

Interview information:

### Enrolment at Good Samaritan

Student Name

Entry Year

Year Level Applied For

Receipt Number

Grade

Start Date:



# Good Samaritan

CATHOLIC PRIMARY SCHOOL

## Enrolment Application Form

### Student Details

First Name  Surname

Preferred Name  Date of Birth  /  /   Male  Female

Home Address  Suburb

Postcode  Language Spoken at Home

### Religion & Sacramental Information

Catholic  Rite  Other Religion

Baptism  Yes  No  Date  /  /

Reconciliation  Yes  No  Date  /  /

Communion  Yes  No  Date  /  /

Confirmation  Yes  No  Date  /  /

Current Parish

### Nationality

Country of Birth  Place of Birth

If born overseas, date of arrival into Australia  /  /

If born overseas, date child commenced school in Australia  /  /

Is the child of Aboriginal or Torres Strait Islander origin?

No  Yes, Aboriginal  Yes, Torres Strait Islander  Yes, both Aboriginal and Torres Strait Islander

### Students Not Born in Australia, Citizenship Status Required – Government requirement

Please tick the relevant category below and record the Visa Class and Subclass number (original documents to be sighted and copies to be retained by the school). Please attach Visa / Document of Travel / letter of notification and passport photo page.

#### Australian citizen not born in Australia

Australian Citizen (Naturalisation Certificate or Australian Passport number / Document of Travel if Country of Birth is not Australia)

Visa **Class** and **Subclass** recorded on entry to Australia (if applicable)

#### Not currently Australian citizens

Please provide further details as appropriate below

<input type="checkbox"/> Permanent Resident (if ticked, record the Visa Subclass Number)	Visa Subclass No. <input type="text"/>
<input type="checkbox"/> Temporary Resident (if ticked, record the Visa Subclass Number)	Visa Subclass No. <input type="text"/>
<input type="checkbox"/> Other/Visitor/Overseas Student (if ticked, record the Visa Subclass Number)	Visa Subclass No. <input type="text"/>

### Kindergarten

Has your child attended kindergarten? Yes  No

Name and Address of Kindergarten

Telephone No:  Group:

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## Previous School

Has your child attended another school?  Yes  No

Name and address of school

Telephone No:

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## Previous School/Pre-School Permission

I/We give permission for Good Samaritan Catholic Primary School to contact my child's previous school or pre-school to obtain additional information and reports to assist with my child's learning YES  NO

Signature

Signature

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## Medical Information

Do you have Ambulance Cover?  Yes  No

Medical Conditions: Please specify any medical conditions your child suffers from e.g. Asthma, Anaphylaxis, Diabetes and / or any prescribed medications taken by the student. (If a medical condition is specified please ask to speak to our First Aid Officer).

Allergies: Please list any known allergies your child has e.g. allergy to nuts, penicillin, bee stings etc.

Medical Practitioner Contact Details:

Name:

Telephone No:

Address:

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## Additional Needs

This application gives you the opportunity to provide information that will facilitate the smooth transition of your child into our school. It will assist the school to develop appropriate strategies to meet the particular needs of your child. If the information provided is incomplete or misleading, any decision made as to this enrolment may be revised.

Does your child have?

Autism

Behavior Disorders

Hearing Impairment

Intellectual Disability

Language Disorder

Mental Health Issues

ADD/ADHD

Vision Impairment

Acquired Brain Injury

Other (please specify)

Please assist us by providing the following information

Additional learning needs (please attach all relevant information)

Yes  No

Medical / allied health professional reports attached (please provide all relevant information)

Yes  No

Is your child currently receiving integration funding due to a disability? (Please attach all relevant information)

Yes  No

### Family Details: Parent 1 / Guardian 1

Title: (e.g. Mr. Mrs. / Ms. / Dr.)  First Name  Surname

Home Address  Same as Child

Suburb  Postcode

Home Phone  Work Phone  Mobile

Email  Language spoken at home

Occupation  Employer

Country of Birth  Nationality  Religion

Your Relationship to the Student seeking Enrolment

Interpreter Required  Yes  No

Centrelink pensioner concession **OR** Health care card number (CRN)  -  -  -

Highest year of secondary schooling completed by the Parent/Guardian  
(Persons who have never attended secondary school, mark "Year 9 or below")

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

Highest qualification completed by the Parent 1 / Guardian

No post school Qualification  Certificate I to IV (including trade certificate)  
 Advanced Diploma / Diploma  Bachelor Degree or above

