



# Expression of Interest for 2026

Please include copies of the following documents with your application:

- The student's last two (2) school reports

Enrolment in Year (please circle):      7      8      9      10      11      12

## 1. ENROLMENT PROGRAMS

Academic Challenge & Enrichment Studies (Years 7-10)

Specialist Sport Program  
 AFL       Athletics       Baseball       Basketball       Netball       Rugby League  
 Soccer       Swimming

Does your child play the above sport at club level?     Yes     No

If Yes, which club? \_\_\_\_\_

Has the student attended a trial for this program at Darling Range Sports College?     Yes     No

## 2. STUDENT DETAILS (PLEASE PRINT CLEARLY)

Surname: \_\_\_\_\_ Legal Surname (if applicable): \_\_\_\_\_

Given Name(s): \_\_\_\_\_ Preferred Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Sex: M / F      Student Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Student Lives With:     Both parents     Mother     Father     Other (please specify) \_\_\_\_\_

Name of school student currently enrolled at: \_\_\_\_\_

Are there any siblings attending Darling Range Sports College?     Yes     No

If yes, please provide name(s) and year level(s): \_\_\_\_\_

## 3. PARENT/GUARDIAN DETAILS (PLEASE PRINT CLEARLY)

Title (Mr/Ms/Mrs/Miss): \_\_\_\_\_

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### 4. MEDICAL / HEALTH DETAILS

Does your child have any disability or medical condition(s) that will require support from school staff?  Yes  No

If yes, please provide details below:

Severe Allergy/Anaphylaxis  Yes  No

Minor and Moderate Allergies  Yes  No

Diabetes  Yes  No

Seizures  Yes  No

Asthma  Yes  No

Activities of Daily Living  Yes  No

Other Conditions or Needs  Yes  No

Please specify: \_\_\_\_\_

#### 5. BEHAVIOURAL DETAILS

Is the student currently under suspension from school?  Yes  No

Has the student ever been suspended from school?  Yes  No

If yes to either question, please provide name of school: \_\_\_\_\_

Has the student ever been excluded from a school?  Yes  No

If yes, please provide name of school: \_\_\_\_\_

#### 6. ABORIGINAL OR TORRES STRAIT ISLANDER ORIGIN

Is the student of Aboriginal or Torres Strait Islander origin?  Yes  No

If yes, please advise:  Aboriginal  Torres Strait Islander  Both Aboriginal and Torres Strait Islander

I declare that the information provided on this form is true and accurate.

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

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## POINTS TO NOTE

- Trials will be held in Terms 1, 2, 3 and if required Term 4. Dates, times and further information will be released closer to each trial.
- This Application is thoroughly reviewed to gauge whether the student meets the dual suitability criteria for the Program. A key aim is to ensure the balance between academic achievement, effort in classes and sporting excellence can be achieved. Academic records for the previous two semesters are reviewed with particular attention being given to the student's conduct, effort and participation comments. This is matched against the student's demonstrated achievements in sport.
- Acceptance into a Darling Range Sports College specialist sports program at any year level does not lead to automatic progression to the following year. Student progress and achievement is reviewed throughout each year and requires the student to consistently satisfy academic, behaviour and sporting criteria.
- A student's enrolment in a specialist sports program is for one (1) year only. A student does not automatically progress into a specialist sports program the following year. Progression in the program from one year to the next is dependent on a number of factors. Please refer to our Contributions and Charges Policy for full details.
- Specialist Sport Programs are 'user pays' programs and cost \$300 per year. This cost is in addition to the Contributions and Charges of all subjects that your child undertakes each year. In accordance with the College's Policy, all Contributions and Charges are to be paid **in full** by the end of Term 3 or a payment plan entered into by the end of Term 1.
- Parents of students who successfully trial and are subsequently invited to enrol in a specialist sports program are required to complete and return all necessary enrolment paperwork, along with the Sports College Agreement.
- At the time of receiving written confirmation that a student has been accepted into a specialist sports program, a deposit of \$300.00 is to be paid to secure their place in the program.

## PARENT/GUARDIAN DECLARATION

- I accept that my child will attend all training sessions and participate with commitment and enthusiasm, demonstrate a sustained and diligent commitment to academic studies and maintain a high standard of attendance, behaviour and conduct or his/her place in the Specialist Sports program may be forfeited.
- I accept that there is a requirement that all Specialist Sports program students will be available to represent the school in any competition or carnival the school enters including, but not limited to, sport specific competitions, interschool athletics, cross country and swimming.
- I accept that a Specialist Program is a 'user pays' program and Contributions and Charges must be paid in full by the end of Term 3 and I agree to pay those charges in full for every year my child is in the Program.
- I accept that for my child to be eligible to participate in extra-curricular activities, tours and camps that:
  - appropriate standards of behaviour, attendance, uniform and commitment to studies throughout the school year will be maintained
  - Contributions and Charges have been paid in full by the end of Term 3 or
  - A Contributions and Charges payment plan has been entered into prior to the end of Term 1 and payments are up-to-date.
- I accept that should my child no longer be enrolled in the Specialist Program, I agree to meet with the Principal to discuss my child's continued enrolment at Darling Range Sports College and to consider suitable alternative options.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_