



St Mary's Primary School

45 – 49 King Edward Street (P.O. Box 251)

Cohuna 3568

Tel: 03 5456 2062

E-mail :principal@smcohuna.catholic.edu.au

APPLICATION FOR ENROLMENT

OFFICE USE ONLY

Name of Child:

Learner Code:

Surname:

Year: Class:

Family Information

Family Name

Do you already have children attending St Mary's? Yes/No

Address Suburb/City Postcode

Postal Address (if Different to above)

Language Spoken at home

Child Details

First Name Address Please tick if same as above

Middle Name 1st Australian School Year (eg: 2001):

Surname Previous School Year Level

Preferred Name Religion

Sex Male Female (please tick one) Nationality

Place of Birth Does the child speak a language(s) other than English at home?
Country of Birth Yes No If Yes Please List Below:

Date of Birth 1. 2.

Year Applied for eg: Kinder, Year 7 Student Type Fulltime PartTime

VSN: Position in family (eg 1,2,3)

Birth Certificate supplied Yes No Commencement Date

Parish/Sacramental Details

Please supply copies of certificates if applicable

Sacrament	Date	Church	Parish
Baptism			
Reconciliation			
Eucharist			
Confirmation			

Siblings

Please list the names and birth dates of younger siblings yet to commence school

Name Date of Birth / /

Name Date of Birth / /

Parent/Guardian

First Name Last Name

Relationship to child Residential Guardian Yes No

Address Please tick if same as learner

Email Address

Phone Mobile

