2025 AVIATION ACADEMY EXPRESSION OF INTEREST



Please complete and return to the College PRIOR to the EXAM

Email: Michael.ledonne@education.wa.edu.au

Student Surname						
Student Given Names						
Date of Birth						
2024 Year Level	6	7	8	9	10	(please circle)
Current Primary School						
Have you enrolled or applied to attend Kinross College for 2025? YES / NO					NO	

Medical conditions:

Interest:

Why I am interested in studying Aviation -				

Parent/Caregiver contact details				
Name:	Name:			
齏:	齏:			
Relationship:	Relationship:			
Email:	Email:			
Address:	Address:			