ST IVES HIGH SCHOOL

**2021 YEAR 7 GIFTED & TALENTED CLASS**

**APPLICATION FORM**

## Student Given Name Family Name

## Male/Female:

**Date of Birth**       /       /

**Number of Years in Australia (if not born here)**

**Address:**

**Email:**

#### Parents’/Guardians’ names

**Father**       **Mother**

**Home Phone**       **Home Phone**

**Mobile Phone**       **Mobile Phone**

**Student’s present school**       **Class**

**Class teacher’s name**

**Do you have another child attending St Ives High?**  Yes  No **If ‘yes’ what year?**

Please comment briefly *(4 lines only please)* about your child’s main areas of interest or talent and how you see him/her benefiting from our Gifted & Talented Program.

Attach your most recent school report and a copy of your Year 5 NAPLAN test results, if available. Applications can be emailed to: [stivesh.gat@det.nsw.edu.au](mailto:stivesh.gat@det.nsw.edu.au)

##### *Applications and payment of $10 to be returned by 3rd April 2020.*

##### *Note: $10 is non-refundable.*

**METHODS OF PAYMENT**

* **CREDIT CARD ON LINE**

Parent Online Payment by going to the school website <http://www.stives-h.schools.nsw.edu.au/home> click ***$ Make a Payment***. Complete the sections marked with a green asterisk, (no Student Registration numbers required) and under *Payment Options* you should click ***Other***and inPayment Descriptioninsert***G&T test*** and *Payment Amount*insert ***$10*.** Then continue to complete payment and record your receipt number below\*.

* **CASH, CREDIT CARD, EFTPOS** – in person at the school office
* **CHEQUE** (made payable to *St Ives High School*)

**I have made:**

my payment online and my receipt number is\*

a Cash, Credit Card, EFTPOS payment at the school office

a cheque payment – attached to application