

**Compass is excited to welcome applications for Years 7-10 (2027 onward)!\***

Please find below the enrolment timeline and application form. We look forward to receiving your application and meeting you.

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| --- | --- | --- | --- | --- | --- |
| Entry year | 2027 | 2028 | 2029 | 2030 | 2031 |
| Tours and interviews | January 2026 | January 2026 | January 2026 | January 2027 | January 2028 |
| Enrolment Offers | February 2026 | February 2026 | February 2026 | February 2027 | February 2028 |
| Second round offers | March 2026 | March 2026 | March 2026 | March 2027 | March 2028 |

*\*Please note the shorter 2027 and 2028 timelines which are due to 2025 being Compass highschool’s inaugural year.*

Please note that submission of an enrolment application is **not** an offer of a place at Compass Independent School.

If an offer of enrolment is made, families should confirm this offer within 2 weeks by signing and returning the enrolment contract and by paying the enrolment confirmation fee (non-refundable and credited toward Term 1 fees).

\**Compass Independent School has a pending application with NSSAB to add secondary education to our existing accredited Primary school. Enrolments for Y7-10 are subject to the school receiving approval by NSSAB.*

**Enrolment application process: Years 7-10, 2027 onward**

1. Pay the enrolment application fee (non-refundable) – instructions below.
2. Provide the information requested in Step 2 of this form.
3. Return this form – instructions below.

**1. Pay the enrolment application fee ($150).**

Please make payment via direct transfer to the following account and reference details and **please generate a copy of the payment record**:

|  |  |
| --- | --- |
| Account name | Compass Independent School Ltd. |
| BSB | 034090 |
| Account number | 257066 |
| Reference number to use | Your family name |
| Payment record | Please paste a screenshot of the payment record here **OR** attach the payment record when returning this form via email. |

**2. Provide the following information:**

|  |  |  |  |
| --- | --- | --- | --- |
| **1. Young person’s details** | | | |
| First name |  | Date of birth |  |
| Middle name/s |  | Country of birth |  |
| Family name |  | Gender |  |
| Preferred name |  | Pronouns |  |
| Home address |  | Languages spoken at home by young person |  |

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| --- | --- |
| Enrolment year level | ⬜ Year 7 ⬜ Year 8 ⬜ Year 9 ⬜ Year 10 |
| Enrolment year | ⬜ 2027 ⬜ 2028 ⬜ 2029 ⬜ 2030 ⬜ 2031 ⬜ 2032 |

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| **2. Complete this section if the young person is an overseas student.** | | | |
| Compass is not a registered CRICOS school, therefore eligibility for admission to the school is on a case-by-case basis. Overseas student fees will apply. | | | |
| Do you have an Australian visa? | ⬜ Yes  ⬜ No | What is the visa type? |  |
| What is the visa number? |  | | |
| **Documents you will need to attach to your email when submitting this application**: | | ⬜ Birth certificate copy  ⬜ Passport copy  ⬜ Visa details copy | |

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| **3. Parent/Guardian 1 details** | | | |
| First name |  | Mobile number |  |
| Family name |  | Email |  |
| Residential address |  | Languages spoken at home |  |
| Postal address if different to above |  | Highest level of education | ⬜ Year 12  ⬜ Certificate I, II, III, IV  ⬜ Diploma  ⬜ Bachelor degree  ⬜ Masters degree  ⬜ Doctorate |
| Are there any family/parenting orders in place | ⬜ Yes  ⬜ No | **If yes, please attach a copy to your email when submitting this application**. | |

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| **Parent/Guardian 2 details (if applicable)** | | | |
| First name |  | Mobile number |  |
| Family name |  | Email |  |
| Residential address |  | Languages spoken at home |  |
| Postal address if different to above |  | Highest level of education | ⬜ Year 12  ⬜ Certificate I, II, III, IV  ⬜ Diploma  ⬜ Bachelor degree  ⬜ Masters degree  ⬜ Doctorate |

