

Applying for: Year Level	
20	

Pre Enrolment Form – Sydenham Junior Campus

Ph: 9361 3888

DATE OF REQUEST:					
Full name of student					
Date of Birth: / / Geno	ler: Mal	e Female	Student VET	USI No:	
Current home address of student					
Will the above address be the same if a	ttending	our College?	Yes	No	
If no, please give details					
Parent/Guardian name					
Contact details	Home:_		B	us:	
	Mob:				
	Email:				
Current School If outside Victoria please give contact p number	hone				
Current Year Level					
Year Level Coordinator's name					
Current siblings at Copperfield College					

Students on Visas		
Visa Class:	Date of arrival:	Country of origin:
010 Bridging (Class A) 020 Bridging (Class B) 030 Bridging (Class C) 040 Bridging (Prospective Applicant) D 041 Bridging (Non-Applicant) D 042 Bridging (Class A) 050 Bridging (General) E 051 Bridging (Protection Visa Applicant) 060 Bridging Visa F 070 Bridging Visa R (Removal Pending) IF VISA IS ONE OF THE ABOVE PLEASE PROVIDE EVIDENCE OF PREVIOUS VISA & CURRENT VISA.		
In which language were classes taught prior to arrival in Australia?		

Reason/s for enrolment Please detail		
Has the student ever repeated any Year levels or had more than 4 weeks out of regular schooling? If yes, please give details	Yes	No
Is the applicant participating in any special program at the current school? E.g. extra literacy/numeracy support? If yes, please give details	Yes	No
Are there any agencies we would need to contact to support your child in his/her learning? If yes, please list.	Yes	No



Reference by Current School – Sydenham Campus

Instructions – Parents should take this form to the current school for feedback. The school will complete the form and fax or email it to Copperfield College at their earliest convenience.

Sydenham fax: 03 9361 3899 or email: copperfield.co@education.vic.gov.au

The student listed below has applied to attend our college. In the best interests of all, we are requesting some information, which will assist us meeting the student's needs. Thank you for your time and effort.

STUDENT NAME:	
CURRENT SCHOOL:	
CURRENT YEAR:	

To be completed by the Assistant Principal, Year Level Coordinator (or equivalent) and / or Student Wellbeing Coordinator

In supporting the student both academically, physically and emotionally please outline any areas of concern, if appropriate that you feel the staff of Copperfield College should be made aware of so as to maximise the student's growth.

General Skills	Needs Attention	Acceptable	Very Good	Excellent
Effort				
Class behaviour				
Organisation				
Attendance				
Punctual to school				
Punctual to class				
Participates in classroom activities				
Adheres to full school uniform policy				

DATE	REASON				No	o. OF DAYS
las tha st	udant baan linkad ta au	tsida aganaias far	support? Di	aasa add datails		
the st	udent been linked to out	uside agencies for	support: Pi	ease add details.		
s the stud	lent PSD funded?	Yes	No	Level of funding		
	udent been involved in a ase elaborate	any school based i	ntervention	or support program?		
f yes, plea			ntervention	or support program?		
f yes, plea	ase elaborate		ntervention	or support program?		
f yes, plea	ase elaborate					
f yes, plea	I comments if required:					
Additiona NAME:	I comments if required:			SIGNATURE:		

Is the student presently making academic progress?

Please circle YES

NO