

## **Emerald North State School**

Campbell Street, PO Box 706, Emerald, Qld, 4720 Phone: (07) 4988 2333 Fax: (07) 4982 2999

E: admin@emernortss.eq.edu.au W: www.emernortss.eq.edu.au

	Notice o	<u>f Inter</u>	nded Dep	arture Info	rmatio	<u>n:</u>	
Date of Notification:							
			By Whom			ie Parent/Admin Staff	
Student/s Detail:		•	,				
Full Name				Year Level -	- Class	D.O.B	
					0.0.00	3.6.5	
Reason for Departure:	••						
Date of Intended Depa	rture:						
Date Commencing Nev	v School:		•••••				
New School Details: School Name		ıme:					
	Address:						
	Phone No	#:					
Forwarding Address Detail:							
	Phone No	#:					
	Email:						
Further Information:				•••••			
Parent/Guardian Signa	turo:			Date	· ·		
Parent/Guardian Signa	ture		•••••	Date	z		
We are sorry that you	ır time at o	our scho	ool is over.	Please take t	he time	to provide us with your	
•						orm, we can understand	
•	-		_			milies' needs. We wish	
you all the best for the	-						
,							
Office Use Only							
☐ Library books re	turned?		Outstanding	g payments?		Student materials/books collected	
☐ Student profile ☐			. ,				
information coll			or to privat		_		
☐ Intended Depart				Confirmation		Actual Departure entered	
entered on One  Admin Weekly L			Received	il to Teacher &		on One School  Exit Survey Provided	
- Admini Weekly C	puate	Ц	Leadership			LAIL JUIVEY FIOVILLEU	



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## **Emerald North State School Exit Survey**

1.	Detail the positive aspects/experiences for you as a parent/guardian and from your child/children's perspective while a member of Emerald North State School:
	•
2.	Detail the areas as a parent/guardian that you feel require improvement:
	•
3.	How clear was the strategic direction of the School?
4.	Were you happy with the level of communication between home and school (eg newsletter, facebook, website, parent interviews, SMS alerts)? Please also detail any suggestions on how this area can be improved?
5.	Did you feel welcome to participate in our social, information and fundraising events?
6.	Any other comments?