APPLICATION TO ENROL FORM

Application to Enrol in an Armidale Diocesan Catholic School

School Name

St Joseph's Primary

Barraba

Student Id	
NESA No. *(if applicable)*	

Office Use Only

Student's Family Name

Student's Given Name/s

Enrolment Year (eg. Year 3)

Calendar Year (eg. 2017)

Thank you for your interest in applying to enrol your child in an Armidale Diocesan School. The school will contact you to arrange a suitable time for an enrolment interview with the school Principal or his/her representative.

This application to enrol form is to be completed in English. If you need an explanation of any of the questions or help in completing this application, please ask for assistance from the Principal. You are welcome to provide further information on an attached sheet.

Following receipt of this application and after an enrolment interview the Principal will notify you of the outcome of your application. The information you have provided will be used by the school to enrol your child, if your application is accepted. **Please do not purchase items such as uniforms until you receive confirmation of enrolment.**

This enrolment application is for the nominated school above.

Please **attach copies of all relevant documents** to this enrolment application: *(Parent/Carer please tick checkboxes to indicate forms provided)*

- ☐ **Proof of student's residential address** (e.g. original copies of council rates notice, residential lease, electricity accounts, statutory declaration etc.)
- ☐ **Birth certificate or identitydocuments**
- ☐ **Copies of any family law or other relevant court orders** (if applicable) (e.g. students in the care of the Minister or other family member)
- ☐ **Immunisation history statement**
- ☐ **Baptismal certificate and other Sacramental documents** (if applicable)
- ☐ **Reports from previous school/s**
- ☐ **Confirmation of medical needs** (eg. Doctor's report)

If your child is not a permanent resident, you will need to provide:

- ☐ **Passport or travel Documents**
- ☐ **Current visa and previous visas** (if applicable)

If your child is a temporary visa holder you will also need to provide:

- ☐ **Authority to Enrol** issued by the Temporary Visa Holders Program Unit. This is required for visitor and temporary resident visa holders
- ☐ **Authority to Enrol or evidence of permission to transfer** issued by the International Student Centre
- ☐ **Evidence of the visa the student has applied for** (if the student holds a bridging visa).

Introduction

The school and the Catholic Schools Office Armidale are subject to the National Privacy Principles advised under the Privacy Act and the Health Records and Information Privacy Act 2002.

The information you provide will be used to process your child's application for enrolment. It will only be used or disclosed for the following purposes:

- General student administration relating to the education and welfare of the student
- Communication with students and parents or carers
- To ensure the health, safety and welfare of students, staff and visitors to the school
- State and National reporting purposes
- For any other purpose required by law.

The information will be stored securely. You may access or correct any personal information by contacting the school. If you have a concern or complaint about the way your personal information has been collected, used, or disclosed, you should contact the school.

The health-related information collected is subject to the Health Records and Information Privacy Act 2002. It is being collected for the primary purpose of ensuring the health and safety of all students, staff and visitors to the school. It may be used and disclosed to medical practitioners, health workers, other government departments and/or schools for this primary purpose.

Do parents have to answer the questions?

Educational Authorities are required by law to ensure the health and safety of students, staff and visitors on our premises. It is therefore necessary for you to answer all questions on this form.

The information you provide will assist the school to communicate with you and to care for your child while at school. Should you choose to submit an incomplete form, processing your application may be delayed or denied and the quality of your child's education may be affected.

Giving false or misleading information is a serious offence. In the event that statements made in this application later prove to be false or misleading, any decision made as a result of this application may be withdrawn.

Why have we asked for information about your occupation and education?

All Australian Education Ministers have agreed on National Goals for Schooling in the 21st Century. The National Goals specifically state that the achievement of students in schools should not be affected by discrimination based on sex, language, culture and ethnicity, religion or disability; or by differences arising from social and economic background or geographic location. The goals also state that 'the learning outcomes of educationally disadvantaged students (should) improve and, over time, match those of other students'.

