



EMERALD STATE HIGH SCHOOL

Change of Details Form

PLEASE ONLY COMPLETE SECTIONS WHICH NEED TO BE CHANGED.

Please Note: These changes will be applied to each family member attending Emerald State High School – unless advised otherwise.

| STUDENT'S NAME/S | PC CLASS |
|------------------|----------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |

| LEGAL/CUSTODY ORDERS | | | | |
|--|--------------------------|-----|--------------------------|----|
| Are there any current legal/custody orders in place? | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| (Please attach relevant documentation) | | | | |

| NOMINATED PARENT/GUARDIAN (Responsible for payment of fees/invoices) | |
|--|------------|
| Name: | Signature: |

| PARENT/ GUARDIAN CONTACT DETAILS | |
|--|--|
| <input type="checkbox"/> ADD <input type="checkbox"/> MODIFY | <input type="checkbox"/> ADD <input type="checkbox"/> MODIFY |
| 1. PARENT/GUARDIAN | 2. PARENT/GUARDIAN |
| Name: | Name: |
| Relationship to Student: | Relationship to Student: |
| Home No: | Home No: |
| Mobile No: | Mobile No: |
| Work No: | Work No: |
| Work Place: | Work Place: |
| Email: | Email: |
| Does the student reside with parent: <input type="checkbox"/> YES <input type="checkbox"/> NO | Does the student reside with parent: <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Parent/ Guardian Address: | Parent/Guardian Address: |
| Postal Address: (Please write "as above" if same) | Postal Address: (Please write "as above" if same) |

| EMERGENCY CONTACTS | | |
|--|--|--|
| *** Please NOTE: Parent 1 & 2 are automatically "Emergency Contacts". Please do not enter parent details here if they are listed above *** | | |
| <input type="checkbox"/> ADD <input type="checkbox"/> REMOVE <input type="checkbox"/> MODIFY | <input type="checkbox"/> ADD <input type="checkbox"/> REMOVE <input type="checkbox"/> MODIFY | |
| Name: | Name: | |
| Relationship (e.g. Aunt): | Relationship (e.g. Aunt): | |
| Home No: | Home No: | |
| Mobile No: | Mobile No: | |
| Work No: | Work No: | |

| | | |
|----------------------------|------------|-------|
| Requested By: (Print Name) | Signature: | Date: |
|----------------------------|------------|-------|



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| MEDICAL DETAILS (Please attach relevant documentation) | |
|---|--|
| Student Name: | |
| Condition: | Action Plan Required: <input type="checkbox"/> YES <input type="checkbox"/> NO |
| List Details: | |
| | |
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| | |
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| | |

| TRANSPORT | | |
|---|-------------------------|---------------------------|
| Is your child a Bus Student? <input type="checkbox"/> YES <input type="checkbox"/> NO (please indicate which buses below) | | |
| EMERALD COACHES | TO ESHS (AM BUS) | FROM ESHS (PM BUS) |
| 1. Clermont & Emerald School Bus Routes | | |
| 2. Echidna & Maranda School Bus Routes | | |
| 3. Gindie School Bus Routes | | |
| 4. Glengallan School Bus Routes | | |
| 5. Gregory Heights School Bus Routes | | |
| 6. Lilyvale School Bus Routes | | |
| 7. Mayfair School Bus Routes | | |
| 8. Selma Road School Bus Routes | | |
| 9. Springsure School Bus Routes | | |
| 10. Talafa School Bus Routes | | |
| 11. Tieri School Bus Routes | | |
| 12. Wills Road School Bus Routes | | |
| KNIGHT'S BUS SERVICE | | |
| 1. GEMFIELDS (Capricorn Hwy, Anakie, Sapphire, Rubyvale) | | |
| 2. COMET/YAMALA | | |
| 3. FOLEY ROAD change at Ag College (ESHS Students catch Comet Yamala bus to ESHS Campus) | | |

| PLEASE NOTE ANY OTHER RELEVANT INFORMATION: | |
|--|------------------------|
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| | OFFICE USE ONLY |
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