



**ACT**  
Government  
Education



An ACT Government School  
Respect / Tolerance & Inclusion / Excellence

57 Ratcliffe Crescent, Florey ACT 2615  
PO Box 223, Kippax ACT 2615

Telephone (02) 6142 2730  
Website: [www.floreyps.act.edu.au](http://www.floreyps.act.edu.au)

**LEAVERS' FORM**

*(confidential)*

I would like to inform the school that my child/children will be leaving Florey Primary School, and the last day of attendance will be on \_\_\_\_/\_\_\_\_/\_\_\_\_.

STUDENT NAME/S

CLASS

_____	_____
_____	_____
_____	_____

**SCHOOL STUDENT IS TRANSFERRING TO:**

**ACT:** \_\_\_\_\_

**Interstate:** \_\_\_\_\_

**Forwarding address: (if appropriate):**

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Checklist. Have you:**

- |   |        |                  |
|---|--------|------------------|
| • returned all library books                  | YES/NO | _____ (initials) |
| • LA Teacher advised                          | YES/No | _____ (initials) |
| • Report required                             | YES/NO | _____ (initials) |
| • given the Front Office a forwarding address | YES/NO | _____ (initials) |

**Office use:**

**Child's Name:** \_\_\_\_\_

**Computer records updated** YES/NO

Student File forwarded YES/No

## Exit Survey

Dear Parent/ Carer

As your family leaves the Florey Primary School community we would appreciate you spending some time giving us feedback about the school. This is a good opportunity to collect data on the school and its programs. This will help us with future planning.

Please complete this form and return it to the front office.

Thank you.

**Where are you going?**

**Another ACT Public School**

**Private School**

**Interstate**

**Overseas**

Why? (optional)

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Please indicate the programs that you believe are successful at Florey:

Please indicate areas for improvement at Florey:

**Any Florey Primary School uniforms no longer needed will be gratefully accepted for our second hand uniform store.**