

Welcome to
Maidens Park Primary School



Enrolment Application Form

WA PUBLIC SCHOOL STUDENT ENROLMENT FORM

Please complete the *Student Enrolment Form* and return it to the school for confirmation of this student's enrolment. Family details should include details of parents or carers residing at the same address as the student being enrolled. Any details relating to parents not residing with the student may be included in the Parent/responsible person details section of this form. Please place X in ☐ provided.

When you enrol your child at this school, please check that you have the following:

- **Birth certificate**
- **A statement of Immunisation showing a status of 'up to date' and dated within 2 months of enrolment**
- **Court order (if applicable)**
- **Proof of address (Rent/Lease agreement, electricity account etc.)**

If your child was not born in Australia, you must provide:

- Evidence of the date of entry into Australia.
- Passport or travel documents; and
- Current visa and previous visas (if applicable).

In addition, if your child is a temporary visa holder you must provide:

- Confirmation of enrolment or evidence of permission to transfer provided by Education International (if holding an International full fee student visa, sub class 571); or
- Evidence of the visitor and temporary resident visa (other than sub class 571 referred to above); or
- Evidence of the visa for which the student has applied (if the student holds a bridging visa).

INFORMATION TO BE PROVIDED

Where an item is marked with an asterisk (*) the information must be provided. This information is required by the Western Australian Department of Education to meet legal obligations. All other information is needed to meet the purposes outlined below.

While it is not a legal requirement to provide all of the details requested in the *Enrolment Form*, the information is sought to enable the Department to:

- Undertake administrative and child/student care responsibilities including maintaining emergency contact information.
- Communicate with you about important matters.
- Provide first aid and plan for student health support requirements. For a student with a disability who has significant and complex support needs the principal will negotiate to delay the first day of attendance with the parent/responsible person if the necessary teaching and learning adjustments are not currently available at the school.
- Collect necessary statistical information and undertake analysis of the composition and performance of the student population; and
- Meet State and National reporting requirements.

It is compulsory to advise of change of details in relation to student's name, usual place of residence and/or name and usual place of residence of Parent/responsible person.

SECURITY AND CONFIDENTIALITY

The information provided in *Enrolment Forms* is stored securely in local school and Departmental databases. The management of these databases is governed by State and Departmental policies to ensure security, privacy, and confidentiality.

ASSISTANCE WITH COMPLETING THIS FORM

If you require assistance completing this form, including translation services, please contact your school.



Maidens Park Primary School

CHILD'S DETAILS

Legal Surname	
Previous Surname: (if applicable)	
First Name	
Other Names	
Preferred Name	
Date of Birth	____/____/____
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Residential Address	
	Suburb:
Child's Mobile (if applicable)	
Full Name/s of siblings attending this school	

PARENT / CARER DETAILS

	PARENT / CARER 1 DETAILS	PARENT / CARER 2 DETAILS
Title (Mr, Ms, Miss, Mrs)		
Surname		
First Name		
Relationship to child		
Lives with child?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you responsible for the payment of contributions and fees?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you wish to receive communication, reports, etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Contact Phone Numbers	Mobile: Work:	Mobile: Work:
Address		
	Suburb	Suburb
Email		

	PARENT / CARER 1 DETAILS	PARENT / CARER 2 DETAILS
Do you speak a language other than English?	<input type="checkbox"/> NO, English only <input type="checkbox"/> YES, other – please specify	<input type="checkbox"/> NO, English only <input type="checkbox"/> YES, other – please specify
What is the highest year of school you completed? (if you did not attend school, mark "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"/> 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
What is the level of the highest qualification you have completed	<input type="checkbox"/> Bachelor's degree or above <input type="checkbox"/> Advanced diploma / diploma <input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualifications	<input type="checkbox"/> Bachelor's degree or above <input type="checkbox"/> Advanced diploma / diploma <input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualifications
What is your occupation group? (if you are not currently in paid work, but have had a job in the last 12 months, please use your last occupations. If you have not been in paid work in the last 12 months, select 8)	<input type="checkbox"/> Group 1 Senior Management in large business organisation, government administration, defence and qualified professionals <input type="checkbox"/> Group 2 Other business managers, arts/media/sportspersons and associate professionals <input type="checkbox"/> Group 3 Tradesperson, clerks and skilled office, sale & service staff <input type="checkbox"/> Group 4 Machine operators, hospitality staff, assistants, labourers and related workers <input type="checkbox"/> Group 8 Unemployed, Retired, Student	<input type="checkbox"/> Group 1 Senior Management in large business organisation, government administration, defence and qualified professionals <input type="checkbox"/> Group 2 Other business managers, arts/media/sportspersons, and associate professionals <input type="checkbox"/> Group 3 Tradesperson, clerks and skilled office, sale & service staff <input type="checkbox"/> Group 4 Machine operators, hospitality staff, assistants, labourers and related workers <input type="checkbox"/> Group 8 Unemployed, Retired, Student

