

Application to enrol in a NSW Government school

Thank you for your interest in seeking enrolment in a NSW Government school.

This application to enrol form is to be completed in English. If you need an explanation of any of the questions or help in completing this application, please ask for assistance from the school staff. You are welcome to provide further information on an attached sheet.

Before beginning to complete this form please refer to pages 15 and 16 of this form for details about completing this application and documents that you are required to provide to the school. An explanation of the purpose and use of the information you provide is given on page 13.

The school will notify you of the results of your application. The information you have provided will be used by the school for student enrolment if your application is accepted. Please do not purchase items such as uniforms until you receive confirmation of enrolment.

Student details		
A. Student detail	S	
Family name		
First given name		
Second given name		
Preferred first name		
Gender [Male Female Date of birth day month year	
Into which year are you seeking to enrol this student? (mark only one box)		
Intended start date	K 1 2 3 4 5 6 7 8 9 10 11 12 day month year	
OFFICE USE ONLY		
School name		
Student registration number	Date of enrolment at this school	
Roll Class (eg 3 SMITH, 9R2)	day month year	
Current scholastic year in which	n the student is enrolled (K-12) House group	
Out of home care Yes	No Name of statutory care provider	

Student details STUDENT'S BROTHER

STUDENT'S BROTHERS AND SI	STERS
Does this student have any brothers	or sisters currently, or previously (in the past 5 years), enrolled at a NSW Government school?
Yes No	
If yes, name of most recent school?	
If yes, please provide the details of t	he most recently enrolled brother or sister.
Gender	Male Female Date of birth day month year
Brother's/sister's family name	
Brother's/sister's given name	
ABORIGINALITY	
Is the student of Aboriginal or Torres	Strait Islander origin?
No Aboriginal Torres	Strait Islander Both Aboriginal and Torres Strait Islander
LANGUAGES OTHER THAN EN	GLISH SPOKEN AT HOME
Does the student speak a language or	ther than English at home?
No, English only Yes	
If yes, what language(s) other than En	glish are spoken at home?
Please write the actual language(s) Torres Strait Creole.	used, for example, Swahili (not African), Punjabi (not Indian), Auslan, Aboriginal English,
Main language other than English spo	oken at home by the student
Other language(s) spoken at home	
STUDENT'S MOBILE PHONE	
Student's mobile phone number (if a	pplicable)

Student details **COUNTRY OF BIRTH** What is the country of birth of the student seeking to be enrolled? STUDENT'S RESIDENCY STATUS Australian citizen New Zealand citizen Norfolk Islander What is the student's residency status? Temporary visa holder Residence determination Permanent resident A student born in Australia is only automatically an Australian citizen if at least one parent was an Australian citizen or permanent resident when the student was born. To determine the student's residency status, refer to the Proof of Identity and Residency Status policy on the Department's website. If the student is a temporary visa holder, please contact the Temporary Residents Program on 1300 300 229. If the student is holding or applying for visa subclass 571, please contact the International Students Program on 1300 300 229. If born overseas, on what date did the student arrive in Australia? day month vear For Australian born citizens, if the student was living overseas for two or more years, on what date did the student return to Australia? month If the student is a permanent or temporary visa holder, please provide the following information Current visa sub-class Visa expiry date month If this is not the student's first enrolment at an Australian school, what was the student's first date of enrolment at an Australian school? **PREVIOUS SCHOOLS** month Please provide details of any school where the student has previously been enrolled (NSW, interstate or overseas) starting with the most recent. Name of school last attended Location of school last attended (suburb/town/state/country) Dates of attendance (for example: from 05/2009 to 06/2011) to month vear month vear Names of other schools attended and their locations If more space is needed, please attach a page marked `Previous Schools'. **KINDERGARTEN STUDENTS** In the year before school, has the student been in non-parental care on a regular basis and/or attended any other educational programs? Yes No If yes, indicate any of the following that apply and show if this was part time (less than 15 hours per week) or full time (15 hours or more per week). Preschool Full time Postcode Part time Long Day Care (with a preschool program) Part time Full time Postcode Long Day Care (without a preschool program) Part time Full time Postcode Family Day Care Part time Full time Grandparent Part time Full time Other formal or informal care Part time Fulltime (eg occasional care, playgroup, other relative, nanny, friend, neighbour) Preschools usually operate on school days and in school terms, and provide structured early learning to children in the year or two before school.

