

## STUDENT INTENTION TO LEAVE & DESTINATION FORM

The Queensland Government's Department of Education (DOE) commission a survey each year to gather statistical information regarding the "earning or learning" initiative for all young people. To help our school gather information and statistics on where our young people go when they leave, we request that you fill this form out on your student's exit from our school.

Student Name: \_\_\_\_\_ Year Level: \_\_\_\_\_

Contact address / phone (if changed) \_\_\_\_\_

### REASON FOR LEAVING: (Please select one of the following options)

<b>Enrolment at another school:</b> <i>If enrolling in a private school, please attach evidence i.e. confirmation of enrolment letter/email</i>	<b>School Name:</b> _____ _____	<b>State:</b> Queensland <input type="checkbox"/> Interstate <input type="checkbox"/> Overseas <input type="checkbox"/>
<b>Working:</b> <i>Please attach evidence i.e. letter from the Company confirming work status and hours</i>	<input type="checkbox"/> Fulltime / Part time: <input type="checkbox"/> Casual: <input type="checkbox"/> Seeking Work (If completed <b>Compulsory Participation Phase</b> ):	<b>Please state type of work, organisation and location:</b> _____ _____ _____
<b>Further Education:</b> <i>Please attach evidence i.e.: TAFE/UNI Acceptance letter or Apprenticeship indenture forms.</i>	<input type="checkbox"/> Apprenticeship:	Type: _____ Location: _____
	<input type="checkbox"/> Traineeship:	Type: _____ Location: _____
	<input type="checkbox"/> Alternative Study Program:	Course Studied: _____ Institution Name: _____

**ALL TEXTBOOKS, LIBRARY BOOKS AND RESOURCES SUPPLIED BY THE SCHOOL, MUST BE RETURNED PRIOR TO THE STUDENT LEAVING SCHOOL.**

Textbooks & Library Books returned:    YES ☐    NO ☐    N/A ☐

School Hire Laptop Returned:    YES ☐    NO ☐    N/A ☐

Confirmation Signature by Library/Mailroom Staff: \_\_\_\_\_

IF POSTING ITEMS BACK TO CSDE PLEASE USE REPLY PAID SERVICE: 72567 KAWANA QLD 4701  
 CAPRICORNIA SCHOOL OF DISTANCE EDUCATION  
 241 – 259 FARM STREET  
 KAWANA QLD 4701

Do you have any uniforms that you would like to donate to the school? All donations are greatly appreciated – Thank-you.

A refund may not be made to me or be made in full or in part, having regard to the associated expenses already incurred by the school, and the school's refund guidelines provided to me (by bulk mail-out each year or in enrolment package). Bank details are kept confidential and will not be used for any other purpose.

Please ensure that any outstanding invoices or payment plans are paid in full prior to your student departing.

**BANK ACCOUNT DETAILS:**

Account Name: \_\_\_\_\_ Account Number: (maximum 9 characters) \_\_\_\_\_

BSB: \_\_\_\_-\_\_\_\_ Bank: \_\_\_\_\_

**PARENT/GUARDIAN CONFIRMATION**

I wish to advise that my student will cease attending Capricornia School of Distance Education from \_\_\_\_/\_\_\_\_/\_\_\_\_ (last day of attendance).

Parent/Guardian signature: \_\_\_\_\_ Name: (Please Print) \_\_\_\_\_

Please email your completed Student Intention to Leave & Destination Form to: [enrolments@caprocksde.eq.edu.au](mailto:enrolments@caprocksde.eq.edu.au)

Office Use Only	
Entered into OS	<input type="checkbox"/>
Resources Returned	<input type="checkbox"/>
Accounts paid in full	<input type="checkbox"/>
Refund processed	<input type="checkbox"/>
Teachers Advised	<input type="checkbox"/>
Staff Signature:	