**ENROLMENT PACK APPLICATION AND ENROLMENT FORM**

**Parent information about applying to enrol in a Western Australian public school**

Thank you for your interest in applying to enrol your child at Champion Bay Senior High School. We will notify you of the results of your application as soon as possible. The information you have provided will be used by the school once eligibility is confirmed.

Documentary evidence, including court orders relating to your child, may be required to support information supplied. Principals may consult with the Education Regional Office where sufficient evidence has not been supplied. All official records must be in the child’s **legal** name. The use of a preferred name may be possible for informal communications.

It is highly recommended not to purchase items such as uniforms until you receive confirmation of enrolment.

The Department’s *Enrolment Policy* can be found at <http://www.det.wa.edu.au/policies>.

The enrolment pack contains consent forms for parents to sign related to media and viewing consent, network and internet access, local and aquatic excursions and Connect for parents.

**Who can enrol a child?**

Enrolment applications can be lodged by:

1. Parents, defined in the *School Education Act 1999* as persons **who at law have responsibility for the long term care, welfare and development of the child; or the day-to-day care, welfare and development of the child**;
2. Independent minors; and
3. Persons aged 18 years or older who may apply on their own behalf.

The school may require documentary evidence in support of the application. A person with proper authority to make the application must provide the required information. The school is not required to determine whether another parent or person with authority concurs with the lodging of the application or the information included in it.

If there is a dispute between parents or authorised persons about the enrolment or one party requests or has enrolled the child at a different school, then the schools involved should endeavour to maintain the original enrolment and continuity of the child’s schooling unless it is clearly not in the child’s educational interests to do so, is not possible, or has been determined otherwise by a court. For further information see Frequently Asked Questions (FAQs) in the Enrolment Policy, under Related Information.

**Eligibility to enrol in a particular school**

The only guaranteed place in a public school is if you live in the local-intake area of that school. Enrolment in a particularprimary school does not guarantee a place at our school.

Permanent Australian residents and those children holding an approved visa subclass are entitled to be enrolled, although not necessarily at a particular school unless the school has a ‘local-intake area’ (refer section **Applications to local-intake schools (compulsory years of schooling** below). Those overseas students who do not have an entitlement to enrol in a public school may be enrolled on a full fee paying basis under conditions which the school will outline.

In establishing a usual place of residence, the *Residential Parks (Long-stay Tenants) Act 2006* recognises any agreement conferring the right to occupy premises for a fixed term of three months or longer. Short term residential arrangements can be accepted in cases such as recent arrival in the State, residence in boarding houses and caravan parks, or homelessness.

Schools may not enrol children who are:

1. receiving home education; or
2. applying to enrol at another school; or

The principal may consider whether a child may attend for a short period (s 75(2) *School Education Act 1999*) and may consult with the school in which the student is already enrolled before a decision about attending is made. Attendance for more than four weeks requires that the student relinquish enrolment at the school in which the student is already enrolled.

**Enrolment in Local Intake School Area**

Champion Bay Senior High School is a local-intake school and we have a designated geographical area from which our enrolments are taken. A map of this area is available should you need to know these boundaries. An eligible child whose place of residence is within that area is guaranteed enrolment in the compulsory years of schooling (subject to residential qualifications i.e. provision of required documentation).

Further information is available from the ***Enrolment* policy/Enrolment Procedures/Local-intake area schools**, or contact our school or the Coordinator Regional Operations at the local Education Regional Office.

**Applications to local-intake schools (compulsory years of schooling)**

Where the school has a local-intake area, children whose usual place of residence is not in the local-intake area are accommodated where possible. If the school has further capacity to accommodate children from outside the local-intake area, after making provision for local-intake area needs, the following selection criteria are to be applied in considering applications for enrolment:

|  |  |  |
| --- | --- | --- |
| **First Priority** | **Second Priority** | **Third Priority** |
| Child qualifying for an approved specialist program for that year. | Child who has a sibling also enrolled at the school in the current year, (other than siblings enrolled in specialist programs), and who lives nearest the school. | Child who does not have a sibling enrolled at the school in the current year, or who has a sibling enrolled in a specialist program, and who lives nearest the school. |

**Applications for the first year of secondary school**

Parents are encouraged to apply by the closing date in the year prior to attending, even if the child is of compulsory school age and is guaranteed a place in the local school. This assists our school planning.

