

SEAVIEW HIGH SCHOOL – SPECIAL INTEREST SPORTS APPLICATION FORM

STUDENT DETAILS:

Student's Name:

D.O.B: ED/ ID Number:

Address:Post Code:

Current School: Current Year Level:

Sport Experience:
.....
.....
.....

Name of current sporting club/s:

Name of coach/ PE teacher:

Phone Number: Email address:

PARENT/ CAREGIVER DETAILS:

Parent/ Caregiver 1 Name:

Phone Number: Email address:

Parent/ Caregiver 2 Name:

Phone Number: Email address:

Please include the following documentation with your application and return to Seaview High School as soon as possible:

- Confidential referee statement/s
(template is on the [school website](#) and is to be sent directly to Seaview High School)
- x2 most recent school report
- Written responses to questions outlined in the SIS Brochure on Page 5



**Government
of South Australia**

Department for Education
CRICOS Provider No. 00018A