



EXPRESSION OF INTEREST ENROLMENT

Thank you for your interest in applying for enrolment into Armadale Senior High School.

We rapidly accept new enrolments, and are excited to welcome yourself and your child into the school community. Please complete the expression of interest form and return it to the School's Administration Team. A copy of the enrolment pack will be sent to you for completion.

Expression of Interest Form			
Student Name			
Date of Birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Indeterminate/Intersex
Residential Address	Street		
	Suburb		Postcode
Current School or Home Education Region		Current Year Level	
Reason for School Movement			
Name of Parent/Guardian			
Parent/Guardian Contact Number			
Parent/Guardian Email Address			
Does the student have any siblings at Armadale Senior High School?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
	Sibling's Name		Year Level
Specialist Programs	Do you wish to receive information in relation to the Specialist Arts/IT program offered at the school? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Do you wish to receive information in relation to the Academic Extension program offered at the school? <input type="checkbox"/> Yes <input type="checkbox"/> No		
School Use Only	Entered into spreadsheet? <input type="checkbox"/> Yes		
Year Level: _____	Date Enrolment Package Sent: _____	Sent By: _____	

***PLEASE COMPLETE AND RETURN THIS FORM TO SCHOOL ADMINISTRATION**

via email: Armadale.SHS@education.wa.edu.au

in person: 169 South Western Highway
ARMADALE WA 6112

in the mail: PO Box 189
ARMADALE WA 6992