



**MACLEOD COLLEGE**

A STATE P~12 SCHOOL

# Enrolment Enquiry Form PREP

<b>Surname:</b>		<b>Date:</b>	
<b>First Name:</b>			
<b>Sex:</b>	<input type="checkbox"/> Male <input type="checkbox"/> Intersex	<input type="checkbox"/> Female <input type="checkbox"/> Chose not to disclose	<b>Date of Birth:</b>
<b>When do you wish to start?</b> ____ / ____ / ____			<b>Year Level:</b>
<b>Home Address:</b>			
	<b>Suburb:</b>	<b>Post Code:</b>	
<b>Is Macleod College your Designated Neighbourhood School?</b> <small>*Refer to the Find My School website at <a href="http://www.findmyschool.vic.gov.au">www.findmyschool.vic.gov.au</a> to locate your Designated Neighbourhood School</small>			<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>PARENT/GUARDIAN A</b>	
<b>Name:</b>	
<b>Contact Number:</b>	
<b>Email address:</b>	

<b>PARENT/GUARDIAN B</b>	
<b>Name:</b>	
<b>Contact Number:</b>	
<b>Email address:</b>	

<b>Any siblings that currently attend Macleod College?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No Name: _____
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<b>Reason for seeking enrolment at Macleod College:</b>	
<b>Where did you hear about Macleod?</b> <i>(eg newspaper, friend, website, school, Macleod students)</i>	
<b>Curriculum Strengths:</b>	
<b>Curriculum Needs:</b>	
<b>Music Involvement:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, provide details of instrument/s studied and level of study)</i>	
<b>Additional Information:</b>	
<b>Parent/Guardian Signature:</b>	

*\*Please note this is an Enrolment Enquiry only, when all the documentation is received our Assistant Principal or Admin Team will contact you. If your application is approved, you will then need to attend a meeting with the Assistant Principal and complete official Enrolment forms.*

*If you have any questions or require further information, please contact:*  
Macleod College    Phone: 9459 0222  
Email: [macleod.co@edumail.vic.gov.au](mailto:macleod.co@edumail.vic.gov.au)    Website: [www.macleod.vic.edu.au](http://www.macleod.vic.edu.au)