

Office Use Only:

## **APPLICATION FORM**

If wanting to apply for more than one sport, please number them in order of your preference of RAS sport (eg. 1, 2, 3).

PROGRAM APPLYING FOR:	TOUCH		BASKETBALL		VOLLEYBALL	N	ETBALL	
	-	l						
STUDENT NAME:						GENDER:		
PARENT'S NAME:	CONTACT PHONE NUMBER:							
ADDRESS:								
EMAIL:								
CURRENT SCHOOL:				CURRENT YEAR LEVEL:				
CURRENT PLAYING HISTORY:	Include representative history (Mt Gravatt, Met East, Met West, Qld, Club Level Representative)							
CURRENT PLAYING POSITION(S):								
PLAYING AMBITIONS:								
CLUB:						AGE GRO (UNDER):	JP	
PERSONAL QUALITIES:								
OTHER SPORTING ACHIEVEMENTS:								
By applying for a position into the Rochedale SHS Signature Program/s, I understand and commit fully to the program in Year 7 and 8 of my students schooling (if accepted into the program). Furthermore, I understand that should I withdraw from this program before the end of Year 8 a review of my students' enrolment at Rochedale SHS will occur.								
PARENT SIGNATURE				STUI	DENT SIGNATURE			
If you haven't boo	ked an Enrol	ment	Interview, please p	hone	Rochedale SHS o	office on (	(07) 3340 0	400
PLEASE RETURN FORM:					ce use only:			
		almont Anglication	Triale		Yes / No			
Please return this form with other Enrolment Application documents at your student Interview.				Date			oted	

Information regarding trials will be emailed to parents after Interviews have been held.

