



**Grayling
Primary
School**

2022 Grayling Primary Intent to Enrol

Date: _____

Child's Name: _____

Year level: _____ **Male/Female** (please circle) **Date of Birth:** ___/___/___

Siblings at Grayling: Name: _____

Parent's Name(s): _____

Address: _____

Mobile: _____ **Mobile:** _____

Main Contact Name & Number: _____

Email Address: _____

Current School: _____

Have you notified previous School your intention to enrol at Grayling Primary School: Yes/No

Do you have a Health Care Card? Yes/No

Did you apply for CSEF at your previous school? Yes/No

Does your child have any special requirements i.e. disabilities, medical conditions, custody restriction, that our school may need to be aware of?

Office Use Only:

Address in Zone: Y/N

Fees On: Y/N

Enrolment pack given: Y/N

Headphones Given: Y/N

Enrolment pack returned: ___/___/___

CSEF Form or/and Transfer: Y/N

Enrolment date: ___/___/___

Upload Report to Compass: Y/N

Stationery Pack Given: Y/N

Compass Login Letter - Parents: Y/N

Cases Transfer Complete: Y/N

Literacy Planet: Y/N

Essential Assessment: Y/N

Wushka: Y/N