EXPRESSION OF INTEREST TO ENROL IN YEARS 7 - 12

Name of Student:	
D.O.B:	
Gender:	
Parent / Caregiver:	·
Contact Number:	
Address:	
Email Address:	
Current School:	
Current Year Level:	
Number of schools attended s	since Reception:
Reasons for leaving current s	chool:
Reasons for wanting to enrol	at Springbank Secondary College:

It is Department for Education practice for a Leader from this school to make contact with your current school of enrolment to discuss the potential transfer.





Springbank Secondary College



Student Statement (to be completed by the **student**) *Please attach another page if more space is required*



 Reflect on your attitude towards learning and your performance What are your favourite subjects? 	
What are your strengths and weaknesses in learning environment	ents?
. What are your interests and hobbies?	
Share any activities you participate in (both in and out of school	
extracurricular classes, sporting groups, clubs, participation in s	
competitions, SRC, environment groups, leadership roles and s	o iorin.
. Tell us about how you get along with other people (including stu staff at your current school):	idents and
School Leader will consider your <i>Expression of Interest</i> . If your o	hild can be
dmitted, you will be invited to attend an enrolment meeting.	ania can be
signing this form I confirm that I have attached two recent scho	ol reports

Signature: ₋			
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Springbank Secondary College
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