



Craigieburn Secondary College

(CEAP) Enrichment *and* Accelerated Program

2025 APPLICATION FORM

STUDENT

First Name: Surname:

Gender: Male Female Age: Date of Birth:

CURRENT SCHOOL DETAILS

Primary School: Tel:

Grade 6 Teacher:

HOME CONTACT DETAILS

Parent/Guardian Name:

Address:

Suburb: Postcode:

TELEPHONE/EMAIL

Home: Work:

Mobile: Email:

I give permission for Craigieburn Secondary College to access all relevant information regarding my child and for my child to undertake any required testing procedures.

PARENT/GUARDIAN SIGNATURE:

IMPORTANT INFORMATION...

- **Return this application with the additional 'Parent Assessment Form' and a copy of the student's most recent school report to *Craigieburn Secondary College, 10 Hothlyn Drive, Craigieburn VIC 3064* by no later than *Friday 9th August 2024*. Envelopes should be marked: **CONFIDENTIAL CEAP APPLICATION.****
- Please note if your child is short-listed, your child will be invited into the College to complete an academic test and student interview, timing to be confirmed once your child has been short-listed.



Craigieburn Secondary College

(CEAP) Enrichment *and* Accelerated Program

PARENT ASSESSMENT FORM

STUDENT

First Name: Surname:

Primary School:

HOME CONTACT DETAILS

Parent/Guardian Name:

Address:

Suburb: Postcode:

Please answer the following questions:

1. Did your child read before he/she started school?
2. If yes, did he/she largely teach him/herself?
3. Does your child play a musical instrument?

YES NO

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

If yes, which instrument

.....

In what school or other outside activities does your child participate in?

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.....

What types/genres of books does your child read and what recent books has he/she enjoyed?

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.....

What particular strengths and weaknesses do you think your child has

My child is good at...

My child is not so good at...

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.....
.....

Please provide any additional information/comments you think may be relevant/useful.

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Return this form with the Application Form to **Craigieburn Secondary College, 102 Hothlyn Drive, Craigieburn VIC 3064** by no later than **Friday 9th August 2024**.
Envelopes should be marked: **CONFIDENTIAL CEAP Application**.