

## LOWOOD STATE HIGH SCHOOL EXITING STUDENT DETAILS FORM



<u> </u>	INCOTOBENT BETAIL	<u> </u>	WATER TOTAL
	Student Details		
Name:	Leaving Date:		
HMG:	Parent/Carer Name:		
Date of Birth:	New Address (if applicable)		
EQ ID:			
Reasons for Departure – please complete appropriate sections below			
☐ Transferring Name of New School:			
	o Name of Employer:		
	Time □ Part Time	☐ Supporting documents from student is under 16 year	• •
☐ Further Education Name of	Name of Learning Institution:		
☐ Unemployment Further	Further Details:		
□ Other Further Details:			
Bank Account Details (for payment of any Refunds if applicable)			
Option A – Electronic Fund Transfer into bank account (must be the current 100% Finance Person)			
	Carer Name:Signature:		
Account Name:			
BSB: Account Number :			
☐ Option B – Credit any refunds to the One School Account of Sibling			
Siblings Name: Year Level: Parent/Carer Signature:			
☐ I understand that if a refund is payable, it will only be issued once all outstanding Student Resource Scheme Fees and subject levies have been paid in full up-to-date, and all school resources including textbooks, library books, borrowed uniform items, musical instruments and other school resources are returned in good condition.			
OFFICE USE ONLY (Clearance Checks – All School resources MUST be returned and relevant Departments notified of departure)			
One School updated with:	Signature:	Date:	
New Address			
Bank Account details checked and added	d		
Exited in One School			
Department	Outstanding Res or other inform		Date
Enrolment Officer	Email Senior Scho and Dean's Teach Aides	er-	
Attendance Officer	Enter into ID Atten Attendance Not Ex (ANE)		
Textbook Hire/Library Resources Retu	rned		
Accounts Receivable	Calculate if a refur owed and process		