To help us make sure we are achieving this goal, all parents across Australia, no matter which school their child attends, are being asked to provide information about family background.

The main purpose of collecting this information is to promote an education system which is fair for all Australian students regardless of their background.

We use the information to evaluate whether our policies are effective and to ensure that no group is experiencing undue disadvantage because of their economic or social background.

The four groups listed on page 9 are used by the Australian Bureau of Statistics to classify occupations. Please choose the group that you think best describes you. If you have retired or stopped work in the past year please choose the group in which you used to work.

How to complete this form

Please print all information in BLOCK letters so it is easy to read.

Please tick boxes where appropriate e.g. ☑

Student Attendance

- Parents are responsible by law for the regular attendance of students at school (Education Act 1990).
- Principal and school staff, in consultation with students and their parents, will usually be able to resolve problems of non-attendance.
- If a range of school-based interventions has been unsuccessful, consultation will be made with the Catholic Schools Office which may result in the withdrawal of the enrolment placement.
- Unexplained absences greater than 15% may result in the withdrawal of the enrolment placement and the matter will be referred to the Regional Home School Liaison Officer with the NSW Department of Education.

Student Details

Preferred first name (if applicable)

Date of birth (dd/mm/yyy)

Sex

In which country was the student born?

Nationality

If born overseas, what date did the student arrive in Australia? (dd/mm/yyyy)

Religion (if none, please write 'no religion')

Catholic Sacraments (include date, parish & town)

Baptism

Reconciliation

Eucharist

Confirmation

Languages Spoken at Home

Does the student speak a language other than English at home? ☐ NO, English only ☐ YES

If **yes,** what languages are spoken at home?
(Please write the exact language spoken -for example, Cantonese or Mandarin, not simply 'Chinese'. Please do not write a nationality such as 'Indian' . Please specify the actual language spoken e.g. Hindi or Punjabi)

Main Language spoken at home

Other languages spoken at home (including English)

Aboriginality

Is the student of Aboriginal or Torres Strait Islander origin?

- ☐ No
- ☐ Aboriginal
- ☐ Torres Strait Islander
- ☐ Both Aboriginal & Torres Strait Islander

Previous Schools

Please provide details of any school where the student has previously been enrolled **(NSW,** interstate or overseas) starting with the most recent. If more space is needed, please attach a page marked 'Previous Schools'.

Name of school

Location

Dates of attendance (e.g.: from May 2018 to June 2019)

Name of school

Location

Dates of attendance (e.g.: from May 2018 to June 2019)

Name of school

Location

Dates of attendance (e.g.: from May 2018 to June 2019)

Name of school

Location

Dates of attendance (e.g.: from May 2018 to June 2019)

This student's first day of enrolment at an Australian School (dd/mm/yyyy)

Kindergarten Students

For **Kindergarten students,** what type of care did this child have in the year prior to enrolling at school?

- ☐ Long day care
- ☐ Family day care
- ☐ Occasional care
- ☐ Pre-school
- ☐ Other formal care
- ☐ Other care (eg. Parent, relative, playgroup)

Amount of formal care each week, prior to enrolling at school:

- ☐ Up to 6 hours per week
- ☐ Up to 12 hours per week
- ☐ 12 hours to fulltime each week

Name/s of pre-school, long day care centre or other formal prior to school care service.

Centre/ Service	Town

Students With Additional Needs

Is your child a young person with additional needs?

☐ NO ☐ YES

Please indicate your child's additional need(place a tick in all checkboxes that apply)

- ☐ Autism
- ☐ Behaviour disorder/s
- ☐ A hearing impairment
- ☐ An intellectual disability
- ☐ A language disorder
- ☐ Mental health issues
- ☐ A physical disability
- ☐ A vision impairment
- ☐ Difficulties in the basics of learning
- ☐ Acquired brain injury
- ☐ Has attended 'early intervention'
- ☐ Receipt of 'Carer's Allowance'
- ☐ Highly proficient learning skills/ special talents
- ☐ Other (please specify)

_____

_____

Legislation and diocesan policy recognises that 'accommodation and/or learning adjustments' may be required for students with additional needs.