#### PARENTAL OCCUPATION GROUP:

Please select the occupation group that best describes you (refer to the attached guide)

Group A  Group B  Group C  Group D  Group N

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### Family Details: Parent 2 / Guardian 2

Title: (e.g. Mr. Mrs. / Ms. / Dr.)  First Name  Surname

Home Address  Same as Child

Suburb  Postcode

Home Phone  Work Phone  Mobile

Email  Language spoken at home

Occupation  Employer

Country of Birth  Nationality  Religion

Your Relationship to the Student seeking Enrolment

Interpreter Required  Yes  No

Centrelink pensioner concession **OR** Health care card (CRN)  -  -  -

Highest year of secondary schooling completed by the Parent/Guardian  
(Persons who have never attended secondary school, mark "Year 9 or below")

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

Highest qualification completed by the Parent 2 / Guardian

No Post school Qualification  Certificate I to IV (including trade certificate)  
 Advanced Diploma / Diploma  Bachelor Degree or above

#### PARENTAL OCCUPATION GROUP:

Please select the occupation group that best describes you (refer to the attached guide)

Group A  Group B  Group C  Group D  Group N

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## Living Arrangements for This Student

Status of Parents  Married  Separated  Divorced  Widowed

Living with Mother & Father  Single parent: Mother / Father (please circle)

Living in a Blended Family  Shared parenting eg. One week with Mother, next with Father

Living with Guardian(s)  Other

### Court Orders (If Applicable)

Are there any current court orders relating to the student?  Yes  No

If yes, copies of these court orders e.g. AVOs, Family Court / Federal Circuit Court of Australia orders or other relevant court orders must be provided.

Is there any other information you wish the school to be aware of?

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## Financial Information

Who will be responsible for the payment of the school fees and levies? Please tick a box

Both Parents  Mother Only  Father Only  Guardian Only  Other

Fee accounts are sent out in term 1 each year with an annual payment plan form, where parents elect how they wish to pay fees for the year.

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## Other Children in the Family

Does your child have a sibling(s) attending Good Samaritan Catholic Primary School? Yes  No

Name:	<input type="text"/>	Current YearLevel:	<input type="text"/>
Name:	<input type="text"/>	Current YearLevel:	<input type="text"/>
Name:	<input type="text"/>	Current YearLevel:	<input type="text"/>

Does your child have any other siblings not attending Good Samaritan? Yes  No

Name:	<input type="text"/>	Date of birth:	<input type="text"/>
Name:	<input type="text"/>	Date of birth:	<input type="text"/>
Name:	<input type="text"/>	Date of birth:	<input type="text"/>
Name:	<input type="text"/>	Date of birth:	<input type="text"/>

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## School Reports

Is an additional copy of your child's report required for parent not living with the student? Yes  No

If yes, please complete the following information regarding the parent to whom the report should be sent.

Name  Relationship to Child

Email

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## Emergency Contacts – Other Than Parent /Guardian

### Contact Person 1

Name

Relationship to Child

Home Phone

Work Phone

Mobile

### Contact Person 2

Name

Relationship to Child

Home Phone

Work Phone

Mobile



## Head Lice Inspection

Throughout your child's schooling, the school will be arranging head lice inspections of students.

The school is aware that this can be a sensitive issue and is committed to maintaining student confidentiality and avoiding stigmatisation. A trained person approved by the principal will conduct the inspections of students.

Before any inspections are conducted the person conducting the inspections will explain to all students what is being done and why and it will be emphasised to students that the presence of head lice in their hair does not mean that their hair is less clean or well kept than anyone else's. It will also be pointed out that head lice can be itchy and annoying and if you know you have got them, you can do something about it.

The person conducting the inspections will check through each student's hair to see if any lice or eggs are present.

Person's authorised by the school principal may also visually check your child's hair for the presence of head lice, when it is suspected that head lice may be present. They do not physically touch the child's head during a visual check.

In cases where head lice are found, the person inspecting the student will inform the student's teacher and the principal. The school will make appropriate contact with the parents/guardians/carers.

Please note that health regulations requires that where a child has head lice, that child should not return to school until appropriate treatment has commenced. The school may request the completion of an 'action taken form', which requires parents/guardians/carers to nominate if and when the treatment has started.

I understand if I wish to withdraw this authorisation and consent, it is my responsibility to notify the School in writing.

