



MERRIMAC STATE SCHOOL

New Student Information Sheet For the Class Teacher

Enrolment Date: Date of Birth:

Name of Child:

Parent/Guardian Names:

Any Siblings? Y / N please list with ages

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Has your child been to any of the following? (please name school)

Type of School	Name of School	Date From	Date To
Qld State Preschool			
Qld State Primary			
Private School			
Interstate School			
Overseas School			
Years Repeated, if any:			

Please list any Medical problems the teacher should know about:

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Has your child had any major illnesses/accidents/trauma? (please detail)

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Does your child have any fears/phobias which may affect him/her at school?

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Does your child speak any language other than English? Y/N Which language?

How will your child cope with starting a new school?

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