What **accommodations** and/ or **learning adjustments** were provided for your child at his/ her previous school and/or may be required for your child at this school?

Alternative teaching and learning strategies:

- ☐ Signing
- ☐ Braille
- ☐ A reader or scribe
- ☐ Access to technology
- ☐ Modifications to equipment and / or furniture
- ☐ Modification to learning spaces
- ☐ Supported by Educational Assistant / Support Teacher
- ☐ Acceleration or extension programs
- ☐ Other (please specify)

_____

_____

Is there anything that you **do or modify at home** that may help us at school with your child's additional needs?

_____

_____

_____

Medical Information

Doctor's name / Medical centre

Street number & name

Town Postcode

Medicare No.

Expiry date: _____ I _____

Please tell the Principal before your child starts school if he or she has any allergies or other medical conditions. This is essential. You should also let the school know as soon as you are aware of any new allergies or other medical conditions.

Allergies ☐ NO ☐ YES

Please specify any allergies suffered by the student e.g. peanuts, insect stings.

_____

_____

Other Medical conditions ☐ NO ☐ YES

Please specify any other medical conditions of which the school should be aware - e.g.asthma, diabetes, epilepsy.

_____

_____

Medication

Please specify any prescribed medication to be taken by the student. (Please provide list if insufficient space).

_____

_____

_____

_____

Parent/ Carer Permission

I give my permission for the school to seek information from the doctor listed above about how to manage any allergy or medical condition experienced by the student.

☐ NO ☐ YES

Special Circumstances

Are there any special circumstances about the student seeking to be enrolled that the school should know prior to enrolment, e.g. mature age, pregnancy, living apart from parental supervision, subject of a court order, State arranged out of home care?

☐ NO ☐ YES

If yes, please provide a brief description of the circumstances

Student's History Relevant to Risk Assessment

The Catholic Schools Office has a responsibility to assess and manage any risk of harm to its staff and students. This application gives you the opportunity to provide the school with information that will help facilitate the smooth transition of students into the specific school setting. This may include preparing a behavior management plan or other appropriate strategies directed at meeting the particular needs of the student. The action taken in response to the information you provide will help to safely support students in the school and contribute to ensuring the safety of your child, other students and staff.

To your knowledge, is there anything in your child's history or circumstances (including medical history) Which might pose a risk of any type to him or her, other students, or staff at this school?

☐ NO ☐ YES

Please provide names and contact details of health professionals or other relevant bodies that have knowledge of these issues.

Does your child have any history of violent behaviour?

☐ NO ☐ YES

If yes, please provide a brief description of the circumstances

Has your child ever been suspended or expelled from any previous school?

☐ NO ☐ YES

If **yes**, what was this for?

Actual violence to any person?	☐ NO	☐ YES
Possession of a weapon or any item to cause harm or injury?	☐ NO	☐ YES
Threats of violence or intimidation of staff, students, or others at the school?	☐ NO	☐ YES
Illegal drugs?	☐ NO	☐ YES
Are you aware of any other incidents of the kind listed above in which your child has been involved outside of the school setting?	☐ NO	☐ YES

If yes please provide a brief outline of these matters.

Family Details

PARENT/CARER ADDRESS DURING TERM*

*Please note that a parent who is not living with this student should complete details in the Other Parent section (Page 11).

Name/s to be used for all correspondence
For example: Mr & Mrs Adam Black, Ms Betty Green

Relationship to student

Address for correspondence (RMB/PO Box)

Street Number/Property Name

Street Name

Town

Postcode

Home telephone number

Work telephone number *(if applicable)*

Mobile Number

Email address

Is the above address your residential address?

