

Enrolment Form Diocese of Broken Bay Systemic Schools

SELECT SCHOOL St Gerard's - Carlingford sgc@dbb.catholic.edu.au

This completed Enrolment Form to be saved as a PDF and emailed to the school

•

Office Use only	Family Code	Student ID	
Mail from sch	ool to be sent to		
	(please select) Mr & Mrs 🗌 Mr 🗌 Mrs	Ms Dr Prof	
Surname		Given Name	
Address			
			Postcode
Contact tel	e-mail addre	ess	
Student Detai	ls		
Surname		Entry Year (eg 2020)	
Given name(s)		. Entry Level (eg Yr 3)	
Preferred given r	name	. Date of Birth	
Religion		. What is the student's sex?	Male O Female O
Address (if differ	rent from above mailing address)		U.
			Postcode
	e-mail ad		Yes No
	It reside at this address seven days a we ormation (if applicable)	eek?	
Reconciliation	Date Parish		
Communion	Date Parish		
Current Parish			
Kindergarten E	nrolments only		
••••	care outside of the home did this studer ear prior to school) Family Day Care D Occasio	nt have prior to enrolling at sch onal Care Pre-school [
Other care	(please specify)		
Extent of prior to	school care Up to 6 hrs/week 🔘 L	Jp to 12 hours/week 🔘 12 hrs to	o fulltime each week O
•	school care service ssion to the school to contact this servic	e provider	Yes No

Student Details: Surname		First Nan	ne	
Student Details (c	ont'd)			
·				
Previous School (if Name	applicable			
I/We give permission	to the school to cor	ntact this previous school	Yes	No 🔿
Nationality				
In which country was	the student born?			
Australia	Other (please spe	cify)		
Is the student of Abo	riginal or Torres Stra	ait Islander origin?		
Aborigina Torres St	No I Yes rait Islander Yes	(for persons of both Abori Islander origin, tick both Y		
Residential Status				
	tizenship documentati	on or Australian Passport if cour	ntry of birth is not Australia)	0
Permanent resident (Passport if country of	birth is not Australia)		Ó
Temporary resident (Passport or Visa)			0
Foreign National with	out residential statu	is (Passport and Visa)		0
Visa No	Passpor	t No	Visa expiry date	
		n 1/Carer 1 or Parent 2/Guar one language, indicate the one t Parent 1/Guardian 1/Carer 1 Select from list	dian 2/Carer 2 speak a languag that is spoken most often Parent 2/Guardian 2/Car Select from list	
Medical Informatior Name of Doctor/Med Address				
		Postcode	Contact tel.	
Medicare No.				
Medical Condition(s)		dical condition(s) the student su on taken by the student)	ıffers from, eg asthma, diabetes a	nd/or any
Allergies (Please I details)	ist any known allergies	s the student has, eg allergy to nu	ıts, penicillin, bee stings, etc. Incluc	le specific
Has the student beer If yes, does the stude		g at risk of anaphylaxis? ?	Yes 🔿 Yes 🔵	No 🚫 No 🚫

Student Details (cont'd)

Immunisation Please indicate the Immunisation Status shown on the student Immunisation History Statement.

	Immunisation Status shown on Australian Immunisation Register			
	Immunisation History Statement			
0	Up to Date – Australian Immunisation Register Immunisation History Statement			
0	Not up to Date - Australian Immunisation Register Immunisation History Statement			
0	Medical Exemption - Australian Immunisation Register Immunisation History Statement			
0	Catch-up Schedule - Australian Immunisation Register Immunisation History Statement			
0	Not immunised – please provide details			
Details	Details			

Immunisation: If the student's immunisation is not up to date, the student could be considered 'at risk' and may be excluded if there is an outbreak of an infectious disease in line with NSW Health Immunisation requirements in primary and secondary schools

www.health.nsw.gov.au/immunisation/Pages/Immunisation-in-schools.aspx

Students with Special Needs

Your application provides an opportunity to gather information that will support the learning needs of your child. Our school seeks to promote the spiritual, educational and social development of all our students. We work in partnership with families to collaboratively plan for students with additional needs.

