



Application for Student Enrolment

(Complete one form per student. Please photocopy more if needed.)

Include a copy of each student's Birth Certificate or equivalent, eg. Birth Extract, Passport, displaying the student's date of birth.

Family Information

Parent(s)

Names

Is the family an existing ACC family?

Yes No

If yes, please provide your customer code

Student Information

Surname

Given Name

Preferred Name

Middle Name

Date of Birth

Male Female

Has the student made a profession of Faith?

Yes No

Does the student speak English as a second language?

Yes No

Student's address for correspondence

Address

Town

State

Postcode

Country

When will this student commence studying with ACC-I?

Term 1 Term 2 Term 3 Term 4 As soon as possible Other



Application for Student Enrolment (continued)

Enrolment Information

Grade last completed Year

Last School attended

School Address

Town State Postcode

Country

Evaluate progress in child's previous work

Excellent Good Average Poor As soon as possible Other

Reading level:

non-reader poor reader confident reader Poor As soon as possible Other

Other Information

Has your child been diagnosed as having health conditions? Yes No

Has your child been diagnosed as having learning difficulties? Yes No

[Australian Christian College - International](#)

Mobile: +61 488 178 383

Phone/Fax: +61 733762984

Email: International@acc.edu.au

Website: <http://international.acc.edu.au>