Long day care services offer all-day care for most of the year for children aged 0 to 6. They may also offer 'preschool programs'

speci*i*cally for children in the year or two before school.

Name of preschool/long day care service

B. Parent/Car	rer 1 with whom this student normally lives		
If applicable, copies of any relevant family law or other court orders must be provided.			
Title (eg Mr/Ms/Mrs/D	r) Gender Male Female		
Relationship to student	t (eg mother/father/carer)		
Family name			
Given name			
Country of birth			
Aboriginality	No Aboriginal Torres Strait Islander Both Aboriginal and Torres Strait Islander		
OCCUPATION GRO	UP		
Please choose the grou	p that best describes your occupation		
	rou have retired or stopped work in the last 12 months, choose the group in which you used to work. Information and examples.		
Group 8	Have not been in paid work in the last 12 months		
Group 4	Machine operators, hospitality staff, assistants, labourers and related workers		
Group 3	Tradespeople, clerks and skilled office, sales and service staff		
Group 2	Other business managers, arts/media/sportspersons and associate professionals		
Group 1	Senior management in large business organisation, government administration and defence, and qualified professionals		
Occupation			
SCHOOL EDUCATION	N Company of the comp		
What is the highest lev	el of schooling completed?		
For persons who never	attended school, mark 'Year 9 or equivalent or below' (mark one box only).		
Year 12 or equivalen	t Year 11 or equivalent Year 10 or equivalent Year 9 or equivalent or below		
EDUCATIONAL QUALIFICATIONS			
What is the highest qua	alification completed?		
No non-school qualification Certificate I to IV (including trade certificate) Advanced diploma/diploma Bachelor degree or above			
LANGUAGES OTHER THAN ENGLISH SPOKEN AT HOME			
Does this parent/carer speak a language other than English at home?			
No, English only Yes			
If yes , what language(s) other than English are spoken at home?			
Please write the actual language(s) used, for example, Swahili (not African), Punjabi (not Indian), Auslan, Aboriginal English, Torres Strait Creole.			
Main language other than English spoken at home by parent/carer 1			
Other language(s) spok	en at home		
Interpreters may be a	vailable during school interviews. Would an interpreter be required? Yes No		

Parent/Carer 2 with whom this student normally lives			
If applicable, copies of any relevant family law or other court orders must be provided.			
Title (eg Mr/Ms/Mrs/D	Gender Male Female		
Relationship to student	t (eg mother/father/carer)		
Family name			
Given name			
Country of birth			
Aboriginality	No Aboriginal Torres Strait Islander Both Aboriginal and Torres Strait Islander		
OCCUPATION GRO	UP		
Please choose the grou	p that best describes your occupation		
	ou have retired or stopped work in the last 12 months, choose the group in which you used to work. of ormation and examples.		
Group 8	Have not been in paid work in the last 12 months		
Group 4	Machine operators, hospitality staff, assistants, labourers and related workers		
Group 3	Tradespeople, clerks and skilled office, sales and service staff		
Group 2	Other business managers, arts/media/sportspersons and associate professionals		
Group 1	Senior management in large business organisation, government administration and defence, and qualified professionals		
Occupation			
SCHOOL EDUCATION	DN .		
What is the highest lev	el of schooling completed?		
For persons who never	attended school, mark 'Year 9 or equivalent or below' (mark one box only).		
Year 12 or equivalen			
EDUCATIONAL QUALIFICATIONS			
What is the highest qua	alification completed?		
No non-school qualification Certificate I to IV (including trade certificate) Advanced diploma/diploma Bachelor degree or above			
LANGUAGES OTHER THAN ENGLISH SPOKEN AT HOME			
Does this parent/carer speak a language other than English at home?			
No, English only Yes			
If yes , what language(s) other than English are spoken at home?			
Please write the actual language(s) used, for example, Swahili (not African), Punjabi (not Indian), Auslan, Aboriginal English, Torres Strait Creole.			
Main language other than English spoken at home by parent/carer 2			
Other language(s) spok	en at home		
Interpreters may be a	vailable during school interviews. Would an interpreter be required? Yes No		