If the information provided is incomplete or misleading, any decision made as to enrolment may be revised.

a) Has your child been assessed and diagnosed with a disability? No $igodot$ Yes $igodot$	please complete the following information
Physical disability Yes No 🔿	
Details, including practical implications	
Cognitive disability Yes 🔘 No 🔘	
Intellectual disability Language disorder Learning dis	order
Other	
Social, communication, emotional challenges Yes \bigcirc No \bigcirc	
Special Needs	
Autism	
Behavioural concerns for self or others	
Mental health concerns eg anxiety, separation disorder, elective mutism,	etc
Concerns regarding attention eg ADD/ADHD	
Other	
Sensory impairment Yes 🔘 No 🔘	
Hearing Vision	
Other	

Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Yes O No (Does your child have any history of behavioural problems including verbal bullying? Yes O No (Has your child ever been suspended or expelled from any previous school? Yes O No (If yes, was this for • Actual violence to any person I Please tick any • Possession of a weapon or any item used to cause injury I	Student De Surname	tails: First Name	
Adjustments to Learning Support for health care procedures Specialist furniture and/or equipment Mobility supports, equipment and/or personnel Communication supports (braille, signing, assistive technology, communication devices) Disability provisions for assessments Other (please specify) c) Is your child receiving specialist therapy? Yes No Occupational therapy Speech Pathology Other (please specify) Please provide copies of all reports from a doctor or health professional relating to your child's special needs The school will contact you to begin the consultation process. Ongoing collaboration will assist the school the tetter understand your child's needs and to commence planning for required (reasonable) adjustments. If ther are any changes to your child's special needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students and/or staff at this school? Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Does your child have any history of behavioural problems including verbal bullying? Has your child ever been suspended or expelled from any previous school? If yes, was this for Possestion of a weapon or any item used to cause injury Please to violence For the individual problems including verbal bullying? No (If yes, was this for Possestion of a weapon or any item used to cause injury Please to violence For the plane of a use agon or any item used to cause injury Please to violence For the advisor of aveapon or any item used to cause injury Please to violence For the advisor of aveapon or any item used to cause injury Please to violence For the advisor of the other of tudents/staff For the school of a weapon or any item used to cause injury Please to violence For the advisor For the advisor of tudents/			ate in their current
Learning Supervision Support for health care procedures Specialist furniture and/or equipment Mobility supports, equipment and/or personnel Communication supports (braille, signing, assistive technology, communication devices) Disability provisions for assessments Other (please specify) c) Is your child receiving specialist therapy? Yes No Occupational therapy Speech Pathology		5	
Supervision Support for health care procedures Specialist furniture and/or equipment Mobility supports, equipment and/or personnel Communication supports (braille, signing, assistive technology, communication devices) Disability provisions for assessments Other (please specify)	-		Г
Support for health care procedures Specialist furniture and/or equipment Mobility supports, equipment and/or personnel Communication supports (braille, signing, assistive technology, communication devices) Disability provisions for assessments Other (please specify)		-	
Specialist furniture and/or equipment Mobility supports, equipment and/or personnel Communication supports (braille, signing, assistive technology, communication devices) Disability provisions for assessments Other (please specify)		•	
Mobility supports, equipment and/or personnel Communication supports (braille, signing, assistive technology, communication devices) Disability provisions for assessments Other (please specify)			
Disability provisions for assessments Other (please specify) c) Is your child receiving specialist therapy? Yes No O Occupational therapy Speech Pathology Other (please specify) Please provide copies of all reports from a doctor or health professional relating to your child's special needs The school will contact you to begin the consultation process. Ongoing collaboration will assist the school to better understand your child's needs and to commence planning for required (reasonable) adjustments. If ther are any changes to your child's needs and to commence planning for required (reasonable) adjustments. If ther are any changes to your child's needs you must promptly notify the school. Health and Safety To your Knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students and/or staff at this school? Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Does your child have any history of behavioural problems including verbal bullying? Has your child have any history of behavioural problems including verbal bullying? Has your child have any history of a weapon or any item used to cause injury intimidation, bullying or harassment of students/staff Threats of violence i llegal drugs			
Other (please specify) c) Is your child receiving specialist therapy? Yes No Occupational therapy Speech Pathology Other (please specify) Please provide copies of all reports from a doctor or health professional relating to your child's special needs the school will contact you to begin the consultation process. Ongoing collaboration will assist the school the better understand your child's needs and to commence planning for required (reasonable) adjustments. If therare any changes to your child's special needs you must promptly notify the school. Health and Safety To your Knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students No Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Yes No No Please tick any applicable box Please of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Threats of violence Illegal drugs	(Communication supports (braille, signing, assistive technology, commu	inication devices)
c) Is your child receiving specialist therapy? Yes No O Occupational therapy Speech Pathology Other Occupational therapy Speech Pathology Other Occupation and the consultation process. Ongoing collaboration will assist the school the school will contact you to begin the consultation process. Ongoing collaboration will assist the school thera are any changes to your child's needs and to commence planning for required (reasonable) adjustments. If thera are any changes to your child's needs and to commence planning for required (reasonable) adjustments. If thera are any changes to your child's needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students and/or staff at this school? Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Does your child have any history of violent behaviours? Does your child have any history of violent behaviours? Does your child ever been suspended or expelled from any previous school? Yes No (I	Disability provisions for assessments	
Occupational therapy Speech Pathology Other (please specify) Please provide copies of all reports from a doctor or health professional relating to your child's special needs The school will contact you to begin the consultation process. Ongoing collaboration will assist the school to better understand your child's special needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students No and/or staff at this school? Yes Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Yes Does your child have any history of behavioural problems including verbal bullying? Yes Has your child have any history of aveapon or any item used to cause injury No Please tick any applicable box Possession of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Intimidation, bullying or harassment of students/staff	(Other (please specify)	
