

EOI/APPLICATION, *ART* + *DESIGN EXCELLENCE*, KGSC *PLEASE COMPLETE AND SUBMIT TO* PROGRAM COURSE CONVENER: Ms Allie Wright awrig119@eq.edu.au; 35527390 By August 1, each year

Student Name					
Age		Curre	ent Year Level		
Current Schoo					
Parent Guardia	an Name	e 1			
Parent Guardian Name 2					
Home Address 1					
Home Address 2					
Postcode					
Email					
Home phone					
Mobile					

Year 10	Subject Studied	Grade
1		
2		
3		
4		
5		
6		

NOTES: (Awards, achievements, why you would like to be in ADE....)

ADMIN ONLY:

FOLIO:

GRADES:

INTERVIEW:

NOTES: