

Reception registration of interest form

Complete this form to register your interest in enrolling a child in a South Australia government primary school. Once completed, submit the form via email or in person to the school. Contact the school if you need help to fill out this form.

You can register your interest to more than 1 school by completing this form for each school you are applying to. Priority enrolment is given to children who live in a school's local/zoned area, and priority groups, including Aboriginal children and children in care. You can check the child's local school at www.education.sa.gov.au/findaschool. Note: for children living in wider metropolitan and regional areas the local school may not necessarily be the nearest school, but the school serviced by a department school bus. If you are unsure contact the school.

Submission of this form **is not** a guarantee of enrolment. The school will be in contact before the child's expected school starting date. If a place is available, you will be given an enrolment offer and an enrolment form to complete. For more information on enrolling in school click here: www.education.sa.gov.au/enrolment.

Section 1: School details	
This is a registration of interest form for enrolment at:	
I am seeking to start reception in the following intake (tick 1):	Term 1 Term 3 Calendar Year: YYYYY
Section 2: Child's details	
Last name:	Date of Birth:
First name/s:	Gender:
Home address*: Suburb: * This should be the primary residential address where the child lives most of the child lives most o	Time living at this address? Years Months Postcode:
Is the postal address, the same as the above home address?	Yes No No
If no, specify postal address:	
 Does the child identify as Aboriginal and/or Torres Strait Islander? Is the child in care where there is a custody or guardianship order in Children and Young People (Safety) Act 2017 (SA)? Does the child have a parent/guardian who is a current serving men Section 3: Details of parent/guardian registering interest	Yes No No
Full Name:	Relationship to child:
Contact phone:	Email:
Section 4: School preferences Is this school (named in section 1), the child's local (zoned) school? Do you wish for this child to attend this school, as your first preference? If this school is not your first preference, please list any other schools (included School 1:	Yes No Yes No Holing this school) you are registering interest for, in nominated order:
School 2:	
School 3:	

Section 5: Information that may support the child's registration of interest

Complete this section, if this is a preferred non-local (out-of-zone) school, you live within a shared zone, or this school has a current capacity management plan www.education.sa.gov.au/cmp.

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