Occupational therapy Speech Pathology Other (please specify) Please provide copies of all reports from a doctor or health professional relating to your child's special needs The school will contact you to begin the consultation process. Ongoing collaboration will assist the school to better understand your child's special needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students No and/or staff at this school? Yes Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Yes Does your child have any history of behavioural problems including verbal bullying? Yes Has your child have any history of aveapon or any item used to cause injury No Please tick any applicable box Possession of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Intimidation, bullying or harassment of students/staff			
Other (please specify) Please provide copies of all reports from a doctor or health professional relating to your child's special needs The school will contact you to begin the consultation process. Ongoing collaboration will assist the school to better understand your child's special needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students and/or staff at this school? Yes (provide details) Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Yes No Please tick any applicable box • Actual violence to any person Yes No Please tick any applicable box • Actual violence to any person Possession of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Image: Comparison of students/staff	c) Is your chi	ild receiving specialist therapy? Yes 🔘 No 🔘	
Please provide copies of all reports from a doctor or health professional relating to your child's special needs The school will contact you to begin the consultation process. Ongoing collaboration will assist the school to better understand your child's needs and to commence planning for required (reasonable) adjustments. If ther are any changes to your child's special needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students No (provide details) and/or staff at this school? Yes (provide details) Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. No (provide details) Does your child have any history of violent behaviours? Yes No No Please tick any applicable box • Actual violence to any person Yes No No Please tick any applicable box • Possession of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Intimidation, bullying or harassment of students/staff	(Occupational therapy Speech Pathology	
The school will contact you to begin the consultation process. Ongoing collaboration will assist the school the better understand your child's needs and to commence planning for required (reasonable) adjustments. If ther are any changes to your child's special needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students No (provide details) and/or staff at this school? Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Does your child have any history of behavioural problems including verbal bullying? Has your child have any history of behavioural problems including verbal bullying? Please tick any applicable box Please tick any applicable box Please of the set is verbal of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Threats of violence Illegal drugs	(Other 🚺 (please specify)	
better understand your child's needs and to commence planning for required (reasonable) adjustments. If ther are any changes to your child's special needs you must promptly notify the school. Health and Safety To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students and/or staff at this school? Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Does your child have any history of behavioural problems including verbal bullying? Has your child have any history of behavioural problems including verbal bullying? Actual violence to any person Please tick any applicable box I himidation, bullying or harassment of students/staff Threats of violence I llegal drugs	Please provid	le copies of all reports from a doctor or health professional relating to y	our child's special needs
To your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him/her, other students No and/or staff at this school? Yes (provide details) Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Yes No (Does your child have any history of behavioural problems including verbal bullying? Yes No (Has your child ever been suspended or expelled from any previous school? Yes No (If yes, was this for • Actual violence to any person Please tick any applicable box • Possession of a weapon or any item used to cause injury • Intimidation, bullying or harassment of students/staff • Threats of violence • Illegal drugs	better unders	tand your child's needs and to commence planning for required (reason	
and/or staff at this school? Yes (provide details) Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues. Does your child have any history of violent behaviours? Yes No (Does your child have any history of behavioural problems including verbal bullying? Yes No (Has your child ever been suspended or expelled from any previous school? Yes No (Please tick any applicable box Possession of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Interest of violence Illegal drugs Interest of violence Illegal drugs	To your know	rledge, is there anything in your child's history or circumstances (includi	\sim
knowledge of these issues. Yes No Does your child have any history of violent behaviours? Yes No Does your child have any history of behavioural problems including verbal bullying? Yes No Has your child ever been suspended or expelled from any previous school? Yes No If yes, was this for • Actual violence to any person Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Imag	• •		ă
Does your child have any history of behavioural problems including verbal bullying? Yes No Has your child ever been suspended or expelled from any previous school? Yes No If yes, was this for • Actual violence to any person Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury	•	•	vant agencies that have
Does your child have any history of behavioural problems including verbal bullying? Yes No Has your child ever been suspended or expelled from any previous school? Yes No If yes, was this for • Actual violence to any person Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury Image: Comparison of a weapon or any item used to cause injury	Does vour ch	ild have any history of violent behaviours?	Yes No (
Has your child ever been suspended or expelled from any previous school? Yes No If yes, was this for expelled violence to any person If yes, was this for expelled from any previous school? Yes No Please tick any applicable box Possession of a weapon or any item used to cause injury Intimidation, bullying or harassment of students/staff Intimidation, bullying or harassment of students/staff Illegal drugs Illegal drugs Intimidation Intimidation	•		ă
If yes, was this for • Actual violence to any person Please tick any applicable box • Possession of a weapon or any item used to cause injury • Intimidation, bullying or harassment of students/staff □ • Threats of violence □ • Illegal drugs □	-		ă
Please tick any applicable box • Possession of a weapon or any item used to cause injury • Intimidation, bullying or harassment of students/staff □ • Threats of violence □ • Illegal drugs □	•		
 Intimidation, bullying or harassment of students/staff Threats of violence Illegal drugs 	Please tick any	 Possession of a weapon or any item used to cause injury 	H
Threats of violence Illegal drugs	applicable box		H
Illegal drugs			H
			H
		• Outer (prease specify)	

