Home Hill State High School

Acting Principal: Mr Deon Stripp

Deputy Principal: Mrs Kym Ogomeni

Business Manager: Mrs Sandra Doyle

INTENTION TO ENROL FORM

Thank you for choosing to enrol your child at Home Hill State High School. Please complete the details below and return this form to our Office or email to [admin@homehillshs.eq.edu.au](mailto:admin@homehillshs.eq.edu.au) . A birth certificate will need to be sighted prior to enrolment if it has not been previously sighted by your students’ current school. Once we have received your Intention to Enrol form you will then be given further enrolment paperwork based on existing information entered into Education Queensland’s system.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Legal family name\*  (as per birth certificate) | |  | | | | | |
| Legal given names\*  (as per birth certificate) | |  | | | | | |
| Preferred Student Family Name | |  | | | | | |
| Preferred Student Given Names | |  | | | | | |
| Date of Birth | \_\_\_\_ / \_\_\_\_ / \_\_\_\_ | Gender ✓ | Male |  | | Female |  |
| School (Current) | |  | | | | | |
| What year level is the student seeking to  enrol in 2024? | |  | | | | | |
| Intended start date  (Note: first day in 2024 is January 22nd ,2024) | |  | | | | | |
| Enrolling parent name | |  | | | | | |
| Enrolling parent address | |  | | | | | |
| Enrolling parent telephone number | |  | | | | | |
| Enrolling parent email address | |  | | | | | |
| Enrolling parent signature | |  | | | Date: | | |

\*\*\*\* PLEASE PRESENT CHILD’S BIRTH CERTIFICATE FOR CONFIRMATION\*\*\*\*

LEARNING – PERFORMANCE – CITIZENSHIP

First Street, Home Hill, Qld. 4806 Telephone: (07) 4790 5666 Fax: (07) 4790 5600 email: [the.principal@homehillshs.eq.edu.au](mailto:the.principal@homehillshs.eq.edu.au)