## Application to Enrol Students at another John Calvin School



I hereby request to enrol the following child(ren):			
Name:	DOB:	Year group:	
Currently enrolled at:			
Request to enrol at:			
New congregation (if applicable):			
Date of transfer:			
I have amended our personal details on the FRSA Website: (If no, please remember to do so as soon as possible)	Yes	No	
I hereby give permission for the previous school to provide any redocumented plans (academic, behavioural):	cords, Yes	No	
I understand this means all relevant enrolment details will be proprevious JCS will cease and will commence at the new school.	vided to the new John Calvin S	chool (JCS); your enrolment at the	
SIGNATURE:	Date:		
Name of Parent(s):			
Please hand in this form to the secretary of the new school.			
E USE ONLY:			
Received up to date immunisation records	Received relevant vis	Received relevant visa/citizenship documents	
Received up to date Medicare Card details	Received relevant he	Received relevant health records	
Received copy of child's birth certificate	Received Personal D	Received Personal Details Confirmation Form	
cipal to advise FRSA Administration and previous school	Date advised:		
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cipal Signature:	Date:		