☐ Yes ☐ No

If no, write your residential address below.

STUDENT'S ADDRESS DURING TERM*

*If this is the same as the residential address on the left, please tick this box ☐

If it is not the same address, please complete the information below:

Name/s of person student is living with

Relationship to student

Address for correspondence (RMB/PO Box)

Street Number/Property Name

Street Name

Town

Postcode

Home telephone number

Work telephone number *(if applicable)*

Mobile Number

Email address

If the student has a second residential address during school term, please write it here:

Family Details - National Goals for Schooling Data Collection

PARENT/CARER 1

e.g. Father, living at the same address as the student

If applicable, copies of any relevant family law or other court orders must be provided.

*Please note that a parent who is not living with this student should complete details in the Other Parent section. Page 11

Name and contact details

Relationship to the student

Title (e.g. Mr/Ms/Mrs/Dr)

Family name

Given name/s

Work telephone number (if available)

Mobile telephone number (if available)

Parent/Carer's Religion

Occupation of Parent/ Carer 1

Occupation Group

What is the occupation group of **Parent/Carer 1**
See page 10

- Please select the appropriate parent occupation group from the list provided.
- If the person is not currently in paid work but had a job or has retired in the last 12 months, please use the person's last occupation.
- If the person has not been in paid work in the last 12 months, please write '8' in the box.

☐ (Write 1, 2, 3, 4 or 8)

School Education

What is the highest year of primary or secondary school that **Parent/Carer 1** has completed? For persons who have never attended school, tick Year 9 or equivalent or below (one box only)

- ☐ Year 12 or equivalent
- ☐ Year 11 or equivalent
- ☐ Year 10 or equivalent
- ☐ Year 9 or equivalent or below

Educational qualifications

What is the highest qualification Parent/Carer 1 has completed? (tick one box only).

- ☐ Bachelor degree or above
- ☐ Advanced diploma/diploma
- ☐ Certificate I to IV (including trade certificate)
- ☐ No non-school qualification

Country of birth

In which country was Parent/Carer 1 born?

Nationality of Parent/Carer 1

Languages spoken at home

Does **Parent/Carer 1** speak a language other than English at home?

- ☐ No, English only
- ☐ Yes, Language other than English spoken

If **yes**, what languages are spoken at home?
Please write the exact language spoken- for example, Cantonese or Mandarin, not simply 'Chinese'. Please do not write a nationality such as 'Indian'. Please specify the actual language spoken e.g. Hindi or Punjabi.

Main Language spoken at home

Other languages spoken at home (including English)

An interpreter service may be available during school interviews. Would this service be require

☐ NO ☐ YES

Family Details - National Goals for Schooling Data Collection

PARENT/CARER 2

e.g. Mother, living at the same address as the student

If applicable, copies of any relevant family law or other court orders must be provided.

*Please note that a parent who is not living with this student should complete details in the Other Parent section. Page 11

Name and contact details

Relationship to the student

Title (e.g. Mr/Ms/Mrs/Dr)

Family name

Given name/s

Work telephone number (if available)

Mobile telephone number (if available)

Parent/Carer's Religion

Occupation of Parent/Carer 2

Occupation Group

What is the occupation group of **Parent/Carer 2**
See page 10

- Please select the appropriate parent occupation group from the list provided.
- If the person is not currently in paid work but had a job or has retired in the last 12 months, please use the person's last occupation.
- If the person has not been in paid work in the last 12 months, please write '8' in the box.

☐ (Write 1, 2, 3, 4 or 8)

School Education

What is the highest year of primary or secondary school that **Parent/Carer 1** has completed? For persons who have never attended school, tick Year 9 or equivalent or below (one box only)

- ☐ Year 12 or equivalent
- ☐ Year 11 or equivalent
- ☐ Year 10 or equivalent
- ☐ Year 9 or equivalent or below

Educational qualifications

What is the highest qualification Parent/Carer 1 has completed? (tick one box only).