For children of compulsory school age wishing to enrol at a school that is not the local school, the closing date for applications for the first round of offers is the first Friday in Term 3 of the previous year.

Applications may still be made after this date and will be considered on a case by case basis, in accordance with the Department of Education’s *Enrolment Policy* which can be found at <http://www.det.wa.edu.au/policies>.

**Information to be provided**

The Enrolment Form is intended for children not enrolled at Champion Bay Senior High School in the previous year.

The information you provide enables the Department to communicate with you about important matters, to care for your child in emergencies, to plan for special needs and to meet State and National reporting requirements.

The school needs to be advised of any court orders or any changes in relation to the child’s name, usual place of residence and/or name and usual place of residence of parent/s.

You will be asked to show your child’s Birth Certificate (original or certified copy) or birth extract or equivalent identity documents; your child’s ‘Immunisation Certificate'; usual place of residence: for example utilities account, lease agreement of at least three months, proof of ownership of property, driver’s licence, statutory declaration, copies of any Family Court or other court orders, and visa details (if applicable) - Principals may accept a maximum of **3 documents** as evidence of residential address.

If your Enrolment Application is not accepted, you will be advised in writing within three weeks of the advertised closing date for applications.

**Applications to transfer from another school**

Decisions about the enrolment of your child into a specific year of schooling and/or the educational program will be based on age eligibility, as well as the child's level of previous schooling, achievement levels and identified needs. If you are applying for the following year, you will be advised in writing about your application within three weeks of the closing date for applications (that is after the end of the first week of Term 3). If you are applying for the current year, you will be advised in writing as soon as possible.

Once the application has been accepted, you will also need to supply evidence of your child’s progress from the previous school. This can be in the form of reports, records or samples of work.

If your child has gained enrolment from outside the local-intake area into a specialist program, any siblings cannot be guaranteed enrolment to the same school.

**Transport**

In most cases, transporting your child to school is the parents’ responsibility. Enquiries regarding school bus services should be directed either to the school where the application for enrolment is being submitted, or to the Public Transport Authority email enquire@pta.wa.gov.au or telephone 136213. Some special programs include transfer arrangements.

**Disclosure of information**

***For parents of students with disability***

In order to provide an appropriate education program the school may require specific information relating to your child’s disability and personal needs to enable the school to make any necessary teaching and learning adjustments. The school may also use the information you provide when applying for specialist resources or services and/or supplementary funding to support your child’s education.

***Suspensions and exclusions***

Information on any suspensions and exclusions needs to be provided to the school at the time of applying to enrol. This information will help the school to provide your child with any support that may be required.

Children currently under suspension from a public school cannot be enrolled at another public school until the suspension period expires.

Children who have previously been suspended or excluded from a public school may be required to enter into a behaviour agreement with the school if enrolment is accepted.

**Student Health Care**

The Department’s [S](http://det.wa.edu.au/policies/detcms/policy-planning-and-accountability/policies-framework/policies/student-health-care.en?oid=au.edu.wa.det.cms.contenttypes.Policy-id-8962874" \t "_blank)*[tudent Health Care](http://det.wa.edu.au/policies/detcms/policy-planning-and-accountability/policies-framework/policies/student-health-care.en?oid=au.edu.wa.det.cms.contenttypes.Policy-id-8962874" \t "_blank)* [policy](http://det.wa.edu.au/policies/detcms/policy-planning-and-accountability/policies-framework/policies/student-health-care.en?oid=au.edu.wa.det.cms.contenttypes.Policy-id-8962874" \t "_blank) clarifies the actions to be undertaken by public schools to manage student health care needs. All students require an up to date Student Health Care Summary which is available from the school. For students identified as having health conditions requiring support at school, additional form/s will be provided by the school.

**Confidentiality**

All information provided on this form will be treated confidentially. Section 242 of the *School Education Act 1999* precludes this information from being used for any purpose other than: to determine whether your application for enrolment can be accepted; to assist the school with addressing any needs for your child if enrolment is accepted; and to comply with legal requirements or ministerial directions.