ADDITIONAL CONTACT DETAILS

	Additional Contact 1	Additional Contact 2
Title (Mr, Ms, Miss, Mrs)		
Surname		
First Name		
Relationship to child		
Email		
Address		
	Suburb	Suburb
Contact Number	Mobile:	Mobile:
	Work:	Work:

Place a number in the box (1,2,3,4) to indicate the order in which people should be contacted.

Parent / Carer Contact 1	Parent / Carer Contact 2	Additional Contact 1	Additional Contact 2
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CHILD'S DETAILS – ADDITIONAL INFORMATION

Is the child of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> NO
	<input type="checkbox"/> Yes, Aboriginal
	<input type="checkbox"/> Yes, Torres Strait Islander (TSI)
What was the first language spoken at home?	
Does the child speak a language other than Standard Australian English at home?	<input type="checkbox"/> NO, English only
	<input type="checkbox"/> Yes, Aboriginal English
	<input type="checkbox"/> Yes, other language – please specify
Does the child mainly speak English at home?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Child's religion	
Is the child to be withdrawn from religious instruction or activities	<input type="checkbox"/> YES <input type="checkbox"/> NO
Country of Birth:	
Is the child an Australian Citizen / Permanent Resident?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Is the child a temporary resident of Australia	<input type="checkbox"/> YES <input type="checkbox"/> NO
Date entered Australia	
Visa Details	Grant Number
	Sub Class Number
	Expiry Date

Is this child subject to any court orders in respect of their care, welfare and development or access restrictions?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please specify and attach supporting documentation.	

Is this child in the care of the Director General of the Department of Communities – Child Protection and Family Support (CPFS)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please specify the name of the CPFS Case Manager and their contact details:	Name
	Contact Number
	Email

Name of previous school:	
If previously enrolled in Home Education, specify the Education Region	

KINDERGARTEN CHILDREN

Did your child attend a Child and Parent Centre, in the past year?	<input type="checkbox"/> YES, regularly (10 times or more) <input type="checkbox"/> NO
Did your child attend Kindilink, in the past year?	<input type="checkbox"/> YES, regularly (10 times or more) <input type="checkbox"/> NO

