



John Paul College

PO Box 4552, Kalgoorlie Ph: (08) 9021 4377 Fax: (08) 9021 7221 Email: admin@jpc.wa.edu.au

APPLICATION FOR ENROLMENT

(To be returned to the College Secretary with copy of Birth Certificate, Baptism Certificate and Application Fee of \$30.00)

Calendar Year For Enrolment:

Academic Year For Enrolment:

STUDENT:

FULL NAME:
(Surname) (Christian Names)

ADDRESS:

POSTAL ADDRESS:

SEX: Male / Female DATE OF BIRTH:

RELIGION: Student: PARISH:

RELIGION: Father / Guardian: PARISH:.....

RELIGION: Mother / Guardian: PARISH:.....

PRESENT SCHOOL: ACADEMIC YEAR:

SIBLINGS: Brothers / Sisters of applicant presently attending John Paul College

NAME: Home Room: YEAR:

NAME: Home Room: YEAR:

NAME: Home Room: YEAR:

Brothers / Sisters of applicant who have attended John Paul College. Please indicate names and years.

NAME: YEAR:

NAME: YEAR:

NAME OF PARENT/GUARDIAN:

POSTAL ADDRESS:

POST CODE: PHONE NO: MOBILE NO.

EMAIL ADDRESS:

PARENT/GUARDIAN SIGNATURE:

DATE:

OFFICE USE ONLY	
APPLICATION FEE RECEIPT NO:	DATE:
BIRTH CERTIFICATE	<input type="checkbox"/>
BAPTISM CERTIFICATE	<input type="checkbox"/>