Please complete this form, together with the St Joseph's Waroona 'Application for Enrolment'.

		Academic Year	in 20
Student's full name:			
Address:			
Home Phone:	Mobile Phone):	
Emailaddress:			
Date of birth: (Attach photocopy of Birth Certificate	Age:	Gena	ler: M / F (<i>circle</i>)
School currently attending:	if applicable)	Year	level:
Are you Aboriginal: Yes / No (<i>circle</i>)			
Identify your Traditional Owner / Langu	age Group:		
Full name of parent/guardian:			
Address of parent/guardian:			
Home Phone:	Mobile Phone):	
Emailaddress:			
Is your parent/guardian Aboriginal or To	orres Strait Islander:	Yes / No (<i>circle</i>)	
Please identify their Traditional Owner	/ Language Group: _		
Full name of alternative contact:			
Address of alternative contact:			

ome Phone:	Mobile Phone:	
mail Idress:		
Tell us about your family		

4. Has anyone helped you fill in this form? If yes, what is their name?

5. Is there any further information you'd like to add ?

I understand that this application is for consideration to receive a Bursary for my child to attend St Joseph's Waroona. I understand that there will be an interview and agree that my child and I will be available to attend the interview as arranged. This application is an expression of interest; I understand that there are no guarantees of my child receiving a Bursary.

Signature of student (where applicable)

Signature of Parent / Guardian

Date

All applications to be submitted to: The Principal