

Yugumbir State School

Enrolment Registration



Date: _____ Preferred Start Date: _____ Year Level: _____

STUDENT'S FULL LEGAL NAME: _____

STUDENT'S PREFERRED NAME: _____

DATE OF BIRTH: _____ GENDER: FEMALE MALE

Address:

In Catchment

Out of Catchment

Is the student of Aboriginal or Torres Strait Islander origin?

No Aboriginal Torres Strait Islander Both Aboriginal & Torres Strait Islander

PARENT/ CARER CONTACT DETAILS:

Parent / Carer (1) Name: _____

Parent/ Carer Mobile: _____ Relationship: _____

Parent/ Carer Email: _____

Parent / Carer (2) Name: _____

Parent/ Carer Mobile: _____ Relationship: _____

Parent/ Carer Email: _____

Are there any current Court Orders in place:

Out of Home Care

Family Court Orders

Other Court Orders

Siblings: Please list siblings:

Name	Year level at YSS	Age if not attending YSS

List Other Family at YSS: (cousins, step siblings, etc)

Previous School: _____

Reason for transfer:

Does Parent / Carer speak a language other than English at home? Yes No

If yes, what language is spoken at home? _____

Does the Parent / Carer require an interpreter for the interview? Yes No

Please turn page over to complete & sign

Has your child seen a Paediatrician? No Yes awaiting appointment

Details: _____

Does your child have a diagnosed or suspected disability?

No Yes awaiting appointment

Vision impairment	Yes / No	Physical disability	Yes / No
Deaf or hearing impaired	Yes / No	Autism spectrum disorder	Yes / No
Intellectual disabilities	Yes / No	Other	Yes / No

Will your child require specialist support at school? No Yes

Does your child require medication to be administered at school? No Yes

Does your child have a NDIS package? No Yes awaiting appointment

Has your child been supported by external agencies?

Dentist No Yes

Speech Language Pathology No Yes: at what age _____

Details:

Occupational Therapy No Yes: at what age _____

Activities to support recuperation from physical or mental illness

Details:

Physiotherapy No Yes: at what age _____

Details:

Psychologist No Yes: at what age _____

Details:

Have you accessed a family support service? No Yes awaiting appointment
(i.e. FACC - Family and Child Connect, Benevolent Society, FSS- Family Support Services, etc)

Has your child been receiving additional support at their current school?

Academic Social/emotional Behaviour

To support a successful transition for your child, is there any other additional information you would like to share with us?

Signature of Parent/Carer: _____

Completed and signed forms can be emailed to: enrolments@yugumbirss.eq.edu.au