



Pinnacle Academic College
Strive. Empower. Perform.

ENROLMENT ENQUIRY FORM

Thank you for your interest in seeking enrolment at Pinnacle Academic College.

Please pay the Non-Refundable Family Establishment Fee to the College using the Parent's FULL name as the Reference

Please return this form along with confirmation of Establishment fee payment to admin@pac.qld.edu.au
If the student's surname is different from parent/guardian/carer please indicate this as well.

This form needs to be completed for your enrolment to be considered and your application to proceed.

PINNACLE ACADEMIC COLLEGE BANK DETAILS

Institution: Bank of Queensland

Account Name: Akademeia Ltd

BSB: 124 - 185

Account Number: 23202043

Reference: PARENT'S FULL NAME ESTABLISHMENT FEE

Processing of this Enrolment Application will NOT begin until the payment has cleared the Akademeia Ltd Bank Account.

Once the PAC staff have reviewed the enrolment enquiry form and a decision has been made, you will be contacted via email of this decision. If your enrolment is approved, you will be sent the Enrolment Package for completion and return.

DESIRED EDUCATION ARRANGEMENT

- OPTION 1: **(OC)** FULL TIME ON CAMPUS at Kallangur. Years 1-6
- OPTION 2: **(DE)** FULL TIME DISTANCE EDUCATION. Years P-6
- OPTION 3: **(MF)** PAC MULTIFACETED at Kallangur. Years 1-6 (Not available for Prep)
- OPTION 4: **(DEPA)** DISTANCE EDUCATION & PAC SUPERVISED THURSDAY PA DAY at Kallangur. Years 1-6
- OPTION 5: **(EP)** DISTANCE EDUCATION EXCURSION PACKAGE. \$100 Per student, Per Term.

If Choosing OPTION 3 - PAC Multifaceted Option, it is a **MINIMUM of 2 days** and a **MAXIMUM of 3 days** in total on campus.

STUDENT INFORMATION

Family name: _____

First given name: _____

Second given name: _____

Gender: _____

Date of Birth: _____

FAMILY INFORMATION

Residential address: _____

Parent/Carer name: _____

Phone number: _____

Email: _____

ENROLMENT INFORMATION

Desired education arrangement: _____

Year level are you seeking to enrol this student: _____

What is the name of your previous school and reason why you left? _____

Are there any special circumstances PAC should know about prior to enrolment? _____

Does the student have any medical issues? (If yes, please give more information below) _____

Please tell us about your child: _____

I have made full and frank disclosure, answered all questions to the best of my ability and provided all relevant documentation to assist Pinnacle Academic College in providing curriculum and educational services to the student/s enrolled. I have attached the receipt for the \$200 NON-REFUNDABLE establishment fee.

Parent/Carer Signature: _____ Date: _____