residential Address (Home Country)       |   |           |
|  | Country   | Post Code |
| Student's Postal Address (if different from above) |   |           |
|  | Country   | Post Code |

### 2. ENROLMENT INFORMATION

|   |                           |      |
|---|---------------------------|------|
| Application Date  | Expected Entry Year Level |      |
| Proposed Commencement Date  | Year                      | Term |
| Current School  |                           |      |
| Who will the student live with? [ ] Both Parents [ ] Father [ ] Mother [ ] Boarding [ ] Other<br>If Other, please provide details including addresses (if applicable) |                           |      |
| Does the student have any special needs? (medical, physical or cultural conditions requiring special attention)   |                           |      |

### 3. FAMILY DETAILS

| <b>Father / Stepfather / Legal Guardian</b> (please circle)  |         | <b>Mother / Stepmother / Legal Guardian</b> (please circle)  |         |
|--|---------|--|---------|
| Title  | Surname | Title  | Surname |
| Given Name/s   |         | Given Name/s   |         |
| Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> De Facto<br><input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed |         | Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> De Facto<br><input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed |         |
| First Language   |         | First Language   |         |
| Language spoken at home  |         | Language spoken at home  |         |
| Home Ph  | Fax     | Home Ph  | Fax     |
| Business Ph  | Fax     | Business Ph  | Fax     |
| Mobile   |         | Mobile   |         |
| Email  |         | Email  |         |
| Postal Address   |         | Postal Address   |         |
| Country  |         | Country  |         |
| Post Code  |         | Post Code  |         |
| Residential Address  |         | Residential Address  |         |
| Employer / Business Name   |         | Employer / Business Name   |         |
| Occupation   |         | Occupation   |         |
| Business Address   |         | Business Address   |         |
| Emergency Contact  |         | Emergency Contact  |         |
| Emergency Telephone  |         | Emergency Telephone  |         |
| Is there another parent whose details should be recorded? <input type="checkbox"/> Yes (complete below) <input type="checkbox"/> No  |         |  |         |
| Title  | Surname |  |         |
| Given Name/s   |         | Relationship to Student  |         |
| Postal Address   |         |  |         |
| Country  |         | Post Code  |         |
| What School correspondence should this person receive? <input type="checkbox"/> General <input type="checkbox"/> Reports <input type="checkbox"/> Accounts   |         |  |         |

#### 4. SCHOOL FEES

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Name of person(s) responsible for payment of School Fees

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Account Address

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Country

Post Code

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Account Name: Rockhampton Girls Grammar School

BSB: 084-901

Account Number: 172-384-282

Swift/BIC Code: NATAAU3303M

Bank Address: 33 King Street, MELBOURNE

Reference: Student Name

#### 5. HOW DID YOU HEAR ABOUT ROCKHAMPTON GIRLS GRAMMAR SCHOOL?

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Internet / Magazine / Newspaper

Friend or Relative

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Exhibition / Seminar

Other (please specify)

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#### 6. ADDITIONAL REQUIREMENTS

- International Enrolment Application Fee AU\$55 (non-refundable)
- Copies of Student Report Cards from the last three years of study, including a copy of the latest Student Report Card (all required in English)
- Completed Reference from the student's current or most recent School Principal if Student Report Cards do not record student behaviour or commitment to studies (required in English)
- Written evidence of proficiency in English as a second language
- Completed Subject Choices form if appropriate (Years 9 to 12)
- Certified copy of Passport (name, photo identification, passport number and expiry date)
- Certified copy of Birth Certificate
- Certified copy of Student Visa (if applicable)

#### 7. DECLARATION

I declare to the best of my knowledge the information supplied in this form, as well as supporting documentation provided is correct and complete. I recognise that it is my responsibility to provide all necessary documentary evidence of the student's studies and medical history and hereby authorise Rockhampton Girls Grammar School to obtain further information where necessary. I understand that Rockhampton Girls Grammar School reserves the right to terminate the student's enrolment prior to or after commencement of the course where false or misleading information has been provided.

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Parent/Guardian Name

Signature

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Parent/Guardian Name

Signature

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Student Name

Signature

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