Page 4 of 11

professionals or other relevant agencies.

YesO No O

Court Orders / Parenting Agreements (if applicable)

Are there any current court orders or parenting agreements relating to the student? Yes No No If yes, copies of these court orders (eg. AVOs, Family Court/Federal Magistrate Court orders) or other relevant documents must be provided.

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

Family Details

-	
Parent 1/Guardian 1/Carer 1 Mr OMrs Ms C) Dr () Prof ()
Surname	First Name
Address	
	Postcode
Contact Nos Home	Work
Mobile	email address
Occupation	
Religion	Nationality
Country of birth Australia O Other O (please speci	fy)
Relationship to Student eg. Mother/Father	
Parent 2/Guardian 2/Carer 2 MrOMrsOMs	
Surname	First Name
Address	
	Postcode
Contact No Home	Work
Mobile	e-mail address
Occupation	
Religion	Nationality
Country of birth Australia O Other O (please speci	fy)
Relationship to Student eg. Mother/Father	

Student Details: Surname		First Name	
Non-residential Parent			
Surname	Fi	irst Name	
Address			
			Postcode
Contact Nos Home	W	/ork	
Mobile	e-	-mail address	
Occupation			
Religion	N	ationality	
Country of birth Australia O Ot	her 🔘 (please specify)		
Relationship to Student eg. Mother	r/Father		

What is the **highest** year of primary or secondary school the parents/guardians/carers have completed? (*Persons who have never attended school, tick 'Year 9 or equivalent or below' box. Mark one box only in each column*)

	Parent 1/Guardian 1/ Carer 1	Parent 2/Guardian 2/ Carer 2	Non-residential Parent
Year 12 or equivalent	0	0	0
Year 11 or equivalent	0	0	0
Year 10 or equivalent	0	0	0
Year 9 or equivalent or below	0	0	0