HEALTH & DISABILITY

Immunisation Status	<input type="checkbox"/> Up to date
	<input type="checkbox"/> Not up to date
	<input type="checkbox"/> Child has an Immunisation Certificate issued by the Chief Health Officer
Medical Contacts	Medical Practice:
	Doctor's Name:
	Phone:
Do you have ambulance cover? If emergency contacts are unavailable, an ambulance will be called. If there is a medical emergency parents or carers are expected to meet the cost of the ambulance.	<input type="checkbox"/> YES <input type="checkbox"/> NO Provider: Membership Number:
Medicare Care Details	Card Number:
	Ref:
	Expiry Date
Is this child listed on a family Health Care or Pension Card?	<input type="checkbox"/> YES
	<input type="checkbox"/> NO
	Card Number:
	Expiry Date
Permission to administer First Aid?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you give permission for the school to share your child's health care information and photo with school staff?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Does your child have a Medic Alert bracelet or pendant?	<input type="checkbox"/> YES <input type="checkbox"/> NO Details:
Does your child have a medical condition or intensive health care need that requires the support of school staff? If yes, please tick the appropriate box, you will be required to complete a separate Health Care form.	<input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> Allergy – Anaphylaxis <input type="checkbox"/> Allergy – other <input type="checkbox"/> Asthma <input type="checkbox"/> Diabetes <input type="checkbox"/> Intensive Health Care Need (eg tube feeding) <input type="checkbox"/> Seizure Disorder (eg epilepsy) <input type="checkbox"/> Hearing condition (eg otitis media) <input type="checkbox"/> Mental health or behavioural (eg depression, ADD/ ADHD) <input type="checkbox"/> Diagnosed migraine / headaches. <input type="checkbox"/> Other
Does your child have a disability?	<input type="checkbox"/> NO <input type="checkbox"/> YES
If yes, please tick the appropriate box, copies of documentation may be requested by the school	<input type="checkbox"/> Autism Spectrum Disorder <input type="checkbox"/> Deaf or Hard of Hearing <input type="checkbox"/> Global Developmental Delay (prior to age 6) <input type="checkbox"/> Intellectual Disability <input type="checkbox"/> Physical Disability <input type="checkbox"/> Severe Mental Health Disorder <input type="checkbox"/> Specific Speech Language Impairment <input type="checkbox"/> Vision Impairment

MEDIA CONSENT

Permission is sought for the school to publish video or photographic images of your child and/or samples of your child's school work to be used by the school and the Department of Education. The purpose of using the images or work will be activities such as promoting the school, school events and student achievements.

Your child's image and/or school work may be published for the above purposes in a range of formats such as hardcopy and digital, including audio and video file formats, and published to a range of media including but not limited to school newsletters, email, school and Department of Education intranet and internet sites including social media websites (e.g. Facebook, YouTube etc.), any third party applications and local newspapers in hardcopy and digital formats, which may enable viewers/readers to identify your child.

The school will endeavour to limit identifying information that accompanies images of your child or child's work; however, there will be occasions when your child's name, class and school may be published along with images.

Please complete the consent below, once signed, the consent will remain effective until such time as you advise the school otherwise.

I agree to the videoing or photographing of my child and my child's school work during school activities for use by the school and the Department of Education in the ways stated above.

IMPORTANT: I understand that while the school and Department of Education will only publish my child's information for the above-stated purposes, the internet is accessible by any person worldwide. I understand that my child's information can be accessed, copied and used by any other person using the internet (e.g. shared through social media such as Facebook, YouTube, etc.). I understand that once my child's information has been published on the internet the school and Department of Education have no control over its subsequent use and disclosure. I understand that I can withdraw this permission at any time by contacting the school or Department in writing; however, this will not affect materials that have already been published and disseminated.

☐ I give permission

☐ I DO NOT give permission

Signature of parent / carer: _____ **Date:** _____

ONLINE SERVICES ACCOUNT AND INTERNET ACCESS (Appendix B)

Our school provides access to Department of Education online services. These enhance the contemporary learning opportunities available to students and the range of teaching tools available to staff to deliver the Western Australian Curriculum.

The Department's online services currently provide students with access to:

- individual email and calendar accounts;
- the internet, with all reasonable care taken by central office and schools to monitor and control students' access to websites while at school;
- online teaching and learning services such as Connect, web-conferencing and digital resources;
- online file storage and sharing services; and
- these online services at locations other than school.

If you agree to your child using these online services, please sign the Acceptable Use Agreement form and complete the permission section.

Please note that while every reasonable effort is made by schools and the Department to prevent student exposure to inappropriate online content when using Department provided online services, it is not possible to completely eliminate the risk of such exposure.

You should be aware that the Department has the right to review, audit, intercept, access and disclose messages created, received or sent over Department online services. Logs of email transactions and internet access data are kept for administrative, legal and security purposes and may be monitored. Similar to other corporate records, emails and internet access records are discoverable in the event of legal action and are subject to provisions of the Freedom of Information Act 1992. (www.foi.wa.gov.au)

You should also be aware that general internet browsing not conducted via the Department's network is **not** monitored or filtered by the Department. The Department encourages close family supervision of all internet use by children in locations other than school, and strongly recommends the use of appropriate internet filtering software. Advice on managing internet use at home can found on the Office of the E-Safety Commissioner website (www.esafety.gov.au/iparent).

