Bonnyrigg Public School

A community school providing quality education in a caring environment

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Application for non-local enrolment

Student information

Family Name:	_ Date of birth:
Given Name:	Gender: M / F
Address:	
Suburb:	
Postcode:	
Home Phone:	Work phone:
Parent/carer name:	
Relationship to student:	
Current school:	
Current scholastic year (K-6):	

Non-local school placement request

Proposed scholastic year (K-6): _____ Proposed date for enrolment: _____

Please provide reasons for your application for non-local enrolment, based on the school's selection criteria and attach supporting documentation. The criteria are listed according to priority given to each. You may attach a separate sheet. Tick each box that applies:

- Siblings already enrolled at school
- Student medical reasons and access to medical services (certified by a physician)
- Safety and supervision of the student before and after school
- Proximity and access to school

Signature of parent/carer:	Date:
School use only	
Date received:	Parents advised on:
Designated local school:	