- ☐ Bachelor degree or above
- ☐ Advanced diploma/diploma
- ☐ Certificate I to IV (including trade certificate)
- ☐ No non-school qualification

Country of birth

In which country was Parent/Carer 2 born?

Nationality of Parent/Carer 2

Languages spoken at home

Does **Parent/Carer 2** speak a language other than English at home?

- ☐ No, English only
- ☐ Yes, Language other than English spoken

If **yes**, what languages are spoken at home?
Please write the exact language spoken- for example, Cantonese or Mandarin, not simply 'Chinese'. Please do not write a nationality such as 'Indian'. Please specify the actual language spoken e.g. Hindi or Punjabi.

Main Language spoken at home

Other languages spoken at home (including English)

An interpreter service may be available during school interviews. Would this service be required?

☐ NO ☐ YES

Parent Occupation Groups for National Goals for Schooling Data Collection

GROUP 4
Machine operators, hospitality staff, assistants, labourers and related workers

- Drivers, mobile plant, production/processing machinery and other machinery operators
- Hospitality staff (hotel service supervisor, helper, salon assistant, animal receptionist, waiter, bar attendant, kitchenhand, attendant) porter, housekeeper)
- Office (typist, work processing/data entry/ business machine operator, receptionist, office assistant
- Sales (sales assistant, motor vehicle/caravan/ parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker)
- Assistant/aide (trades' assistant, school) teacher's aide, dental assistant, veterinary nurse, nursing assistant museum/gallery attendant, usher/ home helper, salon assistant, animal attendant)
- Labourers and related workers
- Defence Forces ranks below Senior NCO not included above
- Agriculture, horticulture, forestry, fishing, mining worker (farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, green keeper gardener, tree surgeon, forestry/ logging worker, miner, seafarer/fishing hand)
- Other worker (labourer, factory hand, storeman , guard cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)

GROUP 3
Tradesmen/women, clerks and skilled office, sales and service staff

- Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group
- Clerks (bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/ audit clerk, payroll clerk, recording/registry/ filing clerk, betting clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk
- Skilled office, sales and service staff
- Office (secretary, personal assistant, desktop publishing operator, switchboard operator)
- Sales (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)
- Service (aged/disabled/refuge/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

GROUP 2
Other business managers, arts/media/ sportspersons and associate professionals

- Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business
- Specialist manager (finance/engineering/ production/personnel/industrial relations/ sales/marketing)
- Financial services manager (bank branch manager, finance/investment/insurance broker, credit/loans officer)
- Retail sales/services manager (shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency)
- Arts/media/sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official)
- Associate professionals generally have diploma/technical qualifications and support managers and professionals
- Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/ associate professional
- Business/administration (recruitment/employment/industrial relations/ training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager)
- Defence Forces senior Non-Commissioned Officer

GROUP 1
Senior management in large business organisation, government administration and defence, and qualified professionals

- Senior executive/manager/department head in industry, commerce, media or other large organisation
- Public service manager (section head or above), regional director, health/education/ police/fire services administrator
- Other administrator (school principal, faculty head/dean, library/museum/gallery director, research facility director)
- Defence Forces Commissioned Officer
- Business (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)
- Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others
- Health, Education. Law, Social Welfare, Engineering, Science, Computing professional
- Air/sea transport (aircraft/ship's captain/officer/ pilot, fight officer, flying instructor, air traffic controller)

Other Parent Details

Contact details for a parent not living with this student*

*If applicable, copies of any relevant family law or other court orders must be provided.

Name & Contact Details

Title (eg. Mr/Mrs/Ms/Dr)

Family Name

Given Name/s

Relationship to student

Home Telephone No.

Mobile No.

Postal address for correspondence

Family email address

Other Children Enrolled in Catholic Schools / Siblings at Home

Please list below **in order of birth** all children in the family who are attending school in the school year that enrolment is to commence, including the child for whom this application is being made. This information is required to provide applicable sibling discounts for children at Catholic schools in accordance with our policy.

