

# Enrolment Application



Saint David's  
PARISH SCHOOL

Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Beginning Term: \_\_\_\_\_ Beginning Year: \_\_\_\_\_

Year Level: \_\_\_\_\_

This is an application form only and does not guarantee that a place will be offered to your child.

Please complete this form and return it along with the \$50 (GST incl.) Application Fee.



**OFFICE USE ONLY**Birth Certificate Sited ☐ YesBaptism Certificate Sited ☐ Yes ☐ N/A

Application Fee Paid: / /

Receipt Number:

Acknowledgement: / /

Interviewed: / /

Offer sent: / /

Offer accepted: / /

Acceptance Fee Paid: / /

Receipt Number:

Notice of Acceptance: / /

Bright Stars Letter: / /

**STUDENT DETAILS**

Family Name:

Given Name(s):

Date of Birth:

Gender: ☐ Male ☐ Female ☐ Unspecified

Address:

Postcode:

Main Language:

Main Language Spoken at Home:

Is English an additional language for your child?

☐ Yes☐ No

Is your child of Aboriginal or Torres Strait Islander Origin?

No ☐Yes, Aboriginal ☐  
Yes, Torres Strait Islander ☐  
Yes, Both ☐

Country of Birth:

Nationality:

Arrival date in Australia, if born overseas:

Residential Status: ☐ Citizen ☐ Permanent ☐ Temporary

Visa (if not Australian citizen):

- Visa Type:
- Visa Number:
- Date Granted: / / Expiry Date: / /

Year first enrolled in a school in Australia:

|  |  |                     |              |
|--|--|---------------------|--------------|
| Current School:  |  | Current Year Level: |              |
| Previous Schools and Pre-schools<br>(include Kindergarten up to present time) <i>(Attach separate sheet for more, if required)</i> |  |                     |              |
| 1  |  | From    /    /      | To    /    / |
| 2  |  | From    /    /      | To    /    / |
| 3  |  | From    /    /      | To    /    / |
| 4  |  | From    /    /      | To    /    / |

|              |        |      |                            |        |      |
|--------------|--------|------|----------------------------|--------|------|
| Religion:    |        |      | Present Parish of Worship: |        |      |
| Sacraments   | Parish | Date | Sacraments                 | Parish | Date |
| Baptism      |        |      | Reconciliation             |        |      |
| Confirmation |        |      | Eucharist                  |        |      |

| FAMILY DETAILS | Parent 1/Guardian 1 | Parent 2/Guardian 2 |
|----------------|---------------------|---------------------|
|----------------|---------------------|---------------------|

|   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
|---|---|----------------------------|----------------------------|----------------------------|----------------------------|---|----------------------------|----------------------------|----------------------------|----------------------------|
| Title   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Family Name   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Given Name  |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Date of Birth   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Occupation  |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Occupation Group (refer list, pg. 7)  | <input type="checkbox"/> 1  | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 | <input type="checkbox"/> 1  | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |
| Employer  |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| If not employed, do you receive a government benefit?   | <input type="checkbox"/> Yes <input type="checkbox"/> No  |                            |                            |                            |                            | <input type="checkbox"/> Yes <input type="checkbox"/> No  |                            |                            |                            |                            |
| Contact Details   | H   |                            | W                          |                            |                            | H   |                            | W                          |                            |                            |
| Mobile:   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Email:  |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Residential Address   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
|   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Postal Address (if different)   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
|   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Relationship to child<br><i>(Father/Mother/Foster/Grandparent etc.)</i>   |   |                            |                            |                            |                            |   |                            |                            |                            |                            |
| Child Resides with  | Yes, full time <input type="checkbox"/><br>Yes, part time <input type="checkbox"/><br>No <input type="checkbox"/> |                            |                            |                            |                            | Yes, full time <input type="checkbox"/><br>Yes, part time <input type="checkbox"/><br>No <input type="checkbox"/> |                            |                            |                            |                            |
| Family Court or other relevant Court Order/Intervention Order or Parenting Plan<br><i>(if yes, please provide a copy of the order/plan to the school)</i> |   |                            |                            |                            |                            | <input type="checkbox"/> Yes <input type="checkbox"/> No  |                            |                            |                            |                            |

