Deanwell s c H o o L



Expression of Interest Form

Child's Name:				
Child's Date of Birth:		Male or Female		
Parent's Name:				
Address:				
(Proof of address req	<mark>uired)</mark>			
Phone:	Ema	il:		
Please circle the	e enrolment period yo	ou wish your child to st	art school (inclusive of	f transition visits)
2024 Term 1	2024 Term 2	2024 Term 3	2024 Term 4	2025 Term 1
30 Jan to 11 Apr	29 April to 4 July	22 July to 26 Sep	14 Oct to TBC	ТВС
Priority 1 – Siblings Priority 2 – Siblings Priority 3 – Children Priority 4 – Children	of current students (please of former students (please of former students (please of Board Employees (please of Board Members (please nce at Deanwell Kindergar	ducation. Please tick which se name student/s): e name student/s): ase name student/s): se name student/s): rten, Deanwell Playcentre, B		
Signed:		Date:		
		pallot your form must arrive	e at Deanwell School before	the relevant application
closing date (see 2024/	25 Enrolment Scheme ball	lot dates).		

IMPORTANT NOTE FOR NEW ENTRANTS:

Deanwell School has an in depth 'transition to school' program, this starts 3 weeks prior to your child turning 5. To ensure your child completes the full transition program, we recommend you **ballot the term prior to them turning 5.** For example if your child turns 5 in Term 4, we suggest you ballot for term 3. This allows your child to complete their transition program. If you have any queries regarding this please contact the school on (07) 843 7069.