	Given Names	Family Name	School Year	School Attending
Child 1				
Child 2				
Child 3				
Child 4				
Child 5				

In Case Of Emergency

Health Fund Information *(if applicable)*

Ambulance Cover Information *(if applicable)*

Emergency Contacts

Please nominate a person who may be contacted in the event of an emergency, if parents cannot be contacted. Ideally, the contact person should be someone who lives in the neighbourhood of the school. Please ensure that you have discussed with the people listed on this page their willingness to be emergency

Emergency Contact 1- Name	Contact Number	Relationship to student
Emergency Contact 2- Name	Contact Number	Relationship to student
Emergency Contact 3- Name	Contact Number	Relationship to student

School Fees

School Fee Agreement

I agree to pay the child's school fees

☐ YES ☐ NO

Name of person paying fees

Date of Birth for person paying fees

Method of payment

Driver's Licence No. of person paying fees

Signature of person paying fees

Family Billing Details

School accounts to be sent to:

Name

Email

Residential Address

Media and Communications Consent Form

Catholic Schools Office *Diocese of Armidale*

STUDENT PERMISSION FORM

The Catholic Schools Office, Diocese of Armidale and its schools carry out ongoing marketing and communication activities to maintain a positive profile in their local communities.
These initiatives usually involve images of students, families and individuals being utilised in all forms of media – print, electronic, online and social media . Common methods of publication have included brochures, newsletters, newspaper, radio and television advertisements, promotional DVDs, web sites and educational training (photographs and/or footage). Some promotional images may also be used on the Catholic Schools Office and/or individual schools social media pages including Facebook and Twitter.

To comply with our organisation's privacy obligations and in keeping with applicable legislation, it is a requirement that consent be given for such activities by either the individual (if over 18 years) or by a parent/guardian (if under 18 years).

Consent will be sought from the parent, guardian or individual (if over 18 years of age) by asking them to complete and sign this form. The consent form will be retained by the Catholic Schools Office or the individual school, depending on the purpose. NB: This consent, once given, will be amended or revoked only upon receipt of correspondence from the parent/guardian or individual (if over 18 years).

I authorise Catholic Schools Office, Armidale and/or its approved education partners to take and use any photographs, video or sound recording of me/the student and any reproductions or adaptations of the material, either in full or part, in conjunction with any wording or drawings, in any Catholic Schools Office, Armidale publication, production and presentation. This includes use on the internet and social media platforms such as Facebook and Twitter.

I acknowledge that I/the student has no rights in the material in any Catholic Schools Office, Armidale publication, production or presentation which includes the material.

Full Name of Parent/Guardian:…….

Signed:……..Date:……

Phone: (B/H)……..Mobile:…….

Email:…….

On behalf of (please tick)
☐ Myself (if 18 years or over)
☐ The following individual/s under 18 years of age:

Name of student: ……..

DOB:……

Name of School:……

What is this consent for?
This Consent Form authorises the Catholic Schools Office, Diocese of Armidale to use the Individual's copyright material, image and recording. The consent covers the entire or partial use of the Individual's copyright material, image, and recording in conjunction with other words and images.

What is an image or recording?
In this Consent Form, an image or recording includes photographs, videos, films, or sound recordings of the individual.

STANDARD COLLECTION NOTICE

Catholic Schools Office *Diocese of Armidale*

1. The School and the Diocese both independently and through its Schools collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil's enrolment at the School. The primary purpose of collecting this information is to enable the School to provide schooling for your son/daughter.

2. Some of the information we collect is to satisfy the School's legal obligations, particularly to enable the Schoolto discharge its duty of care.

3. Certain laws governing or relating to the operation of schools require that certain information is collected. These include Public Health and Child Protection laws.

4. Health information about pupils is sensitive information* within the terms of the National Privacy Principles under the Privacy Act. We may ask you to provide medical reports about pupils from time to time.