**Disputes**

Should you disagree with a school’s advice regarding your application for enrolment please contact the principal in the first instance. The Coordinator Regional Operations at your Education Regional Office can provide advice if a concern has not been resolved. Information about formal disputes can be obtained from the school, the Education Regional Office or the Department’s *Enrolment Policy* which can be found at <http://www.det.wa.edu.au/policies>.

**Information about your occupation and education See Attachment 1**

The National Goals for Schooling in the 21st Century state that ‘the learning outcomes of educationally disadvantaged students ‘…… should…..’ improve and, over time, match those of other students’.All parents across Australia, no matter which school their child attends, are being asked to provide information about their family background to promote an education system which is fair for all Australian students regardless of their background. Providing this information is voluntary but your information will help the Department of Education to ensure that all students are being well served by our public schools.

**ATTACHMENT 1**

**Parent Occupation Groups**

*Relates to questions in Parent 1 and Parent 2 sections of the Application for Enrolment form*

| **GROUP 1** | **GROUP 2** | **GROUP 3** | **GROUP 4** |
| --- | --- | --- | --- |
| **Senior management in large business organisation government administration & defence, and qualified professionals** | **Other business managers, arts/media/sportspersons and associate professionals** | **Tradesmen/women, clerks and skilled office, sales and service staff** | **Machine operators, hospitality staff, assistants, labourers and related workers** |
| **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.**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.**Business** [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer].**Air/sea transport** [aircraft/ships captain/officer/pilot, flight officer, flying instructor, air traffic controller]. | **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. | **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]. | **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, word 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 in other groups.**Agriculture, horticulture, forestry, fishing, mining worker** [farm overseer, shearer, wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, 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]. |

**These categories have been determined nationally and are designed as broad occupational groupings.**

**All Australian states and territories use the same categories**

**OFFICE USE ONLY**

Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Level: \_\_\_ Year of enrolment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_ Birth certificate/Passport/Travel document sighted (Circle).

Student resides within local intake area **□** YES **□** NO

Visa sighted: **□** YES **□** NO

Family Court Order/s: **□** YES **□** NO

# **Application: accepted / not accepted**

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**Champion Bay Senior High School**

**ENROLMENT PACK APPLICATION AND FORM**

**This form is intended for children not enrolled at the school in the previous year and is to be completed in English**.

Please read the accompanying *Parent information about Enrolment in a Western Australian public school* before lodging the Enrolment Pack Form with the school.

**DOCUMENTS TO BE PROVIDED**

***Checklist:***

Please place an **X or ✔** in the box to indicate each document attached (or sighted) to this application form.

*\*Note: If you are typing the information into this PDF form, click the check box to mark the box. To uncheck the box press undo (control Z or Command Z) or click the box until blue dots appear and then press delete on the keyboard.*

1. Birth Certificate (original or certified copy) or extract or other identity documents [ ]

if applicable. (Principals will refer to guidance 3.5.1 of the Enrolment Procedures where evidence is not provided).

2. Immunisation Records [ ]

3. Copies of Family Court or any other court orders (if applicable) [ ]

4. Proof of residential address (minimum of 3 recent documents) [ ]

* current rates notice if owner occupied OR copy of rental agreement showing minimum 3 months tenancy (from a registered Real Estate Agent) AND [ ]
* any **three** of the following:
* power utilities account [ ]
* gas utilities account [ ]
* removalist account [ ]
* water rates account [ ]
* telephone account (not mobile phone account) [ ]
* driver’s licence [ ]
* statutory declaration (interview required with Associate Principal) [ ]

5. Information relating to suspensions or exclusions [ ]

6. Information relating to disability or diagnosed learning difficulty report [ ]

7. Completed health care form [ ]

8. Copy of latest school report (if enrolling from a non-government school) [ ]

9. Copy of latest NAPLAN report (if enrolling from a non-government school) [ ]

*If your child was not born in Australia, you must provide evidence of:*

1. Date of entry into Australia [ ]

2. Passport or travel documents [ ]

3. Current visa subclass and previous visa subclass (if applicable) [ ]

*If your child is a temporary visa holder, you must also provide:*

Confirmation of enrolment or evidence of any permission to transfer [ ]

provided by [Education and Training International (ETI)](http://www.eti.wa.edu.au/) email:study.eti@dtwd.wa.gov.au

*(if holding an International full fee student visa, sub class 571)*;

**or**

Evidence of the visa for which the student has applied if the student holds [ ]

a bridging visa

**STUDENT DETAILS**

Note: If you are typing into this from click at the beginning on the line and a text box will appear.

Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enrolling into Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal Surname (on birth certificate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Surname (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1st Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2nd Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3rd Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred 1st Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_\_ Sex: [ ]  Male [ ]  Female

Residential Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone (Home): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student’s Mobile (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Car Registration (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are there any brothers or sisters attending this school? [ ]  YES [ ] NO

Full Name/s of brothers and sisters attending this school:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Current School or last enrolled \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Level \_\_\_\_\_\_\_

Reason for change of school (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your child currently under suspension from a school? [ ]  YES [ ]  NO

Has your child ever been excluded from a school? [ ]  YES [ ]  NO

If previously enrolled in Home Education, specify the Education Region: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Movement reason (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONFIDENTIAL**

Is the student subject to any court orders\access restriction in respect of their care, welfare and development? [ ]  YES [ ]  NO

If YES, please specify nature of order and attach supporting documentation.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is this student in the care of the Department for Child Protection and Family Support’s (CPFS) Director General?

[ ]  YES [ ]  NO

|  |  |
| --- | --- |
| CPFS Case Manager Name |  |
| CPFS District |  |
| Contact phone number |  |

**PARENT/GUARDIAN DETAILS**

**Student lives with:**

|  |  |
| --- | --- |
| Both Parents [ ] Parent/Guardian/Carer 1 [ ] Parent/Guardian/Carer 2 [ ]  | Independent minor [ ] (Reg3. School Education Regulations 2000) |

|  |  |  |
| --- | --- | --- |
|  | **Parent/Guardian/Carer 1 Details** | **Parent/Guardian/Carer 2 Details** |
| Title |  |  |
| First Name |  |  |
| Second Name |  |  |
| Surname |  |  |
| Relationship to the student |  |  |
| Day to day care of the student Long term care of student | [ ]  [ ]  | [ ]  [ ]  |
| Residential Address |  |  |
| Postal Address |  |  |
| Mobile Number |  |  |
| Telephone (Home) |  |  |
| Telephone (Work) |  |  |
| Occupation/Workplace location |  |  |
| Do you speak a language other than English at home? | [ ]  English only[ ]  YES, other - please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | [ ]  English only[ ]  YES, other - please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Fees and charges billing:Who is responsible | [ ]  YES [ ]  NO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | [ ]  YES [ ]  NO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| What is the highest year of primary or secondary school you have completed?*(If you did not attend school, mark ‘Year 9 or equivalent or below’)* | [ ]  Year 12 or equivalent[ ]  Year 11 or equivalent[ ]  Year 10 or equivalent[ ]  Year 9 or equivalent or below | [ ]  Year 12 or equivalent[ ]  Year 11 or equivalent[ ]  Year 10 or equivalent[ ]  Year 9 or equivalent or below |
| What is the level of the highest qualification you have completed? | [ ]  Bachelor degree or above[ ]  Advanced diploma/Diploma[ ]  Certificate I to IV (including trade certificate)[ ]  No non-school qualification | [ ]  Bachelor degree or above[ ]  Advanced diploma/Diploma[ ]  Certificate I to IV (including trade certificate)[ ]  No non-school qualification |
| What is your occupation group? *(Insert 1, 2, 3 or 4.*  |  |  |

*Please select the appropriate parental occupation group from the list provided in ATTACHMENT 1. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. However, if you have not been in paid work in the last 12 months, enter ‘8’ above).*

**Parent/Guardian/Carer 1 Email** (print full email address in the spaces below including any full stops or if typing enter text into the field below)

**\_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_**

**Parent/Guardian/Carer 2 Email** (print full email address in the spaces below including any full stops or if typing enter text into the field below)

**\_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_**

**Emergency Contact**

Place a number in the box for the order in which the following people should be contacted in an emergency.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Parent/Guardian/Carer 1 |  | Parent/Guardian/Carer 2 |  | Other Contacts |  |

**OTHER CONTACT(S) DETAILS**

|  |  |  |
| --- | --- | --- |
|  | **Other 1** | **Other 2** |
| Title |  |  |
| First Name |  |  |
| Second Name |  |  |
| Surname |  |  |
| Relationship to the student |  |  |
| Residential Address |  |  |
| Postal Address  |  |  |
| Mobile Number |  |  |
| Telephone (Home) |  |  |

