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26 Clover Hill Drive MUDGEERABA QLD 4213

Expression of Interest (EOI)

iLearn @ Clover Hill 1 to 1 iPad Program

Please submit to the 1to1@cloverhillss.eq.edu.au email address as soon as possible.

Inclusion in the program will be determined according to class sizes and the number of students who have registered their expression of interest.

Parents whose students are confirmed a place in the program will receive email notification and an invoice for payment. Parents are able to purchase the iPad at this stage.

Notification of your student's inclusion in the program will be emailed along with the invoice for payment. Only after you receive this notification should an iPad be purchased.

| Personal Details | | |
|---|--|--|
| Stude | nt name: | |
| Stude | nt Year Level: | |
| Paren | ts' Name: | |
| Acceptance | | |
| | I would like to express an interest in my child/children Class: to join the 2025 iLearn @ Clover Hill 1 to 1 iPad Program. | |
| I understand that in submitting the Expression of Interest, I am agreeing to: | | |
| 1. 2. 3. 4. | Completing the Acceptable Use Agreement form. Payment of the 2025 iLearn @ Clover Hill fee of \$40.00 by the due date Purchasing a compatible iPad for the program once notification of accepted into the program. I also understand that on acceptance into the program, my student is required to remain in the program for a minimum of one school year. | |
| Signed | d: Date: | |

Please complete and return the form to 1to1@cloverhillss.eq.edu.au