5. The School contracts with Centacare New England North West to provide counselling services for pupils. The Principal may require the Counsellor to inform him or her or other teachers of any issues the Counsellor believes may be necessary for the school to know for the well-being or development of the pupil who is counselled or other pupils at the school.

6. The School from time to time discloses personal and sensitive information to others for administrative and educational purposes- it will only be used for the following purposes:
   - General student administration relating to the education and welfare of the student
   - Communication with students and parents or carers
   - To ensure the health, safety and welfare of students, staff and visitors to the school
   - State and National reporting purposes
   - For any other purpose required by law.

7. The school's email service provider stores and processes emails outside Australia.

8. If we do not obtain the information referred to above we may not be able to enrol or continue the enrolment of your son/daughter.

9. Personal information collected from pupils is regularly disclosed to their parents or guardians. On occasions information such as academic and sporting achievements, pupil activities and other news is published in School newsletters, magazines and on our website.

10. Parents may seek access to personal information collected about them and their son/daughter by contacting the School Principal. Pupils may also seek access to personal information about them. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the School's duty of care to the pupil, or where pupils have provided information in confidence.

11. As you may know the School from time to time engages in fund raising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the School's fundraising activities solely for that purpose. We will not disclose your personal information to third parties for their own marketing purposes without your consent.

12. If you provide the School with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the School and why, that they can access that information if they wish and that the School does not usually disclose the information to third parties

**Sensitive information is described in the Guidelines to the National Privacy Principles as information or opinion about an individual's racial or ethnic origin, political opinions, membership of a political association, religious beliefs or affiliations, philosophical beliefs, membership of a professional or trade association, membership of a trade union, sexual preferences or practices, criminal record or health information about an individual.*

AGREEMENT

Catholic Schools Office *Diocese of Armidale*

Application for enrolment of your child means that you are choosing a Catholic education for your child. It implies a commitment to support the faith practice and aims of the school and a willingness to cooperate in their implementation. Specifically it means:

- Religious Education is a core subject
- Practice of the Catholic Faith and Parish involvement are emphasised
- Academic excellence and the acquisition of skills are developed within a Catholic framework
- Participation in academic and spiritual life of the school

Your child is expected to adhere to the school's standards for:

- Behaviour, dress and self-discipline
- Application to course work and study
- Participation in school activities
- Respect for people and property
- Observance of school regulations
- Participation in faith practice and worship

Parents are expected to participate in the total life of the school through events such as Parent/Teacher nights.

1. I/We agree to support school policies in relation to program of studies, sport, pastoral care, school uniform, discipline and the general operation of the school.
2. If this enrolment application is successfull/we agree to honour the financial commitments required by the school as per the Schedule of Fees and Charges.
3. I/We understand that if this application is successful the information that 1/we have provided must be kept up to date throughout the period of enrolment, e.g. change of address, court orders, medical/specialist reports.
4. If this enrolment is accepted 1/we agree to support our child's participation in the religious life of the school (e.g. school liturgies, retreat programs).
5. I / we agree to support the School's Information & Communication Technology policies, which includes but is not limited to, regulations around your child's use of the internet. ☐ NO ☐ YES
6. If, in time of emergencies, accidents or serious illness, 1/we cannot be contacted I/we give permission for the Principal (or their representative) to seek medical attention for my child as required. This may include transportation to the nearest hospital or doctor by ambulance or private vehicle. ☐ NO ☐ YES
7. I/We give permission for my/our Secondary child to refer themselves to in-school counselling services. (For students enrolling in Secondary school). ☐ NO ☐ YES

I/We have read all of the information in the enrolment package and understand the policies that we will need to abide by should this enrolment application be successful. 1/We have read the Standard Collection Notice about the collection and management of the personal information contained in this form. I/We understand that if any misleading information has been provided, or any omission of significant, relevant information made in this application for enrolment, acceptance will not be granted, or if discovered after acceptance the enrolment may be withdrawn.

