

# Lakeland SHS Education Support Program

## Application To Enrol



LAKELAND  
SENIOR HIGH SCHOOL

ENROLMENT PROCESS CHECKLIST		Check
1.	Visit all the schools and education support facilities in your local area.	
2.	Check if you are in the catchment area for Lakeland SHS Education Support Program (Use Google Maps to see if this is your closest school. This will impact your ability to access school bus services).	
<b>HOW TO REQUEST AN APPROVAL TO ENROL</b>		
3.	Collect all the information regarding the diagnosis, therapy reports, doctor letters etc.	
4.	Add the latest IEP and school report.	
5.	Complete attached Application to Enrol.	
6.	The Deputy Principal and School Psychologist will make a decision regarding capacity in the year level and eligibility based on diagnosis.	
7.	You will receive notification by email regarding your eligibility and placement.	
<b>ENROLMENT</b>		
8.	Complete Lakeland SHS Enrolment pack	
<b>FOLLOWING ENROLMENT</b>		
9.	Lakeland SHS staff will liaise with the previous school. This may include observations at the current school.	
10.	Handover of any documented plans being used by the current school.	
11.	Transition meetings will occur between families, and Lakeland SHS. We encourage you to invite therapists along to these meetings.	
<b>TRANSITION</b>		
12.	Transition will occur for 5 consecutive weeks from 9:00am-10:30am. Further information will be supplied closer to the date. Parents will need to provide transport for students to and from Lakeland High School.	

AN INDEPENDENT PUBLIC SCHOOL

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Personal Details					
Child's surname					
Given names					
Date of birth (dd/mm/yy)		Gender	Male	Female	Not Specified
Parent Name					
Residential Address					
Telephone (Home)		Mobile Phone No.			
Email					
Year Level enrolling in		Name of school at which your child is currently enrolled			
Name of specialist program	EDUCATION SUPPORT				
<b>Disability Information</b> Please indicate all diagnosis					
<b>Please indicate if your child requires plans for any of the following:</b>					
Physical mobility	Toileting	Medical	Mealtime Management	Mental Health Care Plan	Behaviour Escalation plan
Other- please identify					
Is your child currently under suspension from a school?		Yes		No	
Is your child a temporary resident	Yes	No	Are there any Visa requirements	Yes	No
The information and statements provided in this application for enrolment are true and accurate					
Signed:		Date:			

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