

Tuntable Falls Community School

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Expression of interest / Waiting list application (One form per child)

Return this form either by email or in person to receive further contact about new enrolments. Child's full name Date of birth Gender Home address Child is currently in (Please circle) Preschool, Kindy, Yr1, Yr2, Yr3, Yr5, Yr6 Desired start date Parent/Guardian 1 Name Phone Email Parent/Guardian 2 Name Phone **Email** Do you give permission for TFCS to contact your child's current school? Yes No School Name Classroom Teacher To assist us in meeting our priority of access guidelines, it is necessary for us to know if your child falls into any of the categories below. Please tick all that apply to your child. Low-income family (Health Care Card) Culturally/Linguistically diverse background Aboriginal and Torre Strait Islander With a disability or special needs Are there any special circumstances regarding your child's enrolment?

Date: ____/___

Signature: _____