

**STUDENT ENROLMENT FORM 2020\***

NAME OF THE COMMUNITY LANGUAGE SCHOOL: **North Shore Polish Saturday School**

IBNID: 5 \_\_\_\_\_ 435 \_\_\_\_\_

**NOTE: The student name on this form must be the same as the name she/he is enrolled at the mainstream school.**

STUDENT DETAILS & CONTACT	
First Name: ..... Second Name: ..... Family Name: ..... Preferred Name: ..... Phone number: ..... Gender:    M                    F Date of Birth:                    DD / MM / YYYY	Allocated class level at the NSPSS: <div style="border: 1px solid black; height: 40px; width: 100%;"></div> e.g. Pre-school, Kindergarten, Year 1, Year 2, Year 3, Year 4...
<b>Residential Address</b> No/ Street name: ..... Suburb: ..... Postcode:    NSW .....	Mainstream school name and street address: ..... Suburb: ..... Class at mainstream school:
Anaphylaxis allergies and medications: ..... Medical Conditions /Special Needs: ..... Learning Difficulties: .....	Sibling(s) also attending NSPSS: ..... ..... ..... ..... Family GP name and phone number: .....

**\*/ Pre-School to Year K - 6**

When filling in this form, **please** print clearly in English using only **CAPITAL LETTERS**. Enter your child **Family Name** and **Given Name as it appears on formal documents in the mainstream school**. **Preferred Name/ Nickname**, is optional and is not going to be used in formal papers. Please provide full name and address of the mainstream school your child is attending in current year. **When completed, save this form adding your child name and date ( student\_enrolment\_form\_NSPSS\_Child Name\_YYYY ) and print to sign on page two (2).**



## STUDENT ENROLMENT FORM 2020\*

### FATHER'S/ GUARDIAN'S DETAILS

Family Name: .....

Given Name: .....

Relationship to Student: .....

Occupation: .....

Mobile phone:

### MOTHER'S/ GUARDIAN'S DETAILS

Family Name: .....

Given Name: .....

Relationship to Student: .....

Occupation: .....

Mobile phone:

Email: .....

Email: .....

Emergency phone numbers: .....  
*Other than Parent's contact number*

Emergency phone numbers: .....  
*Other than Parent's contact number*

### Father/Guardian signature:

.....

Date: DD / MM / YYYY

### Mother/Guardian signature:

.....

Date: DD / MM / YYYY

