

ENROLMENT APPLICATION FORM

Information on this form is strictly confidential

ST JOHN'S PRIMARY SCHOOL
77 QUEENS PARADE
CLIFTON HILL, 3068
Ph: 9489.1346

OFFICE USE ONLY

Date Received: ___/___/___

Enrolment Date: ___/___/___

Start Date: ___/___/___

Child's First Name: _____ Surname: _____

PLEASE SUPPLY COPIES OF CERTIFICATES (where applicable)

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Birth | <input type="checkbox"/> Communion |
| <input type="checkbox"/> Baptism | <input type="checkbox"/> Confirmation |
| <input type="checkbox"/> Reconciliation | <input type="checkbox"/> Immunisation |

Special Needs Support Yes No ESL Yes No

STUDENT INFORMATION

SURNAME: _____

CHRISTIAN NAME/S: _____

PREFERRED NAME: _____

ADDRESS: _____

_____ POST Code: _____

Date of Birth: ___/___/___ Sex: Male Female

Is the student of Aboriginal or Torres Strait Islander origin?

- No
 Yes, Aboriginal Yes, Torres Strait Islander
 Yes, both Aboriginal & Torres Strait Islander

In which country was the student born?

- Australia Other – please specify _____

If not Australian, date of arrival: ___/___/___

STUDENT LANGUAGE DETAILS

Does the student speak a language other than English *at home*?

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

- No, English only Yes, other – please specify _____

Does your child attend Language School? Yes No

If yes, name of Language School attending: _____

If yes, specify language learnt at Language School: _____

PREVIOUS SCHOOL/KINDERGARTEN

Year Level (to be enrolled in this school): _____

If enrolling for Prep, previous Kindergarten: _____

Address: _____ PH: _____

Or

Previous School: _____

Address: _____

Year Level: _____ (at previous school)

VSR Number: _____

How many children in family: _____ Position in Family: _____

Names of Siblings attending this school: _____ Year Level: _____

_____ Year Level: _____

_____ Year Level: _____

Names of Siblings not attending this school (and year level if applicable):

_____ Year Level: _____

_____ Year Level: _____

CHILD'S RELIGIOUS DENOMINATION

Religious Denomination: _____

Baptismal Date: _____ Parish /Place of Baptism: _____

Sacraments already received:

Reconciliation	Date: _____	Parish: _____
Communion	Date: _____	Parish: _____
Confirmation	Date: _____	Parish: _____

SPECIAL NEEDS SUPPORT

Does your child have any additional needs that our teachers and learning support officers need to be aware of, e.g.

- language delay
- speech
- co-ordination
- social / behavioural
- physical disability
- other _____

OCCUPATION GROUP

Please select the appropriate group from the following list **with your current occupation not what you are qualified to do**. This occupational group is used to evaluate our funding, the higher the group the less money the school receives.

List of Parental Occupations:

OCCUPATION GROUP `N`

- ❖ Not paid for work in the last 12 months.

OCCUPATION GROUP `D`

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, kitchen hand, 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, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor).

OCCUPATION GROUP `C`

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 clerk, accounting / claims / audit clerk, payroll clerk, recording / registry / filing clerk, betting clerk, stores / inventory clerk, purchasing / order clerk, freight / 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 worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer / supervisor)

OCCUPATION GROUP `B`

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 / loan 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

OCCUPATION GROUP `A`

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)

FAMILY DETAILS

FAMILY STATUS

Married Separated Divorced Single Parent Family De facto

Is there a Parenting Plan? No Yes (please provide copy to school)

MOTHER/GUARDIAN 1 INFORMATION

Surname:
Christian name:
Address:
Postcode:
Telephone: (H)
(B)
(M)
Email:
Religion
Australian Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
Country of Birth:
Does the mother/guardian speak a language other than English at home? If more than one language, indicate the one that is spoken most often <input type="checkbox"/> English only <input type="checkbox"/> Other, please specify _____
Mother's/guardian's Occupation: _____ What is the occupation group of the mother/guardian? _____ Please select the appropriate parental occupation group from the attached list (A,B,C,D or N)
Employer:
What is the highest year or primary or secondary school the mother/guardian has completed? <input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent
What is the level of the highest qualification the mother/guardian has completed? <input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate 1 to IV (including Trade Cert) <input type="checkbox"/> No non-school qualifications

FATHER/GUARDIAN 2 INFORMATION

Surname:	
Christian name:	
Address:	
	Postcode:
Telephone: (H)	
(B)	
(M)	
Email:	
Religion	
Australian Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Birth:	
Does the father/guardian speak a language other than English at home? If more than one language, indicate the one that is spoken most often <input type="checkbox"/> English only <input type="checkbox"/> Other, please specify _____	
Father's/guardian's Occupation: _____ What is the occupation group of the father/guardian? _____ <small>Please select the appropriate parental occupation group from the attached list (A,B,C,D or N)</small>	
Employer:	
What is the highest year or primary or secondary school the father/guardian has completed? <input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent	
What is the level of the highest qualification the father/guardian has completed? <input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate 1 to IV (including Trade Cert) <input type="checkbox"/> No non-school qualifications	

EMERGENCY INFORMATION

Name of Family Doctor: _____ Ph: _____

Address: _____

Ambulance: Yes No Medicare No: _____ Exp ___/___

Health Fund: _____ No: _____

Every effort will be made to contact you in the case of an emergency or illness. However should you be unavailable, please nominate two relatives, neighbours, or friends who can drive and are available during school hours. In the event that both parents/guardians and emergency contacts are unable to be contacted an ambulance will be called.

EMERGENCY CONTACT (Other than parent)

Emergency 1:

Emergency 2:

Name: _____ Name: _____

Relationship to child: _____ Relationship to child: _____

Contact Ph: _____ Contact Ph: _____

STUDENT MEDICAL HISTORY

Does your child suffer from any medical conditions of which we need to be aware?

Yes No If yes, please provide details: _____

MEDICAL AUTHORITY

In the event of illness, or accident, I accept responsibility and authorise the person in charge in obtaining of such medical assistance as my child may require, should the school not be able to contact either parent. I also authorise the doctor called to administer an anaesthetic if necessary.

Following notification by the school, I will promptly attend any location to which my child may be taken for treatment.

Signature of Parent/Guardian: _____ Date: _____

FINANCIAL INFORMATION

ACCOUNT DETAILS:

Account to be addressed to:

Name: _____

Address: _____ Post Code: _____

School Fees are billed per family. You can elect to pay school fees per term, (quarterly, monthly, fortnightly by arrangement) or an annual payment in Term 1 via internet banking, direct debit or credit card. If you have any concerns regarding the payment of school fees, please make an appointment with the Principal, Mr. Daniel Ryan.

NOTE: You can claim extra assistance towards you school fees if you are a holder of

Health Benefit Card – No: _____

Health Care Card or Pension Card – No: _____

Education Levy:

There is an annual fee per child covering all books/class needs. This fee is charged at the beginning of the school year and payable first week of Term 1. Camp and excursion fees will be charged separately prior to commencing activities.

ENROLMENT POLICY

Rationale

St John's Catholic Primary School, Clifton Hill, exists to provide a Catholic Education to the Catholic children whose primary residence falls within the boundaries of the northern section of Our Lady of the Southern Cross Parish (Collingwood and Clifton Hill) and St Brigid's Parish (North Fitzroy) – suburbs included in this catchment are Clifton Hill, Fitzroy North, Carlton, Carlton North and parts of Northcote/Westgarth south of Merri Creek.

We believe that:

The school strives to provide an opportunity for all Catholic children of primary school age within the catchment described above to attend school.

The school strives to provide an efficient and clearly-stated policy and process of enrolment which satisfies the needs of parents, children and the school.

Guidelines for Action:

All applications will be prioritised using the following criteria:

1. All baptised Catholic children living within the boundaries of the catchment listed above are welcome to attend our school providing the school is able to cater for the child's needs.
2. Brothers and sisters of children already attending the school.
3. Baptised Catholic children living within the parish boundaries will be placed on a waiting list if places are unavailable.
4. Baptised Catholic children not living within parish boundaries, depending on availability of places and motivations for seeking enrolment.
5. Children of other Christian traditions, depending on availability of places and motivations for seeking enrolment.
6. Non-baptised children, depending on availability of places and motivations for seeking enrolment if positions are available.
7. Students enrolling at our school as part of a Prep intake will be required to provide proof of age (indicating that they have turned 5 years of age by the 30th April of that year) a copy of the child's Baptismal Certificate and an Immunisation Certificate.
8. A child who is less than the minimum age of entry for Victorian schools but has transferred from an interstate school may be eligible for enrolment. Evidence of age and full-time enrolment at the interstate school must be provided.
9. Other parents seeking early age entry for their children must make a written application to the Principal.
10. All enrolments will require the completion of the 'Confidential Student Information Enrolment Form' with details entered immediately on the school student database.
11. Students wishing to enrol at our school from other schools will not be automatically accepted.
12. Students will be allocated to classes according to a combination of class size and student need.

Privacy Act:

St. John's School is committed to upholding and implementing the Privacy Principles set out in the *Privacy Amendment (Enhancing Privacy Legislation) Act 2012*. A copy of the school's Privacy Policy is available to any parents by contacting the school office and from the school's website.

Evaluation:

This policy will be reviewed as part of the School Improvement Plan. The policy was last reviewed in May 2016.

Signature of Parent / Guardian: _____ **Date:** ___/___/___

OTHER PERMISSIONS

❖ **Excursions:**

The school will at least once a year endeavour to take your child to an excursion that complements the current unit of study. This often involves bus or public transport. Before we do this, we will seek your written permission. However, there are times when teachers take classes on foot to local excursions at short notice. Permission from the principal is first sought. Examples of this may include the PE teacher taking the class for sport/athletics practice at our local park, the class teacher taking the Prep children to examine Autumn leaves in the area, etc. In these situations, it is impractical to seek parent written permission beforehand. We ask you therefore to give permission now for these situations. This may be revoked at any time in writing.

Permission to attend local excursions:

I give permission for my child(ren) to be taken on short walks around the local area if such outings have been arranged with the permission of the Principal.

Signature: _____ Date: _____

❖ **Parent Directory:**

An important St. John's school goal is to build the sense of community. Each year, we select parent reps for each class to help in this process. One of their roles is to create a parent contact list so you or other parents in the same class can make contact should there be a query after-hours, you wish to organise a party or social gathering, etc. should you wish to be included in such a class directory, please sign below (only those who do this will receive the directory which will contain reminders about confidentiality).

I give permission for our contact details (child's name, parent's names, contact numbers & email if given) to be made available to Parent Reps to compile a class contact directory.

Signed: My email address:

❖ **Publicity:**

I give permission for my child's photo and name to be published in school publications, such as the school's newsletter or website, or to promote the school in local newspapers.

I give permission for a photograph of my child to be used by the CEOM/CECV for online and printed promotional and educational materials without acknowledgment, remuneration or compensation.

Licensed under NEALS

The photograph may appear in material which will be available to schools and education departments around Australia under the National Educational Access Licence for Schools (NEALS), which is a licence between education departments of the various states and territories, allowing schools to use licensed material wholly and freely for educational purposes.

I authorise the CEOM/CECV to use the photograph in material available free of charge to schools and education departments around Australia for the CEOM/CECV's promotional and educational purposes.

I understand and agree that if I wish to withdraw this authorisation, it is my responsibility to notify the school.

Name of Parent / Guardian
(please circle)

Signed: Parent/Guardian **Date:.....**

Any personal information will be stored, used and disclosed in accordance with the requirements of the Privacy Act 1988 (Cwlth).