

# Esperance Anglican Community School

# APPLICATION FOR ENROLMENT

### 1. STUDENT INFORMATION

AATION				
			· ·	
	Date of Birth		Religion (If none, please indicate.)	
			Year Level (e.g. Year 8)	Year (e.g. 2015)
Proposed En	try to Esperance Angli	can Community School		
	Student Nationality		First Language	
copy of student's birth certifica	ate (or provide the original to	o the school for copying).		
olease provide details cy status:	Date Entered Australia		Visa Sub-Class	
to accept students who do not hav	e permanent residency or an ap	propriate visa status.		
0	- C	No	Yes, Aboriginal	Yes, Torres Strait Islander
		Year Level/s		
		Year Level/s		
		Doctor's Name		
			Postcode	
	Medicare Number	(Used only in emergencies.)		
	Diptheria/ Polio/	Tetanus (DPT/ADT)	Yes / No	/ /
Has the student been immunised against the following?  (Please circle and provide relevant dates.)  Please supply a copy of student's immunisation records to the school.		Hepatitis B		/ /
		Hib		/ /
		Mumps/ Measles/ Rubella (MMR)		/ /
	<u>-</u>			
ke medication? (Please ci	rcle.)	Please include relevant deta	ils which might affect the stud	lent's wellbeing at school
Yes / No	Ritalin	Yes / No	Prosac	Yes / No
ıffer any allergic reactio	ons? (Please circle.)	Yes / No	(If yes, please provid	e relevant details.)
ıffer from or ever had a	ny of the following?		0 ,,	· ·
Yes / No	Glandular Fever	Yes / No	Pneumonia	Yes / No
Yes / No	HIV	Yes / No	Speech Impairment	Yes / No
Yes / No	Hearing Impairment	Yes / No	Visual Impairment	Yes / No
Yes / No	Heart Condition	Yes / No	Requires use of wheelchair	Yes / No
165 / 110				
Yes / No	Hepatitis B or C	Yes / No	Oth on (DI 'C')	
	Hepatitis B or C	Yes / No Yes / No	Other(Please specify.)	
	n immunised against levant dates.) tudent's immunisation  ke medication? (Please ci  Yes / No  Yes / No  Yes / No  Yes / No	Proposed Entry to Esperance Angli  Student Nationality  Student Nationality  Student Nationality  Student Sperance Angli  Student Nationality  Student Nationality  Student Nationality  Date Entered Australia  Sto accept students who do not have permanent residency or an appropriate of poth Aboriginal and Torres Strait Islander origin?  Medicare Number  Diptheria/ Polio/  In immunised against  Hep  Australia  Medicare Number  Diptheria/ Polio/  Mumps/ Measle  Mumps/ Measle  ke medication? (Please circle.)  Yes / No Ritalin  Affer any allergic reactions? (Please circle.)  The proposed Entry to Esperance Angli  Student Nationality  Medicare Number  Diptheria/ Polio/  Mumps/ Measle  Mumps/ Measle  Mumps/ Measle  Mumps/ Measle  Mumps/ Measle  Medicare Number  Diptheria/ Polio/  Mumps/ Measle  Mu	First Name Date of Birth  Proposed Entry to Esperance Anglican Community School  Student Nationality  Student's birth certificate (or provide the original to the school for copying).  Date Entered Australia  Australia  Australia  First Name  Australia  Australia  First Name  No  Please include relevant deta  Yes / No  Hearing Impairment  Proposed Entry to Esperance Anglican Community School  Student Nationality  Student's birth certificate (or provide the original to the school for copying).  Date Entered Australia  Australia  Please include visa status.  No  Please include relevant deta  Strait Islander origin, please  Poctor's Name  Medicare Number (Used only in emergencies.)  Diptheria/ Polio/ Tetanus (DPT/ADT)  Hepatitis B  Hib  Mumps/Measles/ Rubella (MMR)  Mumps/Measles only? Yes / No  Please include relevant deta  (Ify  Yes / No  Glandular Fever  Yes / No  Yes / No  HiV  Yes / No  Yes / No  Hearing Impairment  Yes / No	First Name Date of Birth Pate of Birth Proposed Entry to Esperance Anglican Community School  Student Nationality Student Nationality Personal Entry to Esperance Anglican Community School  Student Nationality Student's birth certificate for provide the original to the school for copyings.  Pease provide details Pate Entered Australia Pate Entered Australia Poactor's students who do not have permanent residency or an appropriate visa status.  Original or Torres Strait Islander origin? If with Abrigand and Torres Strait Islander origin, please  Year Level/s  Year Level/s  Pease Level/s  Postcode  Medicare Number (Used only in energencies.)  Diptheria/ Polic/ Telanus (DPT/ADT) Yes / No Hepatitis B Yes / No Mumps/Measles/Rubella (MMR) Mumps/Measles only? Yes / No  Ke medication? (Please circle.)  Please include relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant details which might affect the students of the provide relevant de

## Application for Enrolment

Specific Requirements (Please circle.)			(If yes, please p	ovide brief details.)	
Are there any medical/physical needs that the student requires to operate effectively in the				he school?	Yes / No
Are there any individual educational needs that the student requires to operate effectively			y in the school?	Yes / No	
Has the student eve	Has the student ever received Guidance or Counselling?				Yes / No
Details:					
	udents.	e school's greatest conc	eerns. Additional famil	y and personal details	s will assist the school
Child lives with: (P	lease circle.)			Please speci	fy relationship
Both Parents	Mother Only	Father Only	Other:		
Access Restrictions	Access Restrictions: (e.g. Sole custody, mutual agreement, court orders, etc. Ple		ase provide details and written	validation where applicable.)	
Details:					
Full details of: (Please circle)	Father	Legal Guardian 1	Other: (Please specify legal relationship)		
Surname			Given name/s		
Home Address				Postcode	
Postal Address				Postcode	
Home Phone			Mobile		
Home Email			Religion (If no	ne, please indicate.)	
Occupation			Employer		
Work Address				Postcode	
Work Phone			Work Email		
			1		
Full details of: (Please circle)	Mother	Legal Guardian 2	Other: (Please specify legal relationship)		
Surname			Given name/s		
Home Address				Postcode	

Mobile

Employer

Work Email

Postal Address

Home Phone

Home Email

Occupation

Work Address

Work Phone

Postcode

Religion (If none, please indicate.)

Postcode

### 3. OTHER CHILDREN IN THE FAMILY

Please list other brothers/sisters including those already enrolled at Esperance Anglican Community School.

 $(Please\ note,\ a\ separate\ application\ form\ must\ be\ submitted\ for\ each\ student.)$ 

Surname (where different)	Given Name/s	Date of Birth	Current School (if applicable)	Current Year Level (if applicable)

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4 - Francisco - Fra				(Diiiiiiii	
4. FINANCIAL INFO		lataile for the nercent	rosponsible for parir		vide relevant details.)
Father/Guardian 1:	e, address and contact d		s as per section 2?	Responsible for	
Tuther Guurutun 1.			lease provide details below)	% of	fees
Mother/Guardian 2	2:		s as per section 2?	Responsible for% of	fees
Other: (Please specify relationship	)			Responsible for% of	fees
Surname			Given Name/s		
Billing Address				Postcode	
Contact Phone			Mobile		
Contact Email				1	
5. EMERGENCY CO	NTACT PARTICULARS	Please provide details of a	two contacts for use in an emerg	ency situation where we can not c	ontact parent/guardian/s.
Contact 1					
Surname			Given name/s		
Relationship (e.g. Frid	end, Neighbour, Grandparent)				
Home Address				Postcode	
Home Phone			Work Phone		
Mobile					
Contact 2					
Surname			Given name/s		
Relationship (e.g. Fri	end, Neighbour, Grandparent)				
Home Address				Postcode	
Home Phone			Work Phone		
Mobile					

### Application for Enrolment

### PRIVACY STATEMENT

The Privacy Act 1988 as amended by the Privacy Amendment (Private Sector) Act 2000 requires that the following be brought to your attention before completing this form - please read this information. A full copy of the school's Privacy Policy is available upon request. Completion and lodgement of this form is taken as your acknowledgement and acceptance of the information provided.

- 1. Esperance Anglican Community School collects personal information, including sensitive information about students and parents or guardians, before and during the course of a student'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 School to 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. The School, from time to time, discloses personal and sensitive information to others, in respect to students attending the School, for administrative and educational purposes. This may include to other schools, government departments, medical practitioners and people providing services to the School, including specialist visiting teachers and sports coaches.

### **ENROLMENT POLICY**

Application for enrolment is open to all families and children who agree to accept the School's rules and expectations. Preference in enrolment will be given to children from families who are actively involved in the Anglican Church or in other Christian churches and to the brothers and sisters of children who have already accepted places in this School.

### PARENT/GUARDIAN PARTICIPATION

Parental assistance across a wide range of activities is essential to the proper functioning of Esperance Anglican Community School. Assistance will be needed in a variety of areas including canteen, working bees and fundraising. The talents of parents will be utilised as far as possible in whatever areas they are offered. While acknowledging that parents are in various situations with regard to the time they can make available to the School, a positive commitment to provide some assistance is required if an offered place is accepted.

### NON REFUNDABLE REGISTRATION FEE

A non-refundable registration fee of \$55.00, which includes GST, must accompany this form.

Acceptance of an Application for Enrolment by The Anglican Schools Commission (Inc) and the School does not constitute an enrolment or an agreement to offer a place to a student. Offers of places will be made subject to an interview and the provision of such information as the School requires.

BOTH PARENTS/GUARDIANS MUST SIGN THIS APPLICATION FOR ENROLMENT.

### I/We hereby apply for the above-named child to be enrolled at Esperance Anglican Community School.

I/We have read and retained a copy of the Enrolment Handbook and Tuition Fees and Financial Guide and have agreed to support and cooperate with the School Authorities in all matters contained therein. I/We agree to support the policies and rules of the School and I/we undertake that ten (10) school weeks' notice in writing will be given before the removal of a student and acknowledge that one (1) term's tuition fees may be charged in lieu of notice.

I/We understand that all parents are required to pay in advance at the time of making application for enrolment a Registration Fee of \$55 per student (including GST), which is not refundable. I/We agree to be solely/jointly responsible for the payment of all fees and charges. The parent/guardian also agrees to pay the school's costs and disbursements incurred in recovering monies owed by the parent/guardian, including debt recovery agency fees and legal costs on an indemnity basis.

I/We agree that in signing this form we grant permission for Esperance Anglican Community School and The Anglican Schools Commission (Inc.) to publish the student's image, work and/or name in school community publications and/or publications aimed at the wider community both in print and electronic form.

Signature of Father/Guardian 1	Signature of Mother/Guardian 2
Date	Date

### Application for Enrolment

### MCEETYA REPORTING REQUIREMENTS

(For Australian Government data collection only – not for school use.)

In addition to the previous information, the Commonwealth Department of Department of Education, Employment and Workplace Relations (DEEWR) requires the completion of the following data.

### Does the student or their Father/Guardian 1 or their Mother/Guardian 2 speak a language other than English at home?

If yes, please indicate language below. If more than one language, please indicate the one that is spoken most often. If not, please go to next question.

Language	Student	Father/Guardian 1	Mother/Guardian 2
English Only	Yes / No	Yes / No	Yes / No
Language other than English (Please specify.)			

### What is the highest year of primary or secondary schooling completed by the student's parent/guardians?

(Please mark one box ONLY in each column.)	Father/Guardian 1	Mother/Guardian 2
Year 12 or equivalent		
Year 11 or equivalent		
Year 10 or equivalent		
Year 9 or equivalent or below		

(Please mark one box ONLY in each column.)	Father/Guardian 1	Mother/Guardian 2
Bachelor Degree or above		
Advanced Diploma/Diploma		
Certificate I to IV (including trade certificate)		
No non-school qualification		

### Please select the appropriate parent/guardian occupation group from the categories listed on the following page.

If the person is not currently in paid work but has held a job in the last 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, enter the numeral '8' in the box.

(Please indicate the relevant occupational group number in each column.)	Father/Guardian 1	Mother/Guardian 2
Occupational Group Number		

# 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 organisations.

Public Service Manager (Section head or above), regional director, health/education/police/fire services administrator.

Other Administrators School Principal, faculty head/dean, library/museum/gallery director, research facility director.

**Defence Forces** Commissioned Officer.

**Professionals** generally have degree or higher qualification and experience in applying this knowledge to design, develop or operate complex systems; identify, treat or 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, flight officer, flying instructor, air traffic controller.

### GROUP 2 - OTHER BUSINESS MANAGERS, ARTS/, MEDIA/SPORTSPERSON 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/loan officer.

Retail sales/service 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-Commissional 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/registery filing clerk, betting clerk, stores/inventory, 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 4 - MACHINE OPERATORS, HOSPITALITY STAFF, ASSISTANTS, LABOURERS AND RELATED WORKERS

### Drivers, mobile plant, production/processing machinery and other machine 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 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, nurseryperson, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand.

Other worker labourer, factory hand, storeperson, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor.

If the person is not currently in paid work but has held a job in the last 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, enter the numeral '8' in the box.

### FOR SCHOOL OFFICE USE:

Surname		First Name		Second Name/s	
Student ID		Family ID		Date of Birth	
				Year Level (e.g. Year 8)	Year (e.g. 2009)
Proposed Entry to Esperance Anglican Community School					

Registration:					
Date Received	Amount	\$	Receipt Number		
Birth Certificate Received?	Immunisation Records Received?		Date Application Acknowledged		
Interview:					
Date	Time		Letter of Offer Date		
Enrolment:	Enrolment:				
Date Received	Amount	\$	Receipt Number		
Code of Conduct	Parent Agreement		Date Enrolment		
School Records:					
Date Future Students Updated	MCEETYA Entered		Staff Signature		



### ESPERANCE ANGLICAN COMMUNITY SCHOOL