

Application for **Enrolment** - Swanonline

STUDENT DETAILS

Given Name	<input type="text"/>	Surname	<input type="text"/>	Insert Passport Photo here
Second Name	<input type="text"/>	Date of Birth	<input type="text"/>	
Gender	<input type="checkbox"/> (M) <input type="checkbox"/> (F)	Country of Birth	<input type="text"/>	
Nationality	<input type="text"/>	Place of Birth	<input type="text"/>	
Main language (other than English) spoken at home	<input type="text"/>			
Telephone	<input type="text"/>	Mobile	<input type="text"/>	
		Students Mobile	<input type="text"/>	
Address	<input type="text"/>			
	<input type="text"/>	Postcode	<input type="text"/>	
Present or Previous School (if applicable)	<input type="text"/>			
Present Year Level	<input type="text"/>	Date/Year to commence at school	<input type="text"/>	
SCSA No.	<input type="text"/>			
Aboriginal/Torres Strait Island descent?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal descent <input type="checkbox"/> Yes, Torres Strait Island descent <input type="checkbox"/> Yes, both Aboriginal and Torres Strait Island descent			

Residency Status

Citizen** Permanent Resident* Temporary Resident* Overseas Resident*

**Please provide a copy of your passport/visa

**If born overseas and have Australian Citizenship, please provide copy of the Citizenship Certificate

Custody/Guardianship

Name of person with legal guardianship of the student

Are there any current Family Court Orders or current Restraining Orders that would apply to the child? Yes No

If applicable, please attach a copy outlining details of any special or restricted access arrangements.

MEDICAL INFORMATION (FOR WHEN STUDENT IS ONSITE)

Medicare Card Number Reference No. Ambulance Cover Yes No
Private Health Fund Blood Group (if known)
Doctor's Name Telephone

Emergency Contact Details (other than a parent/guardian)

(1) Name Relationship to student
Address
 Postcode
Telephone Mobile

STUDENT'S INDIVIDUAL NEEDS

The 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" – Section 16.1(g). To assist the College to respond to individual requirements, please provide details of any condition that may call for special steps to be taken for the benefit or protection of the enrollee.

Medical/Health Care
Medication
Allergies Current Treatment
Physical/Occupational Therapy
Psychological/Intervention/Support
Vision/Speech/Hearing Behavioural/Safety Issues
Child Development Centre Telephone
Reason for Referral

Other: eg Special needs; gifted and talented; learning difficulties (be specific). Please attach any relevant reports and diagnosis.

Will staff members be required to provide medical/health care services during College hours? Yes No

If yes, please provide written authority with details of the health care required and a signed authorisation by the relevant practitioner.

External Service Provision (Eg. Speech Therapist, Occupational Therapist, Psychologist, Tutoring)

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

If so, please give details and name and contact number of service provider.

Name Telephone
Address
 Postcode

Does your child require special transport arrangements to and from the College? Yes No

Does your child receive respite care on a regular basis? Yes No

Photographic Permission Agreement

I/We give permission for photographs and videos of the student to be placed in the College's records, displayed from time to time around the College, published in College publications, on the College website and in other marketing and promotional material.

Mother / Parent / Guardian 1 Signature

Father / Parent / Guardian 2 Signature

PRIVACY STATEMENT

The College collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil's enrolment at the College. The primary purpose of collecting this information is to enable the College to respond to the child's needs.

From time-to-time the College discloses personal and sensitive information to others for administrative and educational purposes. This includes to other schools, government departments, medical practitioners, and people providing services to the College, including specialists, visiting teachers, coaches and volunteers.

The College takes reasonable steps to ensure that the personal information collected and used is accurate, complete, and up-to-date. It also takes reasonable steps to protect the personal information held from misuse and loss and from unauthorised access, modification or disclosure. (All staff sign a confidentiality agreement form).

Agreement

I/We request that the above pupil be admitted to a Swan Christian Education Association (SCEA) School. I/We have read the 'Statement of Faith and Educational Philosophy' and the 'College Community Agreement - Swanonline' and agree to cooperate with SCEA in upholding its principles and in requiring the child to comply with the expectations, standards, and rules of the Association.

I/We have provided information relevant to the application/enrolment process, particularly in relation to the student's individual needs, medical conditions and health care requirements, and understand that if I/we failed to disclose any relevant information, the enrolment may be refused or terminated on this ground. I/We agree to update any information as required.

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

FAMILY DETAILS

Mother / Parent / Guardian 1

Title Given Name (in full) Nationality
Family Name Relationship to Student
Home Address
 Postcode
Telephone Mobile Home Email
Postal Address ('As Above' if the same)
Occupation Employer
Work Phone Work Facsimile
Work Email

PLEASE NOTE, THE FOLLOWING INFORMATION IS REQUIRED BY THE AUSTRALIAN GOVERNMENT

Country of Birth Language spoken at home (other than English)

What is the highest year of primary or secondary school you have completed? (Please tick the appropriate box)

Year 9 or equivalent or below Year 10 or Equivalent Year 11 or equivalent Year 12 or equivalent

What is the level of the highest qualification you have completed? (Please tick the appropriate box)

Bachelor degree or above Advanced Diploma/Diploma Certificate I to IV (incl. trade certificate) No school qualification

What is your Occupation Group? (Please tick the appropriate box)

Senior management and qualified professionals Other business managers, arts/media/sport, associated professionals
 Tradesmen/women, clerks, skilled office, sales, service Machine operators, hospitality, assistants, labourer, etc
 Not in paid work in last 12 months Not stated or unknown

Father / Parent / Guardian 2

Title	<input type="text"/>	Given Name (in full)	<input type="text"/>	Nationality	<input type="text"/>
Family Name	<input type="text"/>			Relationship to Student	<input type="text"/>
Home Address	<input type="text"/>				
	<input type="text"/>			Postcode	<input type="text"/>
Telephone	<input type="text"/>	Mobile	<input type="text"/>	Home Email	<input type="text"/>
Postal Address ('As Above' if the same)	<input type="text"/>				
Occupation	<input type="text"/>	Employer	<input type="text"/>		
Work Phone	<input type="text"/>	Work Facsimile	<input type="text"/>		
Work Email	<input type="text"/>				

PLEASE NOTE, THE FOLLOWING INFORMATION IS REQUIRED BY THE AUSTRALIAN GOVERNMENT

Country of Birth	<input type="text"/>	Language spoken at home (other than English)	<input type="text"/>
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What is the highest year of primary or secondary school you have completed? (Please tick the appropriate box)

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Not in paid work in last 12 months Not stated or unknown

DUAL CUSTODY FAMILIES

In the case of dual custody families, it is important that we are informed of the residential, access and fee billing responsibilities for children whose family arrangements are shared between parents/guardians. The College requires written confirmation of these arrangements. Please provide details separately.

Communication

All communication to be forwarded to

Mother - at listed address Father - at listed address Other - details below

Full Name	<input type="text"/>	Relationship	<input type="text"/>
Home Address	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>

General Details

Reason(s) for Application

What are the reasons for your application?

REGISTRATION INFORMATION

Distance Education Mode (Full-time enrolment)

- Year 7 Year 8 Year 9
 Year 10 Year 11 Year 12

FEES

Fee Paying Mother / Parent / Guardian 1

Full Name (incl. second name)

Address

Pension Card Number Expiry Date

Drivers Licence No Date of Birth

Fee Paying Father / Parent / Guardian 2

Full Name (incl. second name)

Address

Pension Card Number Expiry Date

Driver's Licence No Date of Birth

I/We acknowledge that I am liable/we are jointly and severally liable for all fees and charges stated in each tuition fee account relating to the child(ren) noted above. I/We acknowledge having read and understood the conditions printed over leaf and on the Swanonline Fee Schedule, and agree to be bound by the provisions therein.

Name of fee payer 1 in full

Signature of fee payer 1 Date

Name of fee payer 2 in full

Signature of fee payer 2 Date

Please Note:

- Fees are payable on the first day of each school term.
- A concession is offered on a year's fee paid in advance before 28 February each year (refer to fee schedule).
- Method of payment can be :
 - Bank Direct Debit
 - Cash or Cheque
 - Credit Card
 - Eftpos at the College office
- Payments made weekly, fortnightly or monthly will only be accepted using the bank direct debit authority system on your cheque, savings or credit card account (Authority forms for this method are available from the College Office).

Terms and Conditions

Notification of Acceptance

Parents will be given a written offer of enrolment subject to vacancies and outcome of the interview process, which must be accepted within two weeks.

Enrolment Fee

A non-refundable application fee of \$670 per student must accompany this application.

Endowment to Building Fund

Upon commencement at the College, a compulsory fee to the building fund of \$100 is payable per annum, per family.

Notice of Withdrawal

One term's notice in writing must be given to the Principal before the withdrawal of a student from the College. Failure to give such notice will render parents or guardians liable for fees equivalent to one term's fees in lieu of notice.

Variation of Conditions

The Association reserves the right to vary fees and conditions periodically.

For further information regarding the terms and conditions of fees please refer to the Fee Schedule.

ENCLOSURES

Please enclose the following with your application for enrolment:

- Photocopy of **FULL** Birth Certificate
- College Community Agreement
- Photocopy of most recent semester report include NAPLAN/MSE9 (if available).
- Anaphylaxis Report (if applicable)
- Two written character references
- Copy of passport/visa/citizenship certificate (if applicable)
- Copy of passport photo

Additional Character Reference:

Name	Occupation	Company	Contact Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please list other children in the family, their ages, schools they now attend (if appropriate), and present grades (if appropriate).

Name	Date of Birth	Present School (if applicable)	Present Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

FOR ADMINISTRATION USE ONLY

Application for Enrolment	<input type="text"/>	Application Fee Received	<input type="text"/>
College Community Agreement	<input type="text"/>	Enrolment Offer Letter	<input type="text"/>
Comments	<input type="text"/>		
	<input type="text"/>		