



SANDRINGHAM  
COLLEGE

## Select Entry Accelerated Learning Program Application for entry: Year 7 2018

Thank you for your interest in the Sandringham College SEAL program. The application fee is \$90. Please include this payment with the application.

The SEAL entrance exams will be held on **Thursday, 20<sup>th</sup> April 2017 from 8.45am-12.30pm**. On receipt of your application and payment you will receive further details of the exam arrangements.

<b>STUDENT DETAILS</b>	<b>Date Preference:</b>
<b>Surname:</b>	<b>First Name:</b>
<b>Date of Birth:</b>	<b>Gender:</b>
<b>Residential address:</b>	
<b>Postcode:</b>	
<b>Parent/Guardian Name:</b>	<b>Telephone:</b> <b>(Private)</b> <b>(Business)</b>
<b>Email:</b>	

<b>SCHOOLING DETAILS</b>	<b>Current school:</b>
<b>Address:</b>	<b>Phone number:</b>
<b>School Principal's name:</b>	<b>Class Teacher's name:</b>

**Brief reasons why I think my child can benefit from the SEAL Program:**

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**Has your child been involved in any other special programs?**

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**Signature:** \_\_\_\_\_

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

**PLEASE RETURN FORM AND PAYMENT BY Tuesday 28th March 2017**

**TO THE CAMPUS OFFICE:**

**Sandringham 7-10 campus  
356 Bluff Rd, Sandringham**

**OR VIA EMAIL:**

[sandringham.co@edumail.vic.gov.au](mailto:sandringham.co@edumail.vic.gov.au)

Please use 'SEAL 2018 Application' as the subject header

Payment can be made by Cash, Cheque (make payable to Sandringham College) or Credit Card (below).

.....  
Payment by :    MasterCard        Visa   

Cardholder's Name : \_\_\_\_\_

Card Number    

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3 Digit Security No : \_\_\_\_\_

Expiry Date :                    /

Amount Paid : \$ \_\_\_\_\_

Signature: \_\_\_\_\_