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## Photography for Publications

At Good Samaritan Catholic Primary School we celebrate the efforts of our students by publicising some of their participation in class and co-curricular activities. This is an integral part of the daily life of the School. Images and names of students or samples of their work, from time to time, may be used in the School's newsletters, publications, programs for special events, website or digital / social media.

Video footage may also be recorded as part of special events that include assemblies, concerts, sporting events and other relevant occasions. Parents and guardians may also record some school performances as a memento that can be shared with other family members. They may also be provided with copies of school recordings of some of these events that involve their children.

In accordance with the requirements of the Australian Privacy Principles contained in the Commonwealth Privacy Act 1988, we seek your permission to use your child's photograph / videoed image for these purposes.

Please note the following:

- Home group, year level and ID photographs of your child, taken as a record of his / her time at Good Samaritan will be published in the School newsletter and the like. These are a record of their time at Good Samaritan and will be stored in the School's Archives after your child completes his / her time at the school. This is understood to be part of the acceptance of your child's enrolment at Good Samaritan Catholic Primary School.
- LICENSED UNDER NEALS: The photograph/video may appear in material which will be available to schools and education departments around Australia under the National Education 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.
- Photographs / video footage of students may be used on digital / social media in reporting on student activities to the School community.
- For specific advertising, promotional and marketing programs in print or digital / social media, the School will issue an individual permission request.
- It is understood that, from time to time, there may be incidental photographs / video footage taken by other members of the community during more open events such as concerts and interschool events etc. These are beyond the control of the School.
- The permission you give is for the time your child is at Good Samaritan Catholic Primary School. Should you wish to withdraw your permission at any stage, please contact the Registrar in writing or via email. This withdrawal can only affect photographs / video footage to be taken after the time you withdraw your permission.
- This permission is given for photographs / videos of your child to be used by Good Samaritan Catholic Primary School in the manner outlined above without acknowledgment, remuneration or compensation.

I understand if I wish to withdraw this authorisation and consent, it is my responsibility to notify the School in writing.

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## Conditions of Enrolment (please read before signing)

1. Good Samaritan Catholic Primary School is a Christian Community in which students are given the opportunity to deepen their understanding of Catholic beliefs, clarify their values and develop a real and practical concern for others. The School philosophy encourages the development of personal responsibility recognises individual differences and encourages each student to reach their potential. It is a philosophy that provides an environment which allows students to experience the hope and optimism of the Gospel. Parents and students agree to support in every way possible the religious dimension of the School's philosophy.
2. Students shall comply with any requirements the School may make regarding dress, general appearance, behaviour and participation in the School's program of activities.
3. Parent / Guardians making applications for their child to be admitted as a student of Good Samaritan Catholic Primary School will support the School and its policies.

## Parent / Guardian Declaration

- I/we agree that the school fees and levies determined by the School will be paid according to the annual payment plan that I/we complete.
- I/we agree that the School will not be held liable for loss of property incurred by my child for any reason whatsoever.
- I/we authorise the school to consent to my child receiving such reasonable medical or surgical treatment as may be necessary in an emergency including arrangement of an ambulance where required.
- I/we give permission for my child's photograph / video and name to be published according to conditions listed in this form
- I/we give consent for my child to participate in the school's headlice inspection program for the duration of their schooling at this school.
- I/we understand the Parent Code of Conduct and will comply with the expectations as stated.

I / We agree that the information contained in this application is true and accurate.

Signature of Parent 1 / Guardian

Signature of Parent 2 / Guardian

Date:

Date:

Information submitted in this form is stored in accordance with the School's Privacy Policy which can be found at the school's website:  
[www.gsoxburghpark.catholic.edu.au](http://www.gsoxburghpark.catholic.edu.au)

**Please attach your Enrolment Orientation Fee of \$50 (GST Inc.). This is a NON-REFUNDABLE fee.**

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## Enrolment Checklist

PLEASE ENSURE THAT THE FOLLOWING COMPULSORY ITEMS ARE ATTACHED WITH YOUR APPLICATION. APPLICATIONS WITHOUT RELEVANT DOCUMENTATION CANNOT BE PROCESSED.

- Birth Certificate
- Baptism Certificate
- Immunisation History Statement
- Recent School Report (for Application in Years 1-6)
- Previous NAPLAN Results (where applicable)
- Visa Documentation and Immi Card (for any Applicant Not Born in Australia)
- \$50 Enrolment Fee (non-refundable)