**Please advise the school if there are any other contacts you would like recorded.**

**STUDENT DETAILS – ADDITIONAL INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Nationality (optional) |  | Country of Birth |  |
| Student’s First Language |  | Aboriginal | [ ]  YES [ ]  NO |
| Does the student mainly speak English at home? | [ ]  YES [ ]  NO | Torres Strait Islander (TSI) | [ ]  YES [ ]  NO |
| Does the student speak a language other than English at home? | [ ]  YES [ ]  NO | Both Aboriginal and TSI | [ ]  YES [ ]  NO |
| If yes: Main Language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Permanent Resident | [ ]  YES [ ]  NO |
| Australian Citizenship  | [ ]  YES [ ]  NO | Temporary Resident | [ ]  YES [ ]  NO |
|  | Date entered Australia |  / / |
| International Fee Paying (if known) [ ]  YES [ ]  NO | Visa Sub Class Number |  |
|  | Visa Grant Number |  |
| Religion |  | Visa Sub-class No Expiry Date | / / |

Does the student receive any of the following allowances?

[ ]  Secondary Assistance [ ]  Youth Allowance

[ ]  Assistance for Isolated Children (AIC) [ ]  Abstudy

**STUDENT HEALTH CARE SUMMARY**

**Medical Details**

Doctor / Practice Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dentist / Practice Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Permission to call Doctor** [ ]  YES [ ]  NO **Permission to administer first aid** [ ]  YES [ ]  NO

Do you have ambulance cover? [ ]  YES [ ]  NO

**If there is a medical emergency parents or guardians are expected to meet the cost of the ambulance.**

List any essential information that could affect your child in an emergency eg allergy to penicillin.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health Care Card (if applicable): [ ] YES [ ]  NO. If Yes, provide no.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date: \_\_\_\_\_\_\_\_

Medicare No: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_\_\_\_\_ Valid to: \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_

**Immunisation**

**Immunisation History Statement provided** [ ]  YES [ ]  NO

**Administration of Medication**

**Written authorisation must be provided for staff to administer any form of medication. Medication is to be provided by parents.**

**Informed Consent**

**Your child’s health care information will be shared with staff on a need to know basis unless otherwise stated.**

**Do you give permission for the school to share your child’s health care information?** [ ] YES [ ]  NO.

**Health Conditions**

**Does your child have one or more health condition(s) that will require support from school staff?** [ ] YES [ ]  NO.

If YES, please specify and complete this section.

|  |  |  |
| --- | --- | --- |
| Tick |  | Is specific training required to support child at school |
| [ ]  | Severe Allergy – Anaphylaxis  | YES [ ]  | NO [ ]  |
| [ ]  | Minor and Moderate Allergy (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | YES [ ]  | NO [ ]  |
| [ ]  | Diabetes | YES [ ]  | NO [ ]  |
| [ ]  | Mental health or behavioural (eg depression, anxiety) | YES [ ]  | NO [ ]  |
| [ ]  | Seizure Disorder (eg epilepsy) | YES [ ]  | NO [ ]  |
| [ ]  | Intensive Health Care Need (eg tube feeding) | YES [ ]  | NO [ ]  |
| [ ]  | Asthma | YES [ ]  | NO [ ]  |
| [ ]  | Vision condition | YES [ ]  | NO [ ]  |
| [ ]  | Hearing condition (eg otitis media) | YES [ ]  | NO [ ]  |
| [ ]  | Diagnosed migraine/headaches | YES [ ]  | NO [ ]  |
| [ ]  | ADD/ADHD | YES [ ]  | NO [ ]  |
| [ ]  | Activity of daily living | YES [ ]  | NO [ ]  |
| [ ]  | Other: (please specify)  | YES [ ]  | NO [ ]  |
|  |  |  |  |

**Has your Medical Practitioner provided a health care plan to assist managing the condition?** [ ] YES [ ] NO

**Type of training required \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Diagnosed Learning Difficulty/Disability**

Does the student have a disability, diagnosed learning difficulty? [ ]  YES [ ]  NO

If YES, please specify.