What is the level of the **highest** qualification the parents/guardians/carers have completed? (*Mark one box* only in each column)

	Parent 1/Guardian 1/Carer 1	Parent 2/Guardian 2/Carer 2	Non-residential Parent
Bachelor degree or above	0	0	0
Advanced diploma/Diploma	0	0	0
Certificate I to IV (including Trade Certificate)	0	0	0
No non-school qualification	0	0	0

What is the occupation group of:

Parent 1/Guardian 1/Carer 1

Parent 2/Guardian 2/Carer 2

Non-residential parent

Please select the appropriate parental occupation group from page 7

- If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation.
- If the person has not been in paid work in the last 12 months, enter "8" in the space(s) above.

Parents/carers who have retired or stopped work in the past 12 months, should choose the group in which they used to work. Parents/carers who have not been in paid work for more than 12 months should indicate occupation group code 8.

Group 1	Elected officials (mayor parliamentarian, alderperson, trade union secretary, board member) Senior executives/general managers/department heads in industry, commerce, media or other large organisation
-	 Public sector manager (public service manager (section head or above), regional director, hospital/health services education) Other administrator (school principal, faculty head/dean, library/museum/gallery director, research facility director)
Elected officials,	Defence forces (Commissioned Officer) Qualified professionals generally have degree or higher qualifications and experience in applying this knowledge to
senior executives/manager,	design, develop or operate complex systems; identify, treat and advise on problems; and teach others
management in large	• Health (GP or specialist, registered nurse, dentist, pharmacist, optometrist, physiotherapist, chiropractor, vet, psychologist, therapy professionals, dietician,
business organisation,	radiographer, podiatrist)
government	Education (primary/secondary school teacher, university lecturer, professor, VET, special education) Law (lawyer, judge, barrister, coroner, solicitor, legal officer)
administration and	Engineering (architect, surveyor, chemical/civil/mechanical/mining engineer)
defence, and qualified	 ICT (computer systems manager, designer, software and applications programmers)
professionals	Science (all scientists)
	 Business (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer, economist) Social (social/welfare/community worker, counsellor, minister of religion, urban/rural planner, librarian, archivist, interpreter/translator)
	Air/sea transport (aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller)
	Other business managers/professionals Farm/business owner/manager (crop and/or livestock farmer/farm manager, stock and station agent, building/construction, manufacturing, mining,
Group 2	wholesale, import/export, transport business manager)
_	• Specialist manager (works manager, engineering/production manager, sales/marketing manager, purchasing manager, supply/shipping manager, customer
Other business	service manager, property manager, real estate manager, advertising, public relations manager, human resource manager, call or contact centre manager,
managers/	human resource professionals) Finance (bank manager, finance/investment/insurance brokers/advisors, credit/loans officer, accountant)
professionals and associate	Retail sales/services manager, (shop, post office, petrol station, café/restaurant, club, hotel/motel/caravan park, cinema, theatre, travel/betting agency,
professionals	sports centre, car rental, car/fleet/station manager, other hospitality, retail services managers)
protosolonalo	Arts/media (musician, actor, dancer, painter, potter, sculptor, journalist, writer/author, media presenter, photographer, designer, illustrator, proof reader,
	graphic designer, web designer) Sportsperson (coach, trainer, sports official, sportsperson) Associate professionals generally have diploma/technical qualifications and support managers
	and professional
	Medical, science, architectural, building, surveying, engineering, computing, ICT support technician
	Health (enrolled nurse, community health worker, paramedic/ambulance officer, massage therapist, welfare/parole officer, youth worker,
	dental hygienist/technician) Legal (police officer, prison officer, government inspector, examiner or assessor, occupational/environmental health officer, security advisor,
	private investigator, debt collector, law clerk, court officer bailiff)
	Business/administration (recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical
	sales representative, retail buyer, office manager, project manager/administrator, mail supervisor, other managing supervisors, management and organisation analysts, contract, program)
	Defence Forces (senior non-Commissioned Officers (NCO))
	Other (library assistant, museum/gallery technician, research assistant, proof reader)
	Tradespeople generally have completed a 4-year trade certificate, usually by apprenticeship. All tradespeople are included in this group. (metal fitters and
Group 3	machinists, motor mechanics, structural steel/welding trades workers, carpenters and joiners, plumbers, painters, electricians, chefs/cooks, hairdressers) Advanced/intermediate clerical, office, sales, carer and service staff
or oup o	Recording clerk (bookkeeper, bank/post office clerk, statistical/actuarial clerk, account/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting
Tradespeople and	clerk, stores/inventory clerk, purchasing/supply logistics/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk,
advanced/intermediate	admissions clerk)
clerical, office, sales,	 Inquiry/admissions clerk (customer inquiry/complaints/service clerk, hospital admissions clerk) Office (secretary, personal assistant, desktop publishing operator, switchboard operator)
carer and service staff	Sales (sales representative (goods and service), auctioneer, insurance agent/assessor/loss adjuster, market researcher, real estate sales agent)
	Carer (aged/disability/refuge/child care/welfare support worker, nanny, nursing support)
	Service (parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor/supervisor, inspectors and regulatory officers)
	Machine operators
Group 4	 Driver or mobile plant operators (car/taxi/bus/coach/tram/truck/train driver, driving instructor, courier/deliverer, forklift driver, garbage collector, bulldozer/loader/grader/excavator/earthmoving plant operators, farm/horticulture/forestry machinery operators)
-	Production/processing machine operator (engineering, chemical, petrol, gas, water sewerage, cement, plastics, rubber, textile, footwear,
Machine operators,	wood/paper/glass/clay/stone/concrete production/processing machine operators)
sales/office/service/	Other machine operator (photographic developer/printer, industrial spray painter, boiler/air conditioning/refrigeration plant operators, railway signals/points,
hospitality staff, assistants,	crane/hoist/lift/bulk materials handling machinery operators, driller, miner) Sales office, hospitality staff and other assistants
labourers and	Sales (sales assistant, motor vehicle/caravan/parts salesperson, sales representatives, checkout operator, cashier, bus/train conductor, ticket seller,
related workers	service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker/filler)
	Office (typist, word processing/data entry/business/keyboard/machine operator, receptionist, office assistant, general clerk)
	 Hospitality staff (hotel service supervisor, receptionist, waiter, bar attendant, barista, kitchen-hand, porter, housekeeper, fast food cooks) Assistant/aide (trades assistant, school/teacher's/education aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher,
	home helper, salon assistant, animal attendant)
	Defence Forces ranks below senior NCO
	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, store person, guard, commercial cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing
	supervisor, security office)