C. Parents/carers with whom this student normally lives				
Name to be used for all correspondence (eg Mr and Mrs A Black, Ms B Green)				
Residential address (eg 1	High Street, Sydney, NSW, 2000)			
Is this the residential addr	ress of the student to be enrolled?	□ No		
Correspondence address				
If you have a corresponde	nce address that is different to your residential	address please write it below (eg PO Box 51, Sydney, NSW, 2001).		
If the school needs to cont	tact a parent/carer, please specify, in order of pro	eference, who to contact		
If there are any special co (eg Mondays and Tuesday		er, please include this in the comment box next to the number		
NAME OF PARENT/CA	ARER TO CONTACT FIRST			
		Comments		
Phone number (mobile)				
Phone number (home)				
Phone number (work)				
Contact email address				
Contact email address				
NAME OF PARENT/CA	ARER TO CONTACT SECOND			
		Comments		
Phone number (mobile)				
Phone number (home)				
Phone number (work)				
Thore number (WOTA)				
Contact email address				

D. Parents/carers not living with this student			
Complete only if applicable. Copies of any relevant family law or other court orders must be provided. Please print and attach additional pages if required for multiple parents/carers not living with this student.			
Title (eg Mr/Ms/Mrs/D	rr)	Gender Male Female	
Relationship to student	t (eg mo	ther/father/carer)	
Family name			
Given name			
Aboriginality	No	Aboriginal TorresStraitIslander Both Aboriginal and Torres StraitIslander	
OCCUPATION GRO	UP		
Please choose the grou	p that b	est describes your occupation	
Mark one box only. If y See page 16 for more i		retired or stopped work in the last 12 months, choose the group in which you used to work. ion and examples.	
		t been in paid work in the last 12 months	
		operators, hospitality staff, assistants, labourers and related workers	
	·	eople, clerks and skilled office, sales and service staff	
		usiness managers, arts/media/sportspersons and associate professionals nanagement in large business organisation, government administration and defence, and qualified professionals	
Gloup I	Scillori	lanagement intrage business of gamsuton, government administration and defence, and quantied professionals	
Occupation			
SCHOOL EDUCATIO	N		
What is the highest lev	vel of so	hooling completed? For persons who never attended school, mark 'Year 9 or equivalent or below' (mark one box only	
Year 12 or equivalent	t Y	ear11 or equivalent Year 10 or equivalent Year 9 or equivalent or below	
EDUCATIONAL QUA	ALIFICA	ITIONS	
What is the highest qua	alificatio	n completed?	
No non-school qualification Certificate I to IV (including trade certificate) Advanced diploma/diploma Bachelor degree or above			
CONTACT DETAILS			
If there are any special conditions or times relevant to any contact number, please include these in the comment box next to the number (eg Mondays and Tuesdays only). Comments			
Phone number (mobile))		
Phone number (home)			
Phone number (work)			
Preferred email address	s for cor	respondence	

D. Parents/carers not living with this student (continued) Residential address (eg 1 High Street, Sydney, NSW, 2000) Does the student sometimes reside at this address? Yes No **Correspondence address** If you have a correspondence address that is different to your residential address please write it below (eg PO Box 51, Sydney, NSW, 2001). Additional emergency contacts E. Additional emergency contacts Please nominate two people over the age of 18 years who may be contacted in the event of an emergency if the school is unable to contact the parents/carers listed in Section C. Ideally each contact should be someone who lives near the school. Please ensure that you have discussed with these people their willingness to be emergency contacts. **CONTACT DETAILS** (*irst preference*) Family name Given name Relationship to student (eg neighbour/aunt/uncle) If there are any special conditions or times relevant to any contact number, please include these in the comment box next to the number (eg Mondays and Tuesdays only). Comments Phone number (mobile) Phone number (home) Phone number (work) **CONTACT DETAILS** (second preference) Family name Given name Relationship to student (eg neighbour/aunt/uncle) If there are any special conditions or times relevant to any contact number, please include these in the comment box next to the number (eg Mondays and Tuesdays only). Comments Phone number (mobile) Phone number (home) Phone number (work)

Student details – additional information

F. Special circumsta	ances		
Are there any special circumstances about the student seeking to be enrolled that the school should know prior to enrolment?			
	pervision, subject of a court order, subject of bullying by others, out of home care arranged by the state, seeker student living in immigration detention, eg community detention).		
Yes No			
If yes, please provide a brief desc	cription of the circumstances. Write in the spaces below.		
G. Students with a	additional learning and support needs, including disability		
Does the student require suppor	rt for learning because of disability?		
including students with disability	ot of Education policy recognise that adjustments may be required for students with special needs, or, so that they can participate at school. School personnel and parents work together may be needed to meet the student's learning and support needs.		
Is there anything that you do or	modify at home that may help us at school to meet the student's educational needs?		
If yes, please specify			
Please indicate any learning adju	stments that may be required to allow the student to participate at school (complete only if applicable)		
changes to learning programs	and/or teaching strategies		
communication, eg speaking and/or listening			
modification to equipment, furn	niture, learning spaces and/or learning materials		
support for personal care needs	s, eg hygiene, mealtimes and/or health care needs		
social support to engage safely with other children and teachers			
other (please specify)			
Please indicate if the student has	any of the following		
autism	a hearing impairment a language disorder		
aphysical disability	difficulties in learning acquired brain injury		
behaviour disorder	intellectual disability mental health disorder		
a vision impairment	other (please specify)		
Has any previous education provider prepared a documented plan to support the student's additional learning needs?			
If yes, please provide details			

Student details – additional information

H. Student medica	al details and heal	th conditions		
It is essential you inform the school before your child is enrolled if he or she has any medical conditions. This must include any known allergies. You should also contact the school as soon as you are aware of any newly diagnosed allergies, other medical conditions or changes to an existing condition. This will assist the school to support the safety and wellbeing of your child and allow planning to occur to determine the best way to meet the individual health and support needs of your child. This is important information for your child's safe participation at the school.				
Note: Where the words 'your chi	ild' are used, they should be take	en as a reference to the student	seeking enrolment.	
Student's Medicare number	mber Student's Medicare card reference number			
Medicare card valid to date	month year			
Doctor's name/medical centre				
Doctor's address (eg 1 High Stre	eet, Sydney, NSW, 2000)			
Doctor's phone number (work)				
for any allergy or other medica			who may currently be treating your chil n additional page if required.	d
Allergy / medical condition	Doctor's name	Addres	SS Teleph	one
(eg preschool, occasional car	re, etc) please provide it to t	he school as an attachment	revious school or organisation to this form. , FOOD (EG NUTS, EGGS, PEANUTS	s) or other.
If your child has an allergy, pleas there is insuficient space, please			tions that follow (where applicable). If	
	our child has, please answer ea	ch of the 11 questions (where	e applicable) on a separate page for each	allergy.
Allergy to				
1. Has a doctor diagnosed this a	allergy? Yes No			
2. Is this a severe allergy (anaph	nylaxis)? Yes No			
Anaphylaxis is a severe, potentially life-threatening, allergic reaction.				
3. Has your child been hospitalised with a severe allergic reaction (anaphylaxis) or any other allergy?				
4. If yes, which hospital?				
5. Does your child have an ASCIA Action Plan for Anaphylaxis? Yes No				
6. If yes, is this plan attached?	Yes No			
7. Has your child been prescribe	d an adrenaline autoinjector (ie	EpiPen®)? Yes No		
If your child has been prescribed an adrenaline autoinjector, you will need to provide the school with one (and renew prior to expiry date).				
(and renew prior to expiry date). Each time your child is prescribed a new adrenaline autoinjector the doctor should issue an updated ASCIA Action Plan for Anaphylaxis. It is important that any updated plan is provided to the school.				

Student details - additional information 8. What is the expiry date of the adrenaline autoinjector that will be provided to the school? If not known at the time of completing this form, the school will require this information on enrolment. 9. Does your child have an ASCIA Action Plan for Allergic Reactions? Yes No 10. If yes, is this plan attached? Yes No It is important that any updated plan is provided to the school. 11. Please list any other medication prescribed for this allergy The school will require further details in relation to prescribed medication on enrolment. Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form. Information is also available on the Department's website. MEDICAL CONDITIONS OTHER THAN ALLERGIES AND ANAPHYLAXIS (EG ASTHMA, SEVERE ASTHMA, DIABETES, EPILEPSY) Please identify and provide details below of any other medical condition for which your child is being treated. (If more than one condition or insuficient space, please attach additional pages and include answers to all 7 questions that follow). Medical condition 1. Has a doctor diagnosed this condition? Yes No 2. Has your child been hospitalised with this condition? Yes No 3. If yes, which hospital? 4. Does your child have a documented action plan from a doctor (eg asthma action plan)? 5. If yes, is this plan attached? Yes No 6. Is your child taking prescribed medication for this condition? Yes No 7. If yes, what is the prescribed medication? The school will require further details in relation to prescribed medication on enrolment. Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form. Information is also available on the Department's website.