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| **4. Connection to QUT (if applicable)** | | | | | | |
| Compass has a close connection with QUT and children of QUT staff and students are included in our list of priority enrolments. | | | | | | |
| I am a - | ⬜ current staff member.  ⬜ current student.  ⬜ former student. | | | | | |
| If a current staff member, what is your role and with which faculty? |  | | If a current student, which course? | |  | |
| **5. Family questionnaire** | | | | | |
|  | | Parent/Guardian(s) response | | Young person’s response | |
| Why do you want to join Compass and what makes it a good fit? | |  | |  | |
| What is your understanding of the school’s philosophy? | |  | |  | |
| What words would you use to capture your/your child’s unique characteristics? | |  | |  | |
| What learner qualities are shown by you/your child? | |  | |  | |
| What are your/your child’s strengths, talents or proficiencies? | |  | |  | |
| Are there areas where you/your child would benefit from extra support? | |  | |  | |
| What are your/your child’s strengths when forming and maintaining peer relationships? | |  | |  | |
| What are your/your child’s challenges when forming and maintaining peer relationships? | |  | |  | |
| Is there anything about Compass that you think might be challenging for you? | |  | |  | |
| Our school involves active participation, a high degree of responsibility and a willingness to contribute and cooperate. How do you feel about this style of learning environment? | |  | |  | |
| Our learning takes place on and off campus and indoors and outdoors. How do you feel about this? | |  | |  | |
| If offered a place at Compass, what would it mean to you? | |  | |  | |
| If you/your child could choose anything to investigate/learn about, what would it be? (You can provide up to 3 ideas!) | |  | |  | |

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| **6. Additional needs (if applicable)** | | | | | |
| Additional need/s | ⬜ Medical  ⬜ Learning  ⬜ Other | Please share the names of the need/s  (e.g. ASD, Dyslexia, Visual impairment, Coeliac, Nut allergy, Medications etc.) | |  | |
| Accommodations, adjustments and/or support measures needed |  | | | | |
| Any other relevant information that would support the school to provide equitable access to schooling |  | | | | |
| Specialist services/assessments used | | | | | |
|  | Provider | | Initial date | | Ongoing (Tick for Yes) |
| ⬜ Paediatrician |  | |  | | ⬜ |
| ⬜ Educational psychologist |  | |  | | ⬜ |
| ⬜ Occupational therapist |  | |  | | ⬜ |
| ⬜ Speech therapist |  | |  | | ⬜ |
| ⬜ Psychology |  | |  | | ⬜ |
| ⬜ Counselling |  | |  | | ⬜ |
| ⬜ Early intervention |  | |  | | ⬜ |
| ⬜ Other |  | |  | | ⬜ |
| **Documents to attach to your email when submitting this application**: | ⬜ Relevant medical reports  ⬜ Relevant specialist reports | | | | |

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| **7. Educator contact** | | | |
| As part of the enrolment application, we may contact educators who have been involved in your young person’s learning. In most cases, this would be a current or most recent teacher; when this is not possible, a coach or person independent from the family who knows the young person well. When contacting this person, a short discussion is undertaken to help ascertain the compatibility between the parent/guardian, young person and the school. | | | |
| Name of educator |  | | |
| School/Organisation/Role |  | | |
| Email |  | Phone |  |

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| **8. Declaration** | |
| In lodging this enrolment application form and accompanying documentation, I,/we the Parent/Guardian(s): | |
| acknowledge that any failure to disclose any information relevant to Compass’ ability to educate my child, including, but not limited to, a medical condition, illness, disability or difficulties relevant to Compass’ ability to educate my child may result in the rejection of this application or the subsequent termination of my child’s enrolment, if my child has already been offered a position at Compass. | ⬜ |
| agree to provide documentation relevant to my child’s medical condition, illness, disability or difficulty, including, but not limited to, copies of medical, psychological or other reports/records from specialists, treating medical practitioners or allied health professionals upon request from the school. | ⬜ |
| agree to, upon request from the school, give permission for the school to obtain further information from the child’s previous school, disability agencies, medical practitioners and allied health professionals. | ⬜ |
| acknowledge that Compass will take into account the school’s ability to meet the educational needs of my child by making reasonable adjustments when considering the enrolment application. | ⬜ |
| declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete. | ⬜ |
| have authorisation to provide personal information included in this form about people other than myself or my child | ⬜ |
| agree to update the school immediately regarding any changes to the information I have provided. | ⬜ |
| understand that submitting an enrolment application does not guarantee an offer of enrolment at Compass and that the enrolment application fee is non-refundable. | ⬜ |

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| --- | --- |
| Name of parent/guardian 1 |  |
| Signature |  |
| Date signed |  |

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| --- | --- |
| Name of parent/guardian 2 (if applicable) |  |
| Signature |  |
| Date signed |  |

**3. Return this form.**

Once Section 2 has been completed and the enrolment application fee payment made and recorded in Section 1, please return this form **and any relevant attachments** as per the instructions below:

|  |  |
| --- | --- |
| Email address | highschool@compassindependentschool.com |
| Email subject | Enrolment application – INSERT YOUR CHILD’S NAME |
| Attachments to include | * **This form** * **Australian Birth certificate, Passport or Citizenship certificate copy** * Payment record \*unless screenshot included above * Family or Parenting Orders (if applicable) * International Birth certificate, Passport and Visa copy (if applicable) * Specialist reports (if applicable) |