



# ST FRANCIS DE SALES

PO BOX 2109 (626 PASCOE VALE ROAD)

OAK PARK VIC 3046

PHONE 9306 9444 FAX 9404 1484

Email : principal@sfoakpark.catholic.edu.au

## APPLICATION FOR ENROLMENT

Name of Student:

### Family Mailing Details

Family Surname

Mail to  
[eg Mr & Mrs Smith]

Address

Suburb/City

Post Code

Family Phone Number

Other

Current Parish

**Office Use Only:** FFlag

### Student Details

First Name

Commencement Year or Date

Middle Name

1<sup>st</sup> Australian School Year (eg: 2001):

Surname

Previous School

Year Level

Preferred Name

Religion

Sex  Male  Female (please tick one)

Nationality

Country of Birth

Does the student speak a language(s) other than English at home? Yes  No  If Yes  Please List Below:

Date of Birth

1. 2.

Year eg: Kinder, Year 7

Kinder attending

**Indigenous Identifier:** Aboriginal \ Torres Strait Islander: **Yes**  **No**  (If Yes, please tick  one below)  
 Aboriginal  Torres Strait Islander  Both Aboriginal & Torres Strait Islander

**Visa Student:** Is the Student a Visa Student? **Yes**  **No**

Residence Status:  Permanent  Non Permanent  Refugee Visa Sub Class

Date of Arrival in Australia Visa Number

Passport Number Visa Expiry Date

### Office use only:

Family code no: \_\_\_\_\_

House colour: \_\_\_\_\_

Child's grade: \_\_\_\_\_ Year: \_\_\_\_\_

Student Code No: \_\_\_\_\_

Student VSN: \_\_\_\_\_

Additional support Yes  No

ESL Yes  No

- Certificates:
- Birth
  - Baptism
  - Immunisation
  - Reconciliation
  - Eucharist
  - Confirmation

Medical Details					
Doctor's Name	Phone Number				
Student's Medicare Number	Date of Last Tetanus Injection/Booster				
<b>Allergies / Medical Alert</b>	Please specify <b>any allergies/ medical alerts</b> relating to the student applying for enrolment (eg. Allergies to nuts, penicillin, bee stings etc; asthma management etc).				
<b>Immunisations</b>	Has the Immunisation Certificate been submitted? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Special Needs					
Indicate whether the student applying for enrolment has any known or suspected <b>special needs</b> (please tick <input checked="" type="checkbox"/> Yes or No for each of the following)					
Physical Needs Yes <input type="checkbox"/> No <input type="checkbox"/>	Medical Needs Yes <input type="checkbox"/> No <input type="checkbox"/>	Educational Needs Yes <input type="checkbox"/> No <input type="checkbox"/>	Behavioural Needs Yes <input type="checkbox"/> No <input type="checkbox"/>	Allergies Yes <input type="checkbox"/> No <input type="checkbox"/>	Any other special needs Yes <input type="checkbox"/> No <input type="checkbox"/>
If you have answered yes to any of the above, please provide <b>full details</b> of those needs and any assessment/intervention/support that he/she may be currently receiving ( <b>Supporting documentation must be provided</b> ).					
<b>If this enrolment application is successful it is essential that the school be advised promptly of any changes to the needs of the student. The school will regularly assess its ability to provide adequate services for these needs.</b>					