☐ I give permission for my child to have an online services account.

☐ I DO NOT give permission for my child to have an online services account.

I understand and agree that my child has responsibilities when using the online services provided at school for educational purposes, in accordance with the Acceptable Use Agreement for school students.

I also understand that if my child breaks any of the rules in the agreement that the principal may take disciplinary action in accordance with the Department's *Student Behaviour Policy and Procedures*.

Signature of parent / carer: _____

Date: _____

Note: While every reasonable effort is made by schools and the Department of Education to prevent student exposure to inappropriate online content when using the Department's Online Services, it is not possible to completely eliminate the risk of such exposure. The Department cannot filter internet content accessed by your child from home or from other locations away from the school. The Department recommends the use of appropriate internet filtering software at home.

ONLINE SERVICES ACCEPTABLE USE AGREEMENT (K – YEAR 2) (Appendix C)

Please explain the below rules to your child before signing.

I agree to follow the rules set out below when I use the Department-provided online services:

- I will keep my password private and not share with other students.
- I will not let other people logon and/or use my online account.
- I will tell the teacher if I think someone is using my online account.
- I will tell the teacher if I see anything that makes me feel uncomfortable or unsafe that I know I should not access or view at school.
- I will say where other people's pictures or words come from if I copy them from the internet.
- I will check with the teacher before giving information about myself or anyone else when using online services.
- I will take care when using the school's computer equipment.
- I will not use any online service to be mean, rude or unkind about other people.

I understand that if I use the internet or my online account in a way that I should not, then I may not be able to use these in the future.

Child's name: _____

Signature of parent / carer: _____ **Date:** _____

ONLINE SERVICES ACCEPTABLE USE AGREEMENT (YEARS 3-6) (Appendix D)

Please explain the below rules to your child before signing.

I agree to follow the rules set out below when I use the Department-provided online services:

- I will keep my password private and not share with other students.
- I will not let other people logon and/or use my online account.
- I will tell the teacher if I think someone is using my online account.
- If I find any information that is inappropriate or makes me feel upset or confused, I will tell a teacher about it. Some of these things may include violence, racism, pornography, or content that is offensive, intimidating or encourages dangerous or illegal things.
- I understand the school and the Department of Education can monitor my use of online services.
- I will use appropriate language in all internet communications.
- If I use other people's work taken from the internet as part of my own research and study, I will acknowledge them as the owner.
- I will check with the teacher before sharing images or giving information about myself or anyone else when using online services.
- I will take care of the computers, computer systems or computer networks of the school, the Department of Education, or any other organisation.

I understand that

- I am responsible for my actions while using online services and may be held responsible for any breaches caused if I allow any other person to use my online account;
- If I misuse any online services I may be held liable and the principal may take further action.

Child's name: _____ (child to write or sign name)

Signature of parent / carer: _____ **Date:** _____

PRIVACY AND DECLARATION

Please tick to confirm:

I understand:

- ☐ that the child's enrolment information is confidential and will be kept as requested by the Department of Education's record keeping procedures.
- ☐ that the information on this Enrolment Form will be used to meet the Department of Education's reporting requirements to other Government departments or agencies. This includes providing the Department of Health with my child's immunisation status as requested.

I declare:

- ☐ this is the only enrolment I have made for the child.
- ☐ I understand that I am required to notify the school as soon as any of the enrolment details for the child change.
- ☐ I understand that if I provide false or misleading information the child's enrolment may be reconsidered or cancelled.
- ☐ I have provided all documentation available to me.

Name of person enrolling child _____

Relationship to child _____

Signature _____

Date: ____/____/____

APPROVAL OF PRINCIPAL OR DELEGATE

Principal's approval

Enrolment approved ☐ YES ☐ NO

Signature _____

Date: ____/____/____

PARENT OCCUPATION GROUPS

(Relates to questions in Parent/Carer 1 and Parent/Carer 2 sections)

GROUP 1	GROUP 2	GROUP 3	GROUP 4
Senior management in large business organisation government administration & 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]	Other business managers, arts/media/sports persons 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.	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]	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 in other groups Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farmhand, 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]