Student details - additional information

I. Student's history relevant to risk assessment

The NSW Department of Education has a responsibility to assess and manage any risk of harm to its staff and students. This application gives you the opportunity to provide schools with information that will help facilitate the smooth transition of the student into this specific school setting. This may include preparing a behaviour management plan or other appropriate strategies directed at meeting the particular needs of the student. The action taken in response to the information you provide will help ensure the safety of this student, other students and staff.

To your knowledge, is there anything in the student's history or circumstances (including medical history not listed in Section H) which might pose a risk of any type to this student, other students, or staff at this school? Yes No If yes, please provide a brief description of the student's medical or other history which might pose a risk of any type to him or her, other students, or staff at this school. Please provide names and contact details of health professionals or other relevant bodies that have knowledge of these issues. Does the student have any history of violent behaviour? Yes No If yes, please provide details. Has the student ever been suspended or expelled from any previous school? Yes No If yes, was this for: Actual violence to any person? Nο Yes Possession of a weapon or any item used to cause harm or injury? Yes No Threats of violence or intimidation of staff, students, or others at the school? Yes No Illegal drugs? Yes Nο Are you aware of any other incidents of the kind listed above in which the student has been involved outside of the school setting? Yes If yes, please provide a brief outline of these incidents.

Personal information, consent, and declaration of accuracy

The personal information collected on this application is for purposes directly related to your child's education including processing this application.

Any information provided to the NSW Department of Education (the Department) will be used, disclosed and stored consistent with the NSW privacy laws.

Certain information is required by the Department to meet its duty of care and other legal obligations under public health, education and child protection legislation and for meeting data collection and reporting requirements under Commonwealth – State funding agreements which may involve evaluation and assessment of student outcomes.

Information may be disclosed to NSW State and Commonwealth government agencies and other organisations for the above purposes and as authorised or required by law.

Information will be stored on a secure electronic database. You may access or correct the information by contacting your child's school. If you have a concernor complaint about the information collected or how it has been used or disclosed you should contact the school.

If you choose not to provide some requested information it may have a detrimental impact on your child's enrolment, resourcing of the school or meeting your child's educational needs.

Further information about the collection of information while your child is enrolled at a NSW Government school, and how we protect your privacy, is available on the Department's website or from your school.

Publishing student information

The school/Department may publish information about your child for the purposes of sharing his/her experiences with other students, informing the school and broader community about school and student activities and recording student participation in noteworthy projects or community service.

This information may include your child's name, age, class and information collected at school such as photographs, sound and visual recordings of your child, your child's work and expressions of opinion such as in interactive media.

The communications in which your child's information may be published include but are not limited to:

- Public websites of the Department including the school website, the Department's intranet (staff only), blogs and wikis
- Departmental publications including the school newsletter, annual school magazine and school report, promotional material published in print and electronically including on the Department websites
- Official departmental and school social media accounts on networks such as the school's YouTube, Facebook and Twitter pages.

Parents should be aware that when information is published on public websites and social media channels it can be linked to by third parties and may be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information.

Permission to publish

I have read the information about publishing student information (above) and

I give permission I do not give permission

for the school/Department to publish information about my child in publicly accessible communications. This permission remains effective until I advise otherwise.

Online services

The Department provides students with filtered access to the Internet. Students also have access to a secure learning portal. After logging into their portal, students have access to a personalised email account and online applications. These resources enables tudents to collaborate with peers, publish online, and securely store their data for access within, or outside of, school.

When accessing some onlines ervices, data, including your child's name and files they have saved, are stored with the online application service provider in a location outside of the Department's network. The Department has worked closely with online application providers to assess privacy impacts and data security controls. Information about student privacy for parents is available from https://education.nsw.gov.au/going-to-a-public-school/privacy-information or from your school.

Laire	permission	ماما		~i	perm	iccia
I BIVE	permission	1 00	HOL	give	bern	IISSIU

for my child to have access to online services provided by the Department. This permission remains effective until I advise the school otherwise.

Consent

I have provided information about the learning and support needs, including health condition(s) and/or special need(s) and/or history relevant to a risk assessment, related to the student listed in Section A of this application form.

I consent to the school/Department of Education seeking information from previous schools, other NSW government departments, public hospitals, health professionals or other organisations that may also hold information related to this assessment for the student named on page 1.

I consent to the health professional(s) treating any medical or health condition identified in this application, to provide the school/Department with information about any condition that has been identified in this application. This may include any other aspects of the student's health that may impact on the condition or on the health and safety of this student or other students at school or on staff at the school.