Contact Details		
Details	Father/Carer Residing at Same Address	Mother/Carer Residing at Same Address
Title		
First Name		
Middle Name		
Surname		
Relationship		
Sex		
Address – Street		
Suburb & Post Code		
Residential Guardian Y/N?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Phone Number		
Work Phone Number		
Email Address		
Mobile		
Employer		
Occupation		
Occupational Group (Refer to insert "List of Parental Occupations)	Group 1 <input type="checkbox"/> Group 2 <input type="checkbox"/> Group 3 <input type="checkbox"/> Group 4 <input type="checkbox"/> Not in paid work <input type="checkbox"/>	Group 1 <input type="checkbox"/> Group 2 <input type="checkbox"/> Group 3 <input type="checkbox"/> Group 4 <input type="checkbox"/> Not in paid work <input type="checkbox"/>
Highest Year of School Education:	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 or below <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 or below <input type="checkbox"/>
Level of Highest Qualification	Bachelor degree or above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate I to IV (incl trade cert) <input type="checkbox"/> No non-school qualification <input type="checkbox"/>	Bachelor degree or above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate I to IV (incl trade cert) <input type="checkbox"/> No non-school qualification <input type="checkbox"/>
Do you speak a language(s) other than English at home?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please list below: 1. 2.	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please list below: 1. 2.
Country of Birth		
Nationality		
Religion		
Working With Children Check	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please attach a copy of your card.	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please attach a copy of your card.

### Emergency Contact Details

In case of illness or accident please nominate 2 emergency contact persons other than parents or guardians:

1. Full name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 Phone no: \_\_\_\_\_ Mobile no: \_\_\_\_\_
2. Full name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 Phone no: \_\_\_\_\_ Mobile no: \_\_\_\_\_

### Please list below all children in the family.

	Full Student Name	School Year	Birth Order	School Attending
Child			1	
Child			2	
Child			3	
Child			4	

### Parish/Sacramental Details

Sacrament	Date Received	Parish Received
Baptism		
Reconciliation		
Eucharist		
Confirmation		

Health Care Card Y/N? \_\_\_\_\_

Are there any Family Court Orders / Parenting Plans that have been issued in relation to the enrolling student? (If **yes** supporting documentation must be provided.) Yes  No

Are you a client of the Department of Human Services or any other agencies? Yes  No

#### PHOTO PERMISSION

- 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 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.

- **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)

Parent/Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Agreement

**Please tick the following boxes and sign below**

\* I/we have included copies of the following documents with this application for enrolment (please tick appropriate boxes):

- Birth Certificate
- Baptismal Certificate
- Citizenship documentation (where applicable)
- Most recent previous school reports and external test results (where applicable)
- Relevant Family Court Orders (where applicable)
- Relevant medical and/or special needs information including clinical/educational assessments (where applicable)
- Immunisation Certificate
- Passport and Visa papers (where applicable)

\* I/we understand that if this application is successful the information that I/we have provided must be kept up to date throughout the period of enrolment.

\* If this enrolment is accepted I/we agree to support our child's participation in the religious life of the school (eg school liturgies, retreat programs).

\* If this enrolment application is successful I/we agree to honour the financial commitments required by the school as per the Schedule of Fees and Charges.

\* I/we are not aware of any outstanding fees or charges, in relation to the student applying to enrol, that I/we are responsible for at another Catholic school.

\* I/we understand and shall support the school uniform policy.

\* I/we give permission for the use of my child's photograph and podcasts and work samples in the weekly newsletter or website or to promote the school in local newspapers. My child's photograph may also be used by the CEOM/CECV for online and printed promotional and educational materials without acknowledgement, remuneration or compensation. I/we understand that if I/we wish to withdraw this authorisation, it is my responsibility to notify the school.

\* I/we give permission for my child to attend local excursions where children walk to the area of interest e.g. local street, shops, parks, etc.

\* I/we have read all of the information in the Enrolment Package and understand the policies that we will need to abide by should this enrolment application be successful. I/we understand that if any misleading information has been provided, or any omission of significant, relevant information made in this application for enrolment, acceptance will not be granted, or if discovered after acceptance the enrolment may be withdrawn.

Signature of both parents/guardians: \_\_\_\_\_  
Mother Father

Date: \_\_\_\_\_

**Please note:**

- **Acceptance of this application for enrolment is subject to the approval of the school's Enrolment Committee.**
- **Acceptance to this school does not constitute acceptance into any other Catholic school (primary or secondary).**

**Parental Occupation Definition:**

**Parental Occupation** is defined as the **main** work undertaken by the parent/guardian.  
If a parent/guardian has more than one job, report their main job.

**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, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]