|  |   |   |
|--|---|---|
| Religion                                   |   |   |
| Main Language Spoken at Home               |   |   |
| Country of Birth                           |   |   |
| Cultural Background                        |   |   |
| Arrival date in Australia (if applicable)  |   |   |
| Residential Statues                        | Australian citizen <input type="checkbox"/><br>Permanent resident <input type="checkbox"/><br>Temporary resident <input type="checkbox"/>   | Australian citizen <input type="checkbox"/><br>Permanent resident <input type="checkbox"/><br>Temporary resident <input type="checkbox"/>   |
| Visa (if not an Australian Citizen)        | Visa Type:<br>Visa Number:<br>Date Granted:    /    /<br>Expiry Date:     /    /  | Visa Type:<br>Visa Number:<br>Date Granted:    /    /<br>Expiry Date:     /    /  |
| Highest School Year Completed (circle one) | Year    12    11    10    9 or below  | Year    12    11    10    9 or below  |
| Non-school (tertiary) qualifications       | <input type="checkbox"/> Bachelor's Degree or above<br><input type="checkbox"/> Advanced Diploma / Diploma<br><input type="checkbox"/> Certificate I to IV (incl. trade certificate)<br><input type="checkbox"/> No non-school qualifications | <input type="checkbox"/> Bachelor's Degree or above<br><input type="checkbox"/> Advanced Diploma / Diploma<br><input type="checkbox"/> Certificate I to IV (incl. trade certificate)<br><input type="checkbox"/> No non-school qualifications |
| Are you an old scholar?                    | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Years Attended: _____ to _____  | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Years Attended: _____ to _____  |

|  |     |                              |                  |                             |  |
|--|-----|------------------------------|------------------|-----------------------------|--|
| Have you previously had a student at this school?<br>If yes, please indicate the names and dates attended. |     | <input type="checkbox"/> Yes |                  | <input type="checkbox"/> No |  |
| Other children in the family:  |     |                              |                  |                             |  |
| Name   | M/F | Date of Birth                | School attending | Year Level                  |  |
|  |     |                              |                  |                             |  |
|  |     |                              |                  |                             |  |
|  |     |                              |                  |                             |  |

## ADDITIONAL NEEDS AND CONSIDERATIONS FOR STUDENTS

The following questions are to assist us in facilitating the smooth transition of students into the school setting.

|   |                              |                             |
|---|------------------------------|-----------------------------|
| a) Does your child have any learning needs?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b) Has your child attended any specialised agencies, special schools, units or centres?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c) Has your child been assessed by a specialist service (e.g. speech pathologist, occupational therapist, psychiatrist, psychologist, audiologist, optometrist or other specialist clinic/service)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d) Does your child have any special needs or considerations? (e.g. disabilities, allergies, restrictions on physical activity)?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e) Does your child require any special provisions to be made by the school? (e.g. medication, disabled access)?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f) Does your child have any infectious disease?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| g) Has your child ever been suspended from school, expelled or refused admission to another school?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| h) Does your child have any special achievements or talents?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| i) Is there any other information that the school should be aware of in order to meet your child's educational needs?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered **Yes** to any of the above questions, please provide details, using attachments if necessary.

## OTHER INFORMATION

### Please submit the following documents (as applicable) with this Application for Enrolment

☐ A copy of the Birth Certificate (or extract) (or current passport)

☐ Baptismal Certificate

☐ Latest school report from previous school

☐ Copies any national test results (e.g. NAPLAN), where available

☐ Any Court Order, Parenting Plan or related information affecting your child

☐ Documentation relating to special needs (any reports, action plans, assessments etc.)

☐ A copy of VISA details (if your child is not an Australian citizen)

Please explain your reasons for choosing Saint David's Parish School for your child's education:

|  |
|--|
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|  |
|  |
|  |

## RELEASE OF INFORMATION AND PRIVACY INFORMATION

1. The School 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. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the School to provide schooling to pupils enrolled at the school, exercise its duty of care, and perform necessary associated administrative activities, which will enable pupils to take part in all the activities of the School.
2. Some of the information we collect is to satisfy the School's legal obligations, particularly to enable the School to discharge its duty of care.
3. Laws governing or relating to the operation of a school require certain information to be collected and disclosed. These include relevant Education Acts, and Public Health [and Child Protection]\* laws.
4. Health information about pupils is sensitive information within the terms of the Australian Privacy Principles (**APPs**) under the *Privacy Act 1988*. We may ask you to provide medical reports about pupils from time to time.
5. The School may disclose personal and sensitive information for educational, administrative and support purposes. This may include to: other schools and teachers at those schools; government departments (including for policy and funding purposes); the Catholic Education Office, the South Australian Commission for Catholic Schools, the School's local parish and diocese, other related church agencies/entities, and Schools within other Dioceses; medical practitioners; people providing educational, support and health services to the School, including specialist visiting teachers, sports coaches, volunteers, and counsellors; providers of learning and assessment tools; assessment and educational authorities, including the Australian Curriculum, Assessment and Reporting Authority (ACARA) and NAPLAN Test Administration Authorities (who will disclose it to the entity that manages the online platform for NAPLAN); people providing administrative and financial services to the School; anyone you authorise the School to disclose information to; and anyone to whom the School is required or authorised to disclose the information to by law, including child protection laws.
6. From time to time, the school may be required to communicate to parents that personal information has been requested by the Commonwealth and State Governments and the Catholic Education Office.
7. The school may disclose personal information (your name and address) to another Catholic school who may wish to provide you with information to assist you in choosing another Catholic school.
8. Personal information collected from pupils is regularly disclosed to their parents or guardians.
9. The School may use online or 'cloud' service providers to store personal information and to provide services to the School that involve the use of personal information, such as services relating to email, instant messaging and education and assessment applications. Some limited personal information may also be provided to these service providers to enable them to authenticate users that access their services. This personal information may reside on a cloud service provider's servers which may be situated outside Australia. Further information about the School's use of on online or 'cloud' service providers is contained in the School's Privacy Statement.
10. The School's Privacy Statement, accessible on the School's website, sets out how parents or pupils may seek access to and correction of their personal information which the School has collected and holds. However, access may be refused in certain circumstances such as 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. Any refusal will be notified in writing with reasons if appropriate.
11. The School's Privacy Statement also sets out how parents and pupils can make a complaint about a breach of the APPs and how the complaint will be handled.
12. The School may engage in fundraising 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.
13. On occasions information such as academic and sporting achievements, pupil activities and similar news is published in School newsletters and magazines, on our intranet and on our website. This may include photographs and videos of pupil activities such as sporting events, school camps and school excursions. The School will obtain permissions from the pupil's parent or guardian (and from the student if appropriate) if we would like to include such photographs or videos [or other identifying material] in our promotional material or otherwise make this material available to the public such as on the internet.
14. We may include pupils' and pupils' parents' contact details in a class list and School directory.
15. 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.

## PARENT/GUARDIAN DECLARATION

1. In applying to enrol my /our child at this school, I/we accept that s/he will be educated in the Catholic faith within a Christian educational environment.
2. I/we accept that support of school staff and cooperation concerning school activities is essential.
3. I/we accept that I/we will abide by school policies as amended from time to time.
4. I/we accept that participation in camps is compulsory and that membership in school sporting teams takes priority over competing sporting interests.
5. I/we accept that the school reserves the right to suspend or expel a student for serious or continued breaches of school rules, regulations and/or policies, including conduct that brings into disrepute the good name and reputation of the School.
6. I/we accept the standards the school sets regarding grooming, uniform and personal presentation.
7. I/we accept responsibility for the payment of tuition fees and other costs associated with the education of my/our child as determined and amended from time to time by the school (except where exemptions/remissions have been sought and granted).
8. I/we accept that the school does not accept liability for damage or loss of any personal possessions of students and that insurance for my/our child's personal possessions is my/our responsibility.
9. I/we consent to the school obtaining information about my/our child, where necessary, from previous schools or agencies/professionals.
10. I/we consent to my/our basic family details (name, email address and telephone number) being revealed to: State Dental Clinic and to other Catholic schools who may wish to provide me/us with information to assist in choosing another Catholic school.
11. I/we consent to my/our personal details (contact name, telephone number, address) being disclosed for pastoral support and Thanksgiving campaigns to the Parish in which I/we reside.
12. I/we declare that all of the information provided in this application is, to the best of my/our knowledge, true and accurate.
13. I/we acknowledge and, if my/our application is successful, accept and agree to all of the above terms and conditions (clauses 1-12)

Parent/Guardian 1 (signature): \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian 2 (signature): \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE:** In due course, you will be contacted regarding your application for enrolment. If you accept an offer of enrolment, the terms and conditions detailed in this *Application for Enrolment* are incorporated in the Enrolment Contract.

## LIST OF PARENTAL OCCUPATION GROUPS

### Group 1: Senior management in large business organisation, government administration and defense, 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)
- **Defense Forces** Commissioned Officer
- **Professionals** generally have a degree of 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
- **Business** [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]
- **Air/sea transport** [aircraft/ship's captain/officer/pilot, fight officer, flying instructor, air traffic controller]

### 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]
- **Defense Forces** senior Non-Commissioned Officer

### 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/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]

### 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, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]
- **Office assistants, sales assistants and other assistants**
- **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**
- **Defense 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, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]
- **Other worker** [labourer, factory hand, store man, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant]

### Group 8: Currently not in paid work

- If the person is not currently in paid work but has had a job in the past 12 months 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, tick Group "8" in the appropriate box.