Declaration of accuracy and signature

I declare that the information provided in this application is, to the best of my knowledge and belief, accurate and complete.

I have read and understand the information in this application including about the collection of personal information, publishing student information, online services and consent.

Where I have given personal information about people other than myself or my child(ren) I have done so with their authorisation.

 $Iamaware\ that\ if\ information\ I\ have\ given\ is\ false\ or\ misleading, any\ decision\ made\ as\ a\ result\ of\ this\ application\ may\ be\ changed.$

Signature of parent/o	carer
(at least one of the stud	dent's parents/carers must sign the application to enrol
Print name	
Date (dd/mm/yyyy)	
Signature of second	parent/carer
Print name	
Date (dd/mm/yyyy)	
Date (du/iiiii/yyyy)	

OFFICE USE ONLY

Record of evidence - all students	Principal's checklist		
Original documents must be sighted. Photocopies of evidence related to student identity and their	1. Enrolment interview conducted? Yes No		
residential address may also be required.	2. Special circumstances, additional Yes Not required		
Student Identity (name and age eg birth certificate, passport etc)	support needs and student history assessed?		
Yes No	3. Risk assessment required? Yes No		
Residential address			
(eg rates notice, rental agreements, electricity accounts etc)	If yes, risk assessment conducted?		
Evidence supplied Yes No	4. Is personalised learning and support		
In area? Yes No	required for this student? Yes No		
In addition, for students who are not Australian citizens, more information is required.	If yes: Consultation with parents/carers conducted Yes		
Passport or travel documentation no.			
	Planning to personalise learning and support completed?		
Country of issue	Behaviour Management Plan (violence) developed?* Yes Not required		
	Behaviour Management Plan (other) developed?* Yes Not required		
Current visa sub-class (if applicable)	Individual Health Care Plan developed?* Yes Not required		
Previous visa sub-classes (if applicable)	Emergency response plandeveloped?** Yes Not required		
	5. Communication of documented provision/s		
In addition (for temporary visa holders) Authority to Enrol code	and plan/s to relevant staff? Yes Not required		
	* It may be necessary to defer the Inalisation of enrolment until this action has been taken. This may require development of an interim plan		
Medical/emergency plans sighted and copied	until all relevant medical or other information has been obtained. Consideration must be given to all special needs when developing		
(eg ASCIA Plan)	behaviour management or health care plans. Any deferral should be no more than reasonably necessary to collect the required information.		
Yes Not applicable	An emergency response plan must be included in the student's		
Disability or other support needs, including any personal learning and support plan sighted and copied	individual health care plan where the student is diagnosed at risk of a medical emergency.		
Yes Not applicable	** Where a student has been diagnosed at risk of anaphylaxis the emergency response plan will be the ASCIA Action Plan for Anaphylaxis, which will be provided by the parent, completed and signed by the treating		
AIR Immunisation History sighted, and a copy retained, for students enrolling in a NSW Government school for the first time	doctor.		
Yes No	Principal's certification		
If yes, AIR Immunisation History statement indicates immunisation status	On the basis of the information provided on this form and gained from the required assessments,		
Up to date Not up to date	I accept, or		
Any family law, AVOs or other relevant court order sighted and copied	I decline this application to enrol		
Yes Not applicable	Signature of principal		
For parent not living with student (Section D p7)			
Shared parental responsibility	Print name		
Receive academic report			
SRE and SEE participation letter returned	Pate		
Yes Not applicable	Date day month year		

Application to enrol in a NSW Government school – Information Sheet

PLEASE TEAR OFF THIS BACK PAGE BEFORE RETURNING YOUR APPLICATION TO THE SCHOOL.

Having trouble with this form?

If you have difficulty understanding this form or would like further information, please call the school.

If you need assistance with English please call the **Telephone Interpreter Service** on telephone **131 450** and ask for an interpreter in your language. The operator will get an interpreter on the line to assist you with your conversation. You will not be charged for this service.