**Supporting documents must be provided** on enrolment for school records

[ ]  Physical Disability [ ]  Deaf or Hard of Hearing

[ ]  Intellectual Disability [ ]  Vision Impairment

[ ]  Autism Spectrum Disorder [ ]  Global Developmental Delay (prior to age 6)

[ ]  Severe Mental Disorder [ ]  Dyscalculia

[ ]  ADD/AD [ ]  Specific Speech Language Impairment

[ ]  Dyslexia [ ]  Central Auditory Processing Disorder

[ ]  Dyspraxia [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Dysgraphia [ ]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does your child have a Medic Alert bracelet or pendant?** [ ]  NO [ ]  YES **Provide details if yes**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACADEMIC EXTENSION PROGRAM**

**Do you wish to apply for our academic extension program?** [ ]  YES [ ]  NO

Language studied in primary school \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student to complete**

I would like to be considered for the school-based extension program because:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**MUSIC**

**Do you wish to apply for our music program?** [ ]  YES [ ]  NO

[ ]  YES My Year 6 child is a **current** Instrumental School of Music student

Instrument currently being studied \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  YES My child currently takes private lessons in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  YES I wish my child to sit for the **aptitude test/audition/interview** to begin learning an instrument

**Student to complete**

I would like to begin learning an instrument because:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**CONSENT FORMS**

**Champion Bay Senior High School** aims to offer your child the widest range of learning opportunities and celebrate learning whenever possible. This often requires some form of parental consent. This form asks you to consent (or otherwise) to your child’s participation/use/ access to several aspects of the school program. At all times we make the very best efforts to exercise exemplary standards in respect of duty of care.

|  |
| --- |
| **MEDIA CONSENT**Children’s images and/or their work are often published to recognise excellence or effort and may appear in newspapers, on the internet, in newsletters or on film or video. Their names may also be included but no contact details are provided. Work/images captured by the school will be kept for no longer than is necessary for the purposes outlined above and will be stored and disposed of securely.[ ]  Yes, I give consent to my child to have his/her image and/or work published as described above.[ ]  No, I do not give consent.In addition, see Appendix F of the [Student’s online policy.](http://www.det.wa.edu.au/policies/detcms/policy-planning-and-accountability/policies-framework/policies/students-online.en?oid=au.edu.wa.det.cms.contenttypes.Policy-id-3784406) |

|  |
| --- |
| **VIEWING CONSENT**Children often watch videos/DVDs/television documentaries as part of their learning. Almost always these are ‘G’ rated and don’t require consent. Very occasionally something with a ‘PG’ rating is appropriate for which we would need parental permission.[ ]  Yes, I consent to my child viewing items with a ‘PG’ rating if deemed suitable by the teacher and school administration.[ ]  No, I do not give consent. |

|  |
| --- |
| **LOCAL EXCURSIONS**Children occasionally walk within the local area for minor excursions under the supervision of the teacher and attend activities in local parks, nature reserves, another school, city council library or shopping centre. On all occasions, parents will be notified of the local excursion.[ ]  Yes, I consent to my child participating in teacher supervised local excursions which may involve short walks to and from the school.[ ]  No, I do not give consent. |

**REGULAR IN-CLASS EXCURSION AQUATICS PROGRAM 2019**

Your child may undertake Aquatics as part of the Physical and Health Education programme during Term 1, weeks 4–10 inclusive and Term 4, 2019, weeks 8-10 inclusive, including the annual Swimming Carnival.

The nature of this subject involves frequent excursions to the Town Beach, new Marina or Aquatic Centre, during class time. The school is required to inform you of this and **seek your written permission**. Rather than issue separate notifications each week, this form is designed to allow you to give your permission for an extended time period. The excursion will involve travel on **charter bus and** **will involve aquatic activities**.

**INSURANCE: Parents should be aware that they are responsible for insuring their children for personal accidents and loss of damage of personal property while at school or during an excursion. Education Department Public Liability Insurance covers only those student injuries that are a direct result of teacher negligence.**

[ ]  Yes, I consent to my child participating in the excursions involved in the **Aquatics** course during Term 1, weeks 4 - 10 inclusive (including the Swimming Carnival) and Term 4, weeks 8 - 10 2019 inclusive.

[ ]  No, I do not give consent.

[ ]  Where it is not practical to communicate with me, I authorise the teacher in charge of the excursion to consent to my child receiving such medical attention as may be considered necessary. I am aware that Education Department insurance does not cover accidents through misadventure, nor loss or damage of personal belongings.

**SWIMMING ABILITY** (tick one): Poor [ ]  Average [ ]  Good [ ]

Swimming Stage (if known) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.

**STUDENT COMPUTER NETWORK AGREEMENT**

Without signed parent\guardian consent, your child will not be allowed to access the student computer network

[ ]  I approve of my child using the Champion Bay Senior High School Student Computer Network under the above conditions and acknowledge the importance of abiding by the agreement.

[ ]  My child has read and understood the Student Computer Network Agreement

[ ]  I understand there will be consequences that may affect my child’s learning if they do not adhere to the agreement.

Name of person signing the consent form:

Title: \_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STUDENT REPORTS and PROGRESS STATEMENT**

The Progress Statement (Term One), Semester One and Semester Student Reports can be sent electronically for your child to the email address provided with this enrolment.

[ ]  Yes, through Connect.

[ ]  Yes, via email.

[ ]  No, I still want the paper copy of reports posted to me.

**CONNECT CONDITIONS OF USE FOR PARENTS**

1. Only parents or responsible persons as defined in the School Education Act 1999 and verified by the school will be given access to Connect.
2. Any person/s signing up for the service understands his/her responsibility for keeping the service access details (username and password) confidential.
3. The Department of Education does not accept responsibility for any event arising from unauthorised access or use of Connect.
4. Parents agree to use Connect in accordance with Department of Education’s policies regarding Appropriate Use of Online Services. These policies can be accessed from the Connect Sign In screen. Parents are required to accept that they have read and understood these policies before access to Connect is provided.

**Limits of the Service**

The Department of Education provides Connect as an online service for teachers, students, parents and Department staff. Connect is a communication channel that schools may use to communicate with parents/guardians on matters impacting student education. The Department of Education does not undertake to provide all student-related information via Connect.

**When using Connect, I agree that:**

1. The information contained in Connect is personal and private information.
2. The parent username and password is only shared between the child’s legal parents or guardians.
3. I will not interfere with network security, the data of another user, or attempt to log into the network with a username and/or password of another user.
4. If I become aware of unauthorised access to my parent account I will immediately inform the school.
5. I consent to the logging, monitoring, auditing and disclosure of my use of Connect by the Department of Education.
6. Any breach of these conditions for which I am responsible may result in my access to Connect being suspended or revoked.
7. I agree to use Connect in accordance with Department of Education’s policies regarding *Appropriate Use of Online Services*. These policies can be accessed from the Connect Login screen.

Parent Signature: …………………………………………………….

Email (print full email address clearly in the boxes below (including any full stops)

**\_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_**

Please indicate relationship to the student (e.g. parent/guardian/responsible person): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CODE OF CONDUCT AGREEMENT STUDENTS AND PARENTS/CAREGIVERS**

***Students agree to:***

* Fulfil school-wide expectations and observe designated rights and responsibilities.
	+ Take responsibility for own actions.
	+ Follow agreed classroom rules.
	+ Follow reasonable teacher requests or directions.
	+ Complete set homework as defined in our Student Diary.
	+ Be prepared to discuss unacceptable behaviour and accept consequences of unacceptable behaviour.
	+ Follow strategies put in place by our staff to attempt to modify unacceptable behaviour.
	+ If suspended: catch up on work missed during suspension.
	+ Wear the school uniform at all times.
	+ I have read and will comply with all aspects of the Mobile Phone and Electronic Devices Policy.

Student name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Parents/Caregivers agree to:***

* Support teachers and students to fulfil school-wide expectations – reinforce behaviour that is being sought by our school community.
* Provide explanation(s) for student absence from school.
* Provide basic stationery/equipment for their child.
* Check Student Diaries, regularly.
* Be aware of Behaviour Management Plan located in the Information Handbook in this Enrolment pack.
* Respond to school’s concerns by making contact with the relevant staff member.
* Support CBSHS in its attempt to modify student’s unacceptable behaviour (if relevant).
* Attend meetings/interviews when requested by staff.
* Ensure that student completes work given whilst on suspension.
* Comply with all aspects of the school uniform policy.
	+ I have read and will comply with all aspects of the Mobile Phone and Electronic Devices Policy.
	+ Signing this sheet ***acknowledges your agreement to the conditions outlined in the Champion Bay Senior High School Behaviour Management Plan***

Parent/Caregiver name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Caregiver signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION AND SIGNATURE**

The information and statements provided in this application for enrolment are true and accurate

Name of person enrolling student:

Title: \_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Second Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to the student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Independent minors and those aged 18 years or older may sign on their own behalf)*

*NOTE: In the event that statements made in this application later prove to be false or misleading, a decision on this application may be reversed. Information supplied may need to be checked by the school.*

**Parent/Responsible Person Consent Form**

**Consent to Transfer Student Information from Previous School**

|  |  |  |  |
| --- | --- | --- | --- |
| I  |       | give [ ]  | do not give [ ]  |
| Consent for information about my child |
|       | DOB |      /     /      |
| to be transferred from his/her previous school |  |  |
| (name and address) |       |
|  |       |
|  |       |
| to his/her new school | Champion Bay Senior High School90 Highbury StreetRANGEWAY WA 6530 |
| I understand that:* The principal (or delegate) of my new school may request and/or receive information from my child’s previous school verbally and/or in writing.
* It may include all details contained on the Student Information Transfer Form.
* Additional information may be required by my child’s new school. This information will only relate to information on the flagged field on the Student Information Transfer Form.
* The Principal (or delegate) of my child’s new school may contact the Principal (or delegate) of my child’s previous school both verbally and/or in writing.
* I can request to see the information that is received from my child’s previous school.
 |
| I understand that my child’s new school will take all reasonable steps to protect the personal information about me from misuse and loss, and from unauthorised access, modification or disclosure.  |
|  |
|       | Date      /     /      |
| Signature of parent/responsible person |  |
| ‘New School’ is defined as either the school at which the student is enrolled OR the school at which the student is seeking enrolment. The consent process should be initiated at the point of application for enrolment so that information is received before the enrolment process is finalised. |

**PRINCIPAL’S APPROVAL**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal’s signature

Approved / Not approved

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

|  |
| --- |
| **OFFICE USE ONLY** |
| Student’s official documentation all sighted (Date): \_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  YES [ ]  NO[ ]  Birth certificate [ ]  Passport [ ]  Travel document/sStudent’s Residency status: [ ]  Local [ ]  Permanent Resident[ ]  Disability [ ]  Diagnosed learning difficulty[ ]  Overseas Student: If yes, International fee paying: ……………….. [ ]  YES [ ]  NOEntry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Previous School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Records received: [ ]  YES [ ]  NOPublications/Internet Permission Form completed: [ ]  YES [ ]  NOContributions and Charges Billing: [ ]  PG1: \_\_\_\_% [ ]  PG2: \_\_\_\_% [ ]  Other: \_\_\_\_\_%Official documentation: [ ]  PG1: \_\_\_\_ [ ]  PG2: \_\_\_\_ [ ]  Other: \_\_\_\_\_\_\_(including reports, to be sent to)Immunisation records provided: [ ]  YES [ ]  NOForm/Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ House Faction: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Approved by Principal: [ ]  NO [ ]  YES on (Date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_Entered on School Information system by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on (Date): \_\_\_\_\_\_\_\_\_Student leaves school: (Date) \_\_\_\_\_\_\_\_\_\_\_\_\_ Date Transfer Note Sent: \_\_\_\_\_\_\_\_\_Destination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Records received from transferring school: [ ]  NO [ ]  YES on (Date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_***RETENTION AND TRANSFER OF STUDENT ENROLMENT RECORDS:***1. ***Enrolment Applications (successful) – The School to retain for 5 years after last action and then destroy.***
2. ***Enrolment Applications (unsuccessful) –The School to retain for 2 years after last action and then destroy.***
3. ***Enrolment Register (Register of Admissions/Enrolment Cards used prior to the School Information System) – The School to retain for 7 years after last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.***
4. ***Enrolment Records (managed in the School Information System) – The School must print out annually for all school leavers, the School must retain for 7 years after the last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.***
5. ***Student files – The School must negotiate with the previous school at the local level the transfer within 5 school days.***
 |