

Islamic College of Melbourne

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Expression of Interest for Year 1 to 12 2018

THIS IS NOT AN ENROLLMENT FORM

If you are interested in enrolling your child for Year 1 to Year 12 in 2018, please complete this form. All students enrolling for Prep in 2018 are to complete an enrollment form available on the college website or at the administration office. Completion of this form does not guarantee a position at the college. Should your child be shortlisted, the college will contact you and send you an enrolment form to complete.

PERSONAL DETAILS OF STUDENT	
Family Name:	Given Name:
Application for Year: 1 2 3 4 5 6 7 8 9 10 11	
Residential Address:	
Suburb:	Postcode:
Date of Birth:	Gender: Male / Female
Present School / Kindergarten: _____	
Year Level: _____	
How many years enrolled at present school: _____ (Please attach photocopy of the latest school report)	

PARENTAL/GUARDIAN INFORMATION	
FATHER/GUARDIAN	MOTHER/GUARDIAN
Family Name:	Family Name:
Given Name:	Given Name:
Address:	Address:
Suburb:	Suburb:
Postcode:	Postcode:
Home Phone:	Home Phone:
Mobile Phone:	Mobile Phone:

I require a school tour. Yes No (If yes, you will be advised of dates/times)

- 1) I understand and accept that completion of this form does not guarantee my child a position at the college.
- 2) I understand and accept that my child's acceptance into the Islamic College of Melbourne is dependent on the results of the Entrance Placement Test, behaviour observed during the test and school report provided.
- 3) I understand and accept that the college reserves the right to offer my child a position at the college, place my child on the waiting list or reject my child depending on the information collated from the results and observation, without bias.

Father/Guardians Full Name	Father/Guardians Signature	Date

Mother/Guardians Full Name	Mother/Guardians Signature	Date

For further information please contact the Islamic College of Melbourne on 03 8742 1739.

Please return this completed form to:

Administration Office
 Islamic College of Melbourne
 PO Box 8153
 TARNEIT VIC 3029

Alternatively, you can submit this form directly to the Administration Office.

Office Use Only

1) Does this child have siblings currently attending ICOM? Yes No

2) Comments:

Received by: _____ Date received: _____