Signature Father / Carer

Date:

Signature Mother / Carer

Date:

Parent/Carer Declaration

In dealing with this application, it may be necessary for the school to look at documents held by previous schools, health care professionals or other government agencies. This information will be collected, used and stored consistent with the *Privacy and Persona/Information Protection Act 1998* and *Health Records and Information Privacy Act 2002*. The cooperation of the applicant in accessing such information, while not always necessary, is appreciated and will speed up the assessment of the application.

ACKNOWLEDGEMENT

I acknowledge that the Catholic Schools Office, Diocese of Armidale may seek and gain access to relevant information about this student related to one or more of the questions in this application that is held by previous schools, health care professionals or other government agencies.

I understand that the school may approach these bodies directly. The information they request may include information related to any of the questions I have answered in this application.

DECLARATION OF ACCURACY

I declare that the information provided in this 'Application to Enrol' is, to the best of my knowledge and belief, accurate and complete. I recognise that, should statements in this application later prove to be false or misleading, any decision made as a result of this application may be withdrawn.

Signature of Parent/Carer

Signature of second applicant *(if applicable)*

Print name

Print name

Date

Date

PRINCIPAL'S CERTIFICATION

Special Circumstances and Student History assessed? ☐ Yes ☐ No

Risk Assessment required? ☐ Yes ☐ No

Risk Assessment conducted? ☐ Yes ☐ No If yes- date: _____

Risk Management Plan and Resources in place? ☐ Yes ☐ No If yes- date: _____

On the basis of the information provided on this form and gained from the required assessments,

I accept ☐ or ☐ **decline** this application to enrol.

Signature of Principal

Print name

Date

OFFICE USE ONLY

Office use only
Date of enrolment at this school

_____
Day/month/year

Current scholastic year in which the student is enrolled (K-12) _____

Roll Class (e.g. 3SMITH, 9R2) _____

House Group _____

Student's residency status
What is the student's residency status?

☐ Australian Citizen ☐ New Zealand Citizen

☐ Norfolk Islander

☐ Permanent resident ☐ Temporary visa holder

If born overseas, what date did the student arrive in Australia?

_____
Day/month/year

If the student is a permanent or temporary visa holder please provide the following information:
Current visa class:

For principal visa holders write **P** in the following box, for subordinate visa holders write **S**: ☐

Current visa sub-class ☐☐☐

Visa expiry date ☐☐ ☐☐ ☐☐
Day Month Year

Is the student an international full fee-paying student?
☐ Yes ☐ No

Authority to Enrol (ATE) expiry date

_____ Day /month/year

Students not born in Australia
Does the student need to be assessed for English as a Second Language (ESL) support?

☐ Yes ☐ No

Is the student receiving ESL support?

☐ Yes ☐ No

If Yes, what ESL phase is the student?

☐ (N, 1,2,3,T)

The original documents listed below must be sighted and photocopied, All students:

Birth Certificate or identity documents ☐ Yes ☐ No

In addition
(for students who are not permanent residents)

Passport or travel documentation no. _____

Country of issue _____

Current visa and sub-class (if applicable) _____

Previous visas and sub-class (if applicable) _____

In addition (for temporary visa holders) Authority to enroll _____

Sacramental Certificates ☐ Yes ☐ No

Reports from previous schools ☐ Yes ☐ No

Other issues
Any family law, AVOs or other relevant court order (if applicable)

☐ Yes ☐ No

_____
Day /month/year

For parent not living with student
To receive academic reports and newsletters?

☐ Yes ☐ No

Immunisation certificate/history statement sighted and copied ☐ Yes ☐ No

☐ Chicken Pox
☐ Polio
☐ Diphtheria
☐ Tetanus Other (details)
☐ Whooping Cough
☐ Measles
☐ Mumps
☐ Rubella
☐ Other (details) _____