How to complete this application form	Checklist		
■ All applicants must complete sections A, B, C, E, H and I	When you come to the school to enrol, please bring these original documents with you:		
 You may be required to complete sections D, F and G Use a black or blue pen to fill in this form 	Proof of student's residential address (eg council rates notice, residential lease, electricity accounts, statutory declaration etc)		
 When you are asked to mark a box, put a tick or across in the box like this:	 □ Birth certificate or identity documents □ Australian Immunisation Register (AIR) Immunisation History Statement (required for all students enrolling in NSW Government schools for the firsttime) In addition If your child is the subject of family law matters you will need to provide:		
	Passport or travel documents		
Complaints, Compliments and Suggestions	Current visa and previous visas (if applicable)		
If you have a complaint, compliment or suggestion or are concerned about any aspect of our services we're keen to hear from you. We encourage you to contact the school to talk about your concerns, as most problems can be solved by talking to the school office staff,	In addition Temporary visa holders If your child is a temporary visa holder you will need to provide: Passport or travel documents		
your child's teacher or the school principal. They know your child and are best placed to help you. Also, it's best if you let them know about	Current visa and previous visas (if applicable)		
your concerns as early as possible. We will deal with your issue thoroughly and fairly and we have a clear process for resolving problems. Further information, including access to our Complaints Handling Policy and procedures, is available from: https://education.nsw.gov.au/public-schools/going-to-a-public-school/enrolment	Authority to Enrol issued by the Temporary Residents Program Unit. This is required for visitor and temporary visa holders (other than sub class 571P referred to below) Authority to Enrol or evidence of permission to transfer issued by the International Student Centre (if holding an international full fee student visa, sub class 571P) Evidence of the visa the student has applied for (if the student holds a bridging visa)		

Need more help? Contact your school or visit www.schools.nsw.edu.au

Parent occupation groups

The main purpose for collecting this information is to promote and implement the National Goals for Schooling by informing State and Commonwealth Governments on matters that may affect resourcing to your child's school and preschool.

You will need to use this table to complete the 'Occupation Group' section on pages 4, 5 and 7.

The ψ e groups listed here are used by the Australian Bureau of Statistics to classify occupations. Please choose the group (1, 2, 3, 4 or 8) that you think best describes your occupation.

If you have retired or stopped work in the past 12 months, choose the group in which you used to work.

Group 8

You have not been in paid work in the last 12 months

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
- Of se (typist, word processing/data entry/business machine operator, receptionist, of ce 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 below
- Agriculture, horticulture, forestry, shing, mining worker (farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/ shinghand)
- Other worker (labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)

Group 3

Tradespeople, clerks and skilled of tie, sales and service staff

- Tradespeople generally have completed a 4 year Trade Certificate, usually by apprenticeship.
 All tradespeople 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 ofice, 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, finess instructor, casino dealer/ supervisor)

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 (fiance/engineering/production/personnel/ industrial relations/sales/marketing)
- Financial services manager (bank branch manager, fiance/investment/insurance broker, credit/loans oficer)
- 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 oficial)
- 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 of cer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, of ce/project manager)
- Defence Forces senior Non-Commissioned Qf cer

Group 1

Senior
management
in large business
organisation,
government
administration
and defence,
and quali ad
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 Of cer

- Professionals generally have degree or higher qualications 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/offcer/pilot, flight offcer, ying instructor, air traf f controller)



CARINGBAH NORTH PUBLIC SCHOOL

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Special Religious Education and Special Education in Ethics Participation Letter

A feature of the public education system in NSW is the opportunity to provide time in class for education in ethics, faith and morality from a religious or non-religious perspective at the choice of parents.

The school website (https://caringbahn-p.schools.nsw.gov.au/) provides information on these options to support parent/carer choice.

A parent/carer may at any time notify the school in writing that they wish to change their decision. Students will continue the same arrangement as the previous year, unless a parent/carer has requested a change in writing.

For more information about Special Religious Education (SRE) and Special Education in Ethics (SEE), including the list of approved providers, please visit: https://education.nsw.gov.au/teaching-and-learning/curriculum/learning-across-the-curriculum/religion-and-ethics

If your preferred SRE or SEE option is not available please contact the approved provider. Students not attending SRE or SEE are given supervised alternative meaningful activities.

The following options are available at Caringbah North Public School Please choose one.

SRE Options

□ Option 1: Protestant (includes Anglican, Baptist, U	Jniting, Christian, Methodist)
□ Option 2: Catholic	
□ Option 3: Orthodox	
OR	
□ Please check this box if you do not wish for your of alternative activities.	child to attend SRE. Your child will participate in
and the second s	attend SRE above please check below if you would like Caringbah North PS due to a lack of volunteers to teach
□ Special Education in Ethics	
Student name:	Year:
Signature of parent/carer	Date: