

Application Fee: \$20.00  
Rct: .....  
Date:.....

# St. Mary's Catholic Primary School

Mary Street, BUNBURY 6230

PO Box 247, BUNBURY 6231 Ph: (08) 97267500 Fax: (08) 97913219



## Application for Enrolment Kindergarten - Year 6

**PLEASE COMPLETE ALL SECTIONS**

ENQ #

Office Use

### STUDENT INFORMATION

VISA #

Student Surname: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

First Name: \_\_\_\_\_ (M/F) Please attach copy of **Birth Certificate and Immunisation Certificate**  
(Please circle male or female)

Address: \_\_\_\_\_  
\_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_  
Aboriginal/Torres Strait Islander: \_\_\_\_\_  
Group of Origin :.....  Yes / No

Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_ Australian Permanent Resident:  Yes / No  
Number of years in Australia: \_\_\_\_\_

Nationality: \_\_\_\_\_ Language Spoken at Home: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Born Outside of Australia. Date of Arrival: \_\_\_\_\_

**SEEKING ENROLMENT IN:** Grade level: \_\_\_\_\_ In (month) \_\_\_\_\_ of (year e.g. 2014) \_\_\_\_\_

Name of last school attended: \_\_\_\_\_ Address: \_\_\_\_\_

Year Levels attended \_\_\_\_\_ School contact Phone No: \_\_\_\_\_

Religious Denomination of child: \_\_\_\_\_ Priest Reference Form

Please attach copy of Baptism Certificate

Baptism \_\_\_\_\_ Reconciliation \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation \_\_\_\_\_  
(date) (date) (date) (date)

### FAMILY INFORMATION

#### FEMALE PARENT OR GUARDIAN

#### MALE PARENT OR GUARDIAN

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

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

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

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

State: \_\_\_\_\_ Post Code: \_\_\_\_\_

State: \_\_\_\_\_ Post Code: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_

Parish Priest: \_\_\_\_\_

Parish Priest: \_\_\_\_\_

Parish attended: \_\_\_\_\_

Parish attended: \_\_\_\_\_

Suburb: \_\_\_\_\_

Suburb: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Numbers: \_\_\_\_\_

Work Numbers: \_\_\_\_\_

Home Number: \_\_\_\_\_

Home Number: \_\_\_\_\_

Mobile Number \_\_\_\_\_

Mobile Number: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

E-mail address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

### CUSTODY/GUARDIANSHIP (Complete If Applicable)

IF A SPLIT FAMILY: please give the name of person(s) with legal guardianship of the student: \_\_\_\_\_

Please attached a copy of any Parenting or Restraining Order currently operating.

Any other conditions enforced at law? \_\_\_\_\_

### DISCLOSURE

Do you agree that the information supplied on the Student Information and Family Information sections, can be provided to the relevant Parish Priest?  Yes / No

Vertical column of checkboxes for office use.

**IMAGE PERMISSION**

I/We, \_\_\_\_\_ DO / DO NOT give permission for my child's image to be used in the classroom, with classroom online applications and in St Mary's Catholic Primary School Newsletter which is also available online.

Signature of Parent (s)/Guardian(s): \_\_\_\_\_ Date: \_\_\_\_\_  
FEMALE PARENT OR GUARDIAN MALE PARENT OR GUARDIAN

**SIBLINGS CURRENTLY ATTENDING THIS OR OTHER SCHOOLS**

Name	Year Level	School
_____	_____	_____
_____	_____	_____

**SIBLINGS NOT CURRENTLY ATTENDING SCHOOL**

Name	Age	Date of Birth	Year of Kindy
_____	_____	_____	_____

**STUDENT'S INDIVIDUAL NEEDS**

The school *Education Act 1999* requires the provision of: "details of any condition of the enrollee that may call for special steps to be taken for the benefit or protection of the enrollee or other persons in the school" (16G)

**Medical/Health Care**

Asthma  Epilepsy  Diabetes  Other .....  
 (please tick if any of these apply to your child)

Allergies to: \_\_\_\_\_

Medication \_\_\_\_\_

Physical \_\_\_\_\_

Orthoses/Prostheses \_\_\_\_\_

Psychological/Cognitive \_\_\_\_\_

Sensory (eg Vision/Hearing) \_\_\_\_\_

Behavioural or Safety \_\_\_\_\_

Communication \_\_\_\_\_

Does your child require any medication or medical/health care services during school hours?  Yes/No

If so please provide full details, name, contact number and signed authorisation by the relevant practitioner on a separate sheet and attach.

**External Service Provision**

Does your child receive any services from an external agency, which may affect educational arrangements?  Yes/No

If so please detail name of Service Provider, contact number and details on a separate sheet and attach.

Does your child require special transport arrangements to and from school?  Yes/No

Does your child receive Respite Care on a regular basis?  Yes/No

Please detail on a separate sheet and attach.

**EMERGENCY CONTACT DETAILS (OTHER THAN A PARENT/GUARDIAN)**

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

**MEDICAL INFORMATION**

**IMMUNISATION RECORD**

**Office Use**

Measles Mumps Rubella (MMR) Dates given

MMR I .....

MMR II .....

Please attach copy of immunisation record.

If your child is not immunised because you have declined immunisation please tick this box

In the event of a measles outbreak, without immunisation details, your child may be excluded from school for a period of time.

Family Doctor/Medical Clinic: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

Dental Clinic: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

Medicare No: \_\_\_\_\_ Private Health Fund: \_\_\_\_\_ Blood Group: \_\_\_\_\_ (if known)

**MEDICAL EMERGENCY AUTHORISATION**

I authorise the School to seek medical/dental attention, call an ambulance or to hospitalise my son/daughter when considered necessary. I further authorise the School that if an emergency occurs requiring surgery, anaesthetic, oxygen, blood transfusion, medication and I am unable to be contacted within a reasonable time, the School has the authority to agree to medically recommended treatment by an accredited medical practitioner on my behalf.

Signature of Parent (s)/Guardian(s): \_\_\_\_\_ Date: \_\_\_\_\_  
FEMALE PARENT OR GUARDIAN MALE PARENT OR GUARDIAN

**AGREEMENT**

I/We understand and accept that the completion of this application/enrolment form does not guarantee an enrolment interview. Successful applicants will be determined in accordance with the school's enrolment criteria.

I/We understand and accept that attendance at an interview does not guarantee an enrolment offer being made.

I/We understand that enrolment of a student in one Catholic school does not guarantee the enrolment of that student in any other Catholic school.

I/We have completed this application form fully and to the best of my/our knowledge. Further, I/we acknowledge and accept that if we have withheld information relevant to the application/enrolment process, especially in relation to this student's individual needs, medical conditions, health care requirements and/or Parenting Orders, then the enrolment may be refused or terminated on this ground.

I/We agree to abide by the policies and directions of the school and the Catholic Education Commission of Western Australia as they are enacted from time to time.

I/We will abide by the policies and practices established and developed by the Principal and the School Board whilst their child/children are enrolled in St Mary's School.

I/We, as partners in the education of our child, have an obligation to communicate openly and positively, with the school. Discussing the progress of your child, attending parent information sessions, helping in the classroom, working on parent groups, talking to us when we get things wrong—and when we get things right, are all part of this process.

I/We agree that we have an obligation to be fully involved with the school and support the fundraising ventures of the Parents and Friends' (P & F) organisation. P & F funds provide the additional amenities necessary for your child's education and supplement what is provided by the School Board's budget.

I/We agree and accept that my / our child will participate in all required parts of the education program of the school, including the Religious Education Program.

Signature of Parent (s)/Guardian(s): \_\_\_\_\_ Date: \_\_\_\_\_  
FEMALE PARENT OR GUARDIAN MALE PARENT OR GUARDIAN

...../Continued over page

Vertical box on the right side of the page containing three checkboxes.

Person responsible for payment of fees: \_\_\_\_\_

Accounts to be addressed to:  
\_\_\_\_\_

I, the undersigned, as the person responsible for payment of fees, acknowledge that I have read the Fees and Charges information and accept responsibility for payment of accounts.

Signed: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

## PRIVACY POLICY

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. 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. Health information about pupils is sensitive information within the terms of the National Privacy Principles under the Privacy Act. We ask you to provide medical reports about pupils from time to time.
5. The School from time to time discloses personal and sensitive information to others for administrative and educational purposes. This includes to other schools, government departments, [Catholic Education Office, the Catholic Education Commission, your local diocese and the parish]\* medical practitioners, and people providing services to the School, including specialist visiting teachers, [sports] coaches and volunteers.
6. If we do not obtain the information referred to above we may not be able to enrol or continue the enrolment of your son/daughter.
7. Personal information collected from pupils is regularly disclosed to their parents or guardians. On occasions information, including photographic information, such as academic and sporting achievements, pupil activities and other news, is published in School newsletters, magazines [and on our website] and on occasion newspapers.
8. Parents may seek access to personal information collected about them and their son/daughter by contacting the School. Pupils may also seek access to personal information about themselves. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the School's duty of care to the pupil, or where pupils have provided information in confidence.
9. As you may know the School from time to time engages 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.
10. We may include your contact details in a class list and School directory. If you do not agree to this you must advise us now.
11. 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, and that the School does not usually disclose the information to third parties, so that they can access that information if they wish .  
\*If appropriate.
12. St Mary's Catholic Primary School will collect personal information about your family from time to time for the purpose of implementing the curriculum and discharging its legal and pastoral obligations towards you and your child. This information may be disclosed to third parties who assist the school in this purpose, including the Catholic Education Office and the parish priest. You may access this information at any time.

Signature of Parent(s) / Guardian(s):

\_\_\_\_\_ Date: \_\_\_\_\_  
FEMALE PARENT OR GUARDIAN

\_\_\_\_\_ Date: \_\_\_\_\_  
MALE PARENT OR GUARDIAN

OFFICE USE ONLY

Enrolment accepted: \_\_\_\_\_ Starting date: \_\_\_\_\_  
PRINCIPAL

## STUDENT MCEETYA DATA COLLECTION

1 Sex Male  [M]

Female  [F]

2 Is the student of Aboriginal or Torres Strait Islander origin?

No  [4]

Yes, Aboriginal  [1]

Yes, Torres Strait Islander  [2]

Yes, both Aboriginal and Torres Strait Islander  [3]

3 In which country was the student born?

Australia  [1101]

England  [2102]

New Zealand  [1201]

South Africa  [9225]

Malaysia  [5203]

Indonesia  [5202]

Singapore  [5205]

Scotland  [2105]

United States of America  [8104]

India  [7103]

Other—Please specify \_\_\_\_\_

**4 Does the student or their mother/guardian or their father/guardian speak a language other than English at home?**

(If more than one language, indicate the one that is spoken most often.)

	student	mother/ parent1/ guardian1	father/ parent2/ guardian2	
No, English only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[1201]
Yes, Italian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[2401]
Yes, Cantonese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[7101]
Yes, Vietnamese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[6302]
Yes, Mandarin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[7104]
Yes, Polish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[3602]
Yes, Macedonian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[3504]
Yes, Arabic (incl. Lebanese)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[4202]
Yes, Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[2303]
Yes, Indonesian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[6504]
Yes, Other - please specify _____				

**5(a) What is the highest year of primary school the parents/guardians have completed?**

(For persons who have never attended school, mark 'Year 9 or equivalent or below'.)

Mark one box only in each column

	mother/parent1/ guardian1	father/parent2/ guardian2	
Year 12 or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	[4]
Year 11 or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	[3]
Year 10 or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	[2]
Year 9 or equivalent or below	<input type="checkbox"/>	<input type="checkbox"/>	[1]

**5(b) What is the level of the *highest* qualification the parents/guardians have completed?**

Mark one box only in each column

	mother/parent1/ guardian1	father/parent2/ guardian2	
Bachelor degree or above	<input type="checkbox"/>	<input type="checkbox"/>	[7]
Advanced diploma/Diploma	<input type="checkbox"/>	<input type="checkbox"/>	[6]
Certificate I to IV (including trade certificate)	<input type="checkbox"/>	<input type="checkbox"/>	[5]
No non-school qualification	<input type="checkbox"/>	<input type="checkbox"/>	[8]

6(a) What is the occupation group of the mother/parent1/guardian1?

6(b) What is the occupation group of the father/parent2/guardian2?

Please select the appropriate parental occupation group from the attached list.

\* If the person is not currently in paid work but has had 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 '8' in the box above.

## List of Parental Occupation Groups (for question 6)

### Group 1:

#### **Senior management in large business organisation, government administration and defence, and qualified professionals**

**Senior executive/manager/department head** in industry, commerce, media or other large organisation.

**Public service manager** (Section head or above), regional director, health/education/police/fire services administrator

**Other administrator** [school principal, faculty head/dean, library/museum/gallery director, research facility director]

**Defence Forces** Commissioned Officer

**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/ship's captain/officer/pilot, flight 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]

**Defence 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, 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 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, stor eman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]

### Group 8:

**If person has not been in paid work in the last 12 months**