



Cannon Hill State School

845 Wynnum Road,
Cannon Hill Qld 4170

Phone: (07) 3902 3333

Email: admin@cannonhillss.eq.edu.au

OUT OF CATCHMENT - EXPRESSION OF INTEREST FORM

One form per child

Child's Surname			
Child's First Names			
Child's Date of Birth	___/___/___	Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Name of childcare currently attending			Number of days per week currently attending -
Name of school currently attending			
Parent's Surname			
Parent's First Name			
Is your child in Foster or Kinship Care?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Carer's Surname			
Carer's First Name			
Current Address <small>(Please contact the office if your address or contact details change)</small>			
	Suburb	Postcode	
Phone No.	Mobile	Home	
Email			
Does your child have any additional needs? <small>(medical/mental health condition, physical disability, learning disability or English as second language.)</small>			
Comments			

I/We acknowledge that acceptance of this form by the school office does not guarantee enrolment in the future.

If you change your contact details, please notify the office as soon as possible. We will phone you if we are able to offer your child an enrolment.

Please submit your completed 'Expression of Interest Form' to the school office or email to admin@cannonhillss.eq.edu.au.

Thank you for submitting your 'Expression of Interest Form' to Cannon Hill State School.

FOR OFFICE USE ONLY	
Date received:	
Date offer made:	Offer accepted <input type="checkbox"/> Date:
	Offer declined <input type="checkbox"/> Date: