



Change of Student Details Form

CHANGE/NEW STUDENT DETAILS

Student Surname:		Student Forename:	
Date of birth:		Registration Group:	
Address:			
Postcode:		Telephone number:	

CONTACT 1: to be contacted first in case of illness or emergency

Name:		Relationship to student:	
Telephone number:		Mobile number:	
Address:			
Place of work:		Work number:	

CONTACT 2: second point of contact in case of illness or emergency

Name:		Relationship to student:	
Telephone number:		Mobile number:	
Address:			
Place of work:		Work number:	

CONTACT 3: third point of contact in case of illness or emergency

Name:		Relationship to student:	
Telephone number:		Mobile number:	
Address:			
Place of work:		Work number:	

Our 5 Core Principles

- All students making good or better progress
- No underperforming cohorts
- All teachers to deliver good or better learning
- Every individual or group moves to the next level of successful performance
- Everyone to conduct themselves in a respectful and dignified manner

Executive Principal: Mr R Heritage **Associate Principal:** Mr L Morrith **Associate Principal:** Mr J Richardson

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