Emergency Contact - in addition to parents and carers

Name	
Relationship to student	
Contact tel.	

Sibling Details

List all children in your family attending school or pre-school (from oldest to youngest including applicant)

Name	School/Pre-school	Year/Grade (Current calendar year)	Date of Birth (Pre-school only)

- 1 The school and the Diocesan Schools System (DSS) both independently and through its schools collects personal information, including sensitive information about students and parents or guardians before and during the course of a student's enrolment at the school. This may be in writing, through technology systems or in the course of conversations. The primary purpose of collecting this information is to enable the school to provide schooling to students enrolled at the school, exercise its duty of care, and perform necessary associated administrative activities, which will enable students to take part in all the activities of the school.
- 2 Some of the information we collect is to satisfy the school's legal obligations, particularly to enable the school to discharge its duty of care.
- 3 Laws governing or relating to the operation of schools require certain information to be collected and disclosed. These include education, public health and child protection laws.
- 4 Health information about students is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. We may ask you to provide medical reports about your child from time to time.
- 5 If we do not obtain the information referred to above, we may not be able to enrol or continue the enrolment of your son/daughter. This is particularly so where the information is relevant to the health and safety of the student, other students and/or staff.
- 6 The school may disclose personal and sensitive information for educational, administrative and support purposes. This may include to:
 - other schools and teachers at those schools including a new school to which a student transfers to facilitate the transfer of the student
 - government departments and agencies (including for policy and funding purposes)
 - the Catholic Schools Office
 - CSNSW
 - the Diocese of Broken Bay and its parishes
 - medical practitioners
 - people providing educational, support and health services to the school, including specialist visiting teachers, sports coaches, volunteers, counsellors and providers of learning and assessment tools
 - providers of specialist advisory services and assistance to the school, including in the area of human resources, child protection and students with additional needs
 - assessment and educational authorities, including the Australian Curriculum, Assessment and Reporting Authority (ACARA) and NAPLAN Test Administration Authorities (who will disclose it to the entity that manages the online platform for NAPLAN)
 - agencies and organisations to whom we are required to disclose personal information for education and research purposes
 - people providing administrative and financial services to the school
 - recipients of school publications, such as newsletters and magazines
 - anyone you authorise the school to disclose information to
 - anyone to whom the school is required or authorised to disclose the information to by law, including child protection laws.
- 7 Personal information collected from students is regularly disclosed to their parents or guardians.
- 8 If you make an enrolment application to another school within the DSS, personal information provided during the application stage may be collected from, or shared with, the other school. This personal information may include health information and is used for the purpose of considering and administering the enrolment of the student within the DSS.
- 9 The school uses centralised information management and storage systems (Systems). These Systems are provided by the Catholic Education Network (CEnet) and third party service providers. CEnet is owned by the Catholic dioceses. Personal information is stored with and accessible by CEnet and the third party service providers for the purpose of providing services to the school in connection with the Systems and for CEnet, for administering the education of students.

