



NSW PUBLIC SCHOOLS VOCAL ENSEMBLES 2009



STUDENT APPLICATION FORM

Student Information

First Name _____ Surname _____

Address _____ Suburb _____ Postcode _____

Home Phone _____ Student Mobile _____

Email _____ Date of Birth / /

Family Information

Parent 1: Title First Name Last Name

Work Phone Mobile Email

Parent 2: Title First Name Last Name

Work Phone Mobile Email

Ensemble Information Please indicate preferred Ensemble

- NSW Public Schools Junior Singers** (School Years 4 - 8)
- NSW Public Schools Singers** (School Years 8 - 12)

VOICE TYPE (Please circle) Soprano Alto Tenor Baritone Bass

Recommending teacher's comment: _____

2009 School Information (NB Signature indicates support of this application*)

Name of School (2009) _____ School Year (2009) _____

Name of current school (if different from 2009 school) _____

*If the student is changing schools in 2009, the nominating teacher and principal information should be for the current school.

Nominating Teacher's Name _____ Signature _____

Principal's Name (or representative) _____ Signature _____

Signatures

Student's Signature _____ Date / /2008

Parent's Signature _____ Date / /2008

Please complete and return to: Elizabeth Scott
Acting Music Coordinator
The Arts Unit
Locked Bag 3003
SUMMER HILL NSW 2130
Phone: 8512 1186 Fax: 9569 6878

APPLICATIONS CLOSE TUESDAY 25 NOVEMBER 2008