



Expression of Interest (EOI) Year 7 – 2025

Empowering Learners. Empowering Futures.

There is a \$55.00 non-refundable processing fee for all Out of Catchment Expressions of Interest.
Out of Catchment EOI's will be pending until this fee is processed.

Year Level:	7	Year of Commencement:	2025
First Name:			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Surname:			
Date of Birth:		Current School:	

"Parent/Carer 1" must reside with the student. This is the student's principal place of residence.
During the application process this parent/carers will receive all correspondence.

Parent/Carer 1 Details (student resides with):				Parent/Carer 2 Details:			
Mr/Mrs/Ms/Miss/Dr				Mr/Mrs/Ms/Miss/Dr			
Name:				Name:			
Relationship to Student:				Relationship to Student:			
Address:				Address:			
Suburb:		Postcode:		Suburb:		Postcode:	
Phone/s:				Phone/s:			
Email:				Email:			

Details of all other school age residential siblings:				
Sibling Name:	1.	2.	3.	4.
Current School:				
Year Level:				

Within Local Catchment (processing fee not required) Check website www.qgso.qld.gov.au/maps/edmap/

One primary source – current lease agreement or current rates notice showing address and parent's/legal guardian's name.

One secondary source – a utility bill (electricity/gas) showing address and parent's/legal guardian's name.

General Entry – Out of Catchment Area (\$55.00 non-refundable processing fee)
EOI's will not be processed without payment of this fee

Receipt Number: _____ Date Paid: _____

Sibling of a current Wavell State High School student

Interest in a Program of Excellence

Academic Dance Drama

Music Netball Rugby League

OFFICE USE ONLY – Please do not write in this space.		Out of Catchment Processing Fee (\$55.00)	<input type="checkbox"/> OOC - PAID	<input type="checkbox"/> LCA - NOT APPLICABLE
EOI Status:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Waitlist	Executive Principal signature: _____	
Reason for Acceptance:	<input type="checkbox"/> LCA <input type="checkbox"/> Sibling	<input type="checkbox"/> P of Ex _____	Notification sent: _____	
Interview date:	_____	Time: _____	Enrolment Officer signature: _____	

