



## STUDENT INFORMATION 2017

The following information is requested to assist in finalising student enrolments, planning of class and staff allocation for 2017.

NAME	CAMPUS	CURRENT YEAR LEVEL

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## RE-ENROLMENT INFORMATION 2017

(a) My child/children **WILL BE** returning to Samaritan College.

(b) My child/children **WILL NOT BE** returning to Samaritan College.

(c) My child's/children's return to Samaritan College is **DOUBTFUL**.

*Please summarise reason for doubt or non-return (and destination school) on an attached note, or email [info@samaritan.catholic.edu.au](mailto:info@samaritan.catholic.edu.au)*

☞ We will inform the College of our 2017 intentions by \_\_\_\_\_ (date)

**Please note: Financial assistance is available to any family experiencing financial difficulties; please contact the College to discuss options. All discussions are strictly confidential.**

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Please complete details of any siblings who will be enrolling at Samaritan College in the future.  
 {These can include pre - reception or pre - Year 7 or 8 students}

Child's name	Date of Birth	Current School (if applicable)

**PLEASE COMPLETE ONE FORM PER FAMILY & RETURN BY FRIDAY, SEPTEMBER 30**

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

MOBILE PH: \_\_\_\_\_