- 10 The school may use online or 'cloud' service providers to store personal information and to provide services to the school that involve the use of personal information, such as services relating to email, instant messaging and education and assessment applications. Some limited personal information may also be provided to these service providers to enable them to authenticate users that access their services. This personal information may reside on a cloud service provider's servers which may be situated outside Australia. Further information about the school's use of online or 'cloud' service providers is contained in the DSS Privacy Policy.
- 11 The DSS Privacy Policy, accessible on the school's website, sets out how parents or students may seek access to and correction of their personal information which the school has collected and holds. However, access may be refused in certain circumstances such as where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the school's duty of care to the student, where students have provided information in confidence or where the school is otherwise required or authorised by law to refuse access. Any refusal will be notified in writing with reasons (unless, given the grounds for refusal, it would be unreasonable to provide reasons).
- 12 The DSS Privacy Policy sets out how to make a complaint about a breach of privacy and how the school will deal with such a complaint.
- 13 The school from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the school's fundraising activities solely for that purpose. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
- 14 On occasions information such as academic and sporting achievements, student activities and similar news is published in school newsletters and magazines, on our intranet, on our website or otherwise shared with the school community. This may include photographs and videos of student activities such as sporting events, concerts and plays, school camps and school excursions. The school will obtain permissions annually from the student's parent or guardian (and from the student if appropriate) if we would like to include such photographs or videos in our promotional material or otherwise make this material available to the public such as on the internet.
- 15 If you provide the school with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the school and why.

Agreement - <i>please tick appropriate boxes</i>	Agreement	- please tick appropriate boxes
---	-----------	---------------------------------

- 1 I/We agree to support school policies in relation to program of studies, sport, pastoral care, school uniform, discipline and the general operation of the school.
- 2 I/We have the following documents to support this application for enrolment:

Birth Certificate *

Sacramental Certificates to date *

Parish Priest Reference Form - unless the priest has indicated he will forward the form directly to the school

Passport, visa, citizenship documentation * (*if applicable*)

Most recent previous school reports and external test results

Current Family Court Orders (if applicable)

Relevant medical and/or special needs information (if applicable)

Immunisation Certificates

Reports of assessments your child has received for speech, hearing, cognitive (IQ), occupational therapy *(if applicable)*

* Original documents will need to be produced during the enrolment process

- 3 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.
- 4 I/We understand that if this application is successful, the information that I/we have provided (eg of address, court orders, special needs etc) must be kept up to date throughout the period of enrolment.
- 5 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).
- 6 If, in time of emergencies, accidents or serious illness, I/we cannot be contacted I/we give permission for the principal or their representative, to seek medical attention for my/our child as required. This may include transportation to the nearest hospital, medical centre or doctor by ambulance or private vehicle.

I/We have read all 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 have read the Standard Collection Notice about the collection and management of the personal information contained in this form.

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.

Signatures (Physical signature to be completed later in enrolment process)

(Parent 1/Guardian 1/Carer 1)

.....

(Parent 2/Guardian 2/Carer 2)

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 primary or secondary school.

This completed Enrolment Form to be saved as a PDF and emailed to the school

(Date)

(Date)

Yes ONoO