



ST MONICA'S PRIMARY SCHOOL

Provisional Offer of Enrolment / Request for Information

This is a School which operates with the consent of the Bishop of the Catholic Diocese of Sandhurst and is owned, operated and governed by Catholic Education Sandhurst (CES) Limited), where formation and education are based on the principles of Catholic doctrine, and where the teachers are outstanding in true doctrine and uprightness of life. This Form is part of CES Limited's Enrolment Framework which is available at <https://catholiceducationwodonga.vic.edu.au/enrolment/>

2nd Stage – INFORMATION TO COMPLETE ENROLMENT

To be completed after a PROVISIONAL Offer of Enrolment is made by the School

| | | |
|------------------------|---|---|
| Office use only | Date received: | Birth certificate SUPPLIED?: Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | Start date: | Baptism certificate SUPPLIED?: Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | Enrolment date: | English as an Additional Language: Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | Student/family code: House colour: | VSN: |
| | Immunisation history SUPPLIED?: Yes <input type="checkbox"/> No <input type="checkbox"/> | Visa information SUPPLIED? (if relevant): Yes <input type="checkbox"/> No <input type="checkbox"/> |

STUDENT DETAILS

| | | | |
|--------------------------------|----------------------------------|---------------------------------|--------------------|
| Surname: | | Entry year (YYYY): | Entry level/grade: |
| First name/s: | | | |
| Preferred first name: | | | |
| Date of birth: | Religion: (include rite) | | |
| Male: <input type="checkbox"/> | Female: <input type="checkbox"/> | Other: <input type="checkbox"/> | |

| HOME ADDRESS OF STUDENT | |
|-------------------------|-----------|
| Street number and name: | |
| Suburb: | Postcode: |
| Home phone: | |

| POSTAL ADDRESS OF STUDENT (IF NOT THE SAME AS HOME ADDRESS) | |
|---|-----------|
| Street number and name: | |
| Suburb: | Postcode: |

| EMERGENCY CONTACT 1 – OTHER THAN PARENT/GUARDIAN | |
|--|-------------|
| Name: | |
| Relationship to Child: | |
| Mobile phone: | Home phone: |

| EMERGENCY CONTACT 2 – OTHER THAN PARENT/GUARDIAN | |
|--|-------------|
| Name: | |
| Relationship to Child: | |
| Mobile phone: | Home phone: |

| | | |
|---------------------------|------------------------------|-----------------------------|
| Are you a Defence Family? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
|---------------------------|------------------------------|-----------------------------|

| PREVIOUS SCHOOL/PRESCHOOL PERMISSION |
|--|
| Name and address of previous school/preschool: |
| <p>I/We give permission for the school to contact the previous school or pre-school and gather reports and information to support educational planning, in line with the Privacy Policy available at the school website</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><i>(If no, please contact the school to discuss this matter further)</i></p> |

Does the student or their parent(s)/guardian(s) speak a language other than English at home?
Please record all languages spoken.

| | | Student | Parent A/Guardian 1 | Parent B/Guardian 2 |
|------------|-------------------------------|--------------------------|--------------------------|--------------------------|
| No | English only | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Yes | Other – please list languages | | | |
| | | | | |
| | | | | |

MEDICAL INFORMATION

| | | | |
|--|---|--|---------|
| Doctor's name: | | | |
| Doctor's address: | | | |
| Suburb: | | Postcode: | Phone: |
| Medicare number: | | Ref number: | Expiry: |
| Private health insurance: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Fund: | Number: |
| Ambulance cover: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Number: | |
| | <i>In the event of an emergency an ambulance will be called if required</i> | | |
| Medical conditions: | <p><i>Please specify any relevant medical conditions for the student, e.g. asthma, diabetes, anaphylaxis, and/or any medications prescribed for the student. A Medical Management Plan signed by a relevant medical practitioner (doctor/nurse) will be required for each of the medical conditions listed.</i></p> <p><i>Please list specific details for any known allergies that do not lead to anaphylaxis, e.g. hay fever, rye grass, animal fur.</i></p> | | |
| Has the student been diagnosed as being at risk of anaphylaxis? | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| If yes, does the student have an EpiPen? | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| My child has Asthma / Anaphylaxis plan(s) | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| I have supplied the school with this/these relevant medical plan/s | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |

Please provide all required information in this section to allow us to meet our duty of care obligations and facilitate the smooth transition of your child into our school. It will assist the school to implement appropriate adjustments and strategies to meet the particular needs of your child. If the information is not provided or is incomplete, incorrect or misleading, current or ongoing enrolment may be reviewed.

ADDITIONAL NEEDS

Is your child eligible or currently receiving National Disability Insurance Scheme (NDIS) support?

Yes ☐ No ☐

Does your child present with:

| | | | | | |
|--|--------------------------|-----------------------|--------------------------|---|--------------------------|
| Autism (ASD) | <input type="checkbox"/> | Behavioural concerns | <input type="checkbox"/> | Hearing impairment | <input type="checkbox"/> |
| Intellectual disability or developmental delay | <input type="checkbox"/> | Mental health issues | <input type="checkbox"/> | Oral language/ communication difficulties | <input type="checkbox"/> |
| ADD/ADHD | <input type="checkbox"/> | Acquired brain injury | <input type="checkbox"/> | Vision impairment | <input type="checkbox"/> |
| Giftedness | <input type="checkbox"/> | Physical impairment | <input type="checkbox"/> | Other condition (please specify) | <input type="checkbox"/> |

Other condition:

Has your child ever seen a:

| | | | | | |
|--------------------------|--------------------------|------------------------|--------------------------|--------------------|--------------------------|
| Paediatrician | <input type="checkbox"/> | Physiotherapist | <input type="checkbox"/> | Audiologist | <input type="checkbox"/> |
| Psychologist/ counsellor | <input type="checkbox"/> | Occupational therapist | <input type="checkbox"/> | Speech pathologist | <input type="checkbox"/> |
| Psychiatrist | <input type="checkbox"/> | Continence nurse | <input type="checkbox"/> | | |

Other specialist (please specify):

Have you attached all relevant information/reports? Yes ☐ No ☐

Please include reason for referral:

| PARENT A / GUARDIAN A INFORMATION | | | | | |
|---|--|--|---|--|--|
| Surname: | | Title: | | First name: | |
| Address: | | | | | |
| Home phone: | | Work phone: | | Mobile: | |
| SMS messaging: (for emergency and reminder purposes) | | | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Email: | | | | | |
| Government Requirement | Occupation: | What is the occupation group? (select from list of parental occupation groups in the School Family Occupation Index at the back of this form) | | | |
| Religion: (include rite) | | Nationality: Ethnicity if not born in Australia: | | | |
| Country of birth: | <input type="checkbox"/> Australia | <input type="checkbox"/> Other (please specify): | | | |
| What is the highest year of primary or secondary school Parent A/Guardian 1 has completed? <i>(Persons who have never attended secondary school, tick 'Year 9 or below'.)</i> | | | | | |
| Year 9 or below <input type="checkbox"/> | Year 10 or equivalent <input type="checkbox"/> | Year 11 or equivalent <input type="checkbox"/> | Year 12 or equivalent <input type="checkbox"/> | | |
| What is the level of the highest qualification Parent A/Guardian A has completed? | | | | | |
| No post-school qualification <input type="checkbox"/> | Certificate I to IV (including trade certificate) <input type="checkbox"/> | Diploma/Advanced diploma <input type="checkbox"/> | Bachelor degree or above <input type="checkbox"/> | | |

| PARENT B / GUARDIAN B INFORMATION | | | | | |
|---|--|--|---|------------------------------|-----------------------------|
| Surname: | | Title: | | First name: | |
| Address: | | | | | |
| Home phone: | | Work phone: | | Mobile: | |
| SMS messaging: (for emergency and reminder purposes) | | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Email: | | | | | |
| Government Requirement | Occupation: | What is the occupation group? (select from list of parental occupation groups in the School Family Occupation Index at the back of this form) | | | |
| Religion: (include rite) | | Nationality: Ethnicity if not born in Australia: | | | |
| Country of birth: | <input type="checkbox"/> Australia | <input type="checkbox"/> Other (please specify): | | | |
| What is the highest year of primary or secondary school Parent B/Guardian 2 has completed? <i>(Persons who have never attended secondary school, tick 'Year 9 or below'.)</i> | | | | | |
| Year 9 or below <input type="checkbox"/> | Year 10 or equivalent <input type="checkbox"/> | Year 11 or equivalent <input type="checkbox"/> | Year 12 or equivalent <input type="checkbox"/> | | |
| What is the level of the highest qualification Parent B/Guardian 2 has completed? | | | | | |
| No post-school qualification <input type="checkbox"/> | Certificate I to IV (including trade certificate) <input type="checkbox"/> | Diploma/Advanced diploma <input type="checkbox"/> | Bachelor degree or above <input type="checkbox"/> | | |

| HOME CARE ARRANGEMENTS | |
|--|---|
| <input type="checkbox"/> Living with immediate family | <input type="checkbox"/> Out-of-home care |
| <input type="checkbox"/> Carer/guardian | <input type="checkbox"/> Kinship care |
| <input type="checkbox"/> Shared parenting, e.g. one week with each parent: Days with Parent A/Guardian 1: Days with Parent B/Guardian 2: | <input type="checkbox"/> Other (please specify) |

| COURT ORDERS OR PARENTING ORDERS <i>(if applicable)</i> |
|--|
| Are there any current court orders or parenting orders relating to the student? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If yes, copies of these court orders/parenting orders (e.g. AVOs, Family Court/Federal Magistrates Court orders or other relevant court orders) must be provided. |
| Is there any other information you wish the school to be aware of? |

| | |
|--|---|
| Do you have a Health Care Card or Pensioner Concession Card or Veteran Affairs Card or Foster Parent ID? | Yes <input type="checkbox"/> No <input type="checkbox"/> Please specify which cards: |
| Please provide a copy of any relevant cards | |

The Camps, Sports, Excursion Fund (CSEF) is available to parents who are an eligible beneficiary of a Centrelink pension, allowance or benefit AND a holder of either a Health Care Card OR Pensioner Concession Card OR a Veteran Affairs Pensioner OR Foster Parent. An application must be submitted to the school during February on the year of commencement (forms and further information can be obtained from the school office).

Are you eligible for CSEF? Yes ☐ No ☐

| | | |
|---|------------------------------|-----------------------------|
| Do you have a Working With Children Check (WWCC)? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Please provide a copy of your WWCC | | |

| PAYMENT COMMITMENT | | | | |
|---|------------|--------------------------------|-----------------------------|--------------------------------------|
| Who will be responsible for payment of the school fees and levies? PLEASE NOTE % OF FEES MUST TOTAL 100% (E.g person 1 responsible for 50% and person 2 responsible for 50% = 100%) | | | | |
| Surname | First name | Address / Email / Phone number | Relationship to the student | % of fees responsible for (e.g. 50%) |
| 1. | | | | |
| 2. | | | | |

| | | |
|--|-------|-------|
| PARENT/CARER/ GUARDIAN SIGNATURE: | NAME: | SIGN: |
| PARENT/CARER/ GUARDIAN SIGNATURE: | NAME: | SIGN: |

Note: The Victorian Government provides the following guidance regarding admission requirements:

Consent

The signature of:

1. student, if they are over 15 and living independently
2. parent as defined in the *Family Law Act 1975*

Note: In the absence of a current court order, each parent of a child who is not 18 has equal parental responsibility.

3. both parents for parents who are separated, or a copy of the court order with any impact on the relationship between the family and the school
4. an informal carer, with a statutory declaration.
5. Carers:
 1. may be a relative or other carer
 2. have day-to-day care of the student with the student regularly living with them
 3. may provide any other consent required e.g. excursions.

Notes for informal carer:

1. statutory declarations apply for 12 months
2. the wishes of a parent prevail in the event of a dispute between a parent legally responsible for a student and an informal carer.

Note: Secondary students may complete parts of the form and co-sign.

Disclaimer: Personal information will be held, used and disclosed in accordance with the school's Privacy Collection Notice and Privacy Policy available on its website

Please return the following to enrol@smwodonga.catholic.edu.au

- ☐ Completed and signed provisional offer of enrolment
- ☐ Any asthma or anaphylaxis plans (if applicable)
- ☐ Any relevant medical information or reports (if applicable)
- ☐ A copy of any parenting orders (if applicable)
- ☐ A copy of any relevant cards (health care card, gold veteran card or foster parent ID) (if applicable)
- ☐ Victorian Working with Children Check card (if applicable)

SCHOOL FAMILY OCCUPATION INDEX

Parent Occupation Groups - please select the appropriate group from the following list.

GROUP N

Unemployed for more than 12 months If you are not currently in paid work but have had a job in the last 12 months, or have retired in the last 12 months, please use your last occupation to select from the list. If you have not been in paid work for the last 12 months, enter 'N' into the 'occupation code' field on the enrolment form.

OCCUPATION GROUP A

Senior management in large business organisations, government administration and defence and qualified professionals.

SENIOR MANAGEMENT IN LARGE BUSINESS ORGANISATIONS

Senior Executive/ Manager/Department Head in industry, commerce, media or other large organisation

Business e.g. chief executive, managing director, company secretary, finance director, chief accountant, personnel/ industrial relations manager, research and development manager

Media e.g. newspaper editor, film/television/radio/stage producer/director/manager

GOVERNMENT ADMINISTRATION

Public Service Manager (Section head or above) e.g. regional director, hospital/health services/nurse administrator, school principal, faculty head/dean, library/museum/gallery director, research /facility manager, police/fire services administrator

Defence Forces Commissioned Officer

QUALIFIED PROFESSIONALS

Generally have a degree or higher qualifications and experience in applying this knowledge to: design, develop or operate complex systems, identify, treat and advise on problems, teach others.

Health e.g. GP or specialist, registered nurse, dentist, pharmacist, optometrist, physiotherapist, chiropractor, veterinarian, psychologist, therapy professional, radiographer, podiatrist, dietician] **Education** e.g. school teacher, university lecturer, VET/special education/ESL/private teacher, education officer

Law e.g. judge, magistrate, barrister, coroner, solicitor, lawyer

Social Welfare e.g. social/welfare/community worker, counsellor, minister of religion, economist, urban/regional planner, sociologist, librarian, records manager, archivist, interpreter/translator

Engineering e.g. architect, surveyor, chemical/civil/electrical/ mechanical/mining/other engineer

Science e.g. scientist, geologist, meteorologist, metallurgist

Computing e.g. IT services manager, computer systems designer/administrator, software engineer, systems/applications programmer

Business e.g. management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer

Air/sea transport e.g. aircraft pilot, flight officer, flying instructor, air traffic controller, ship's captain/officer/pilot

OCCUPATION GROUP B

Other business owners/managers, arts/media/ sportspersons and associate professionals.

BUSINESS OWNER / MANAGER

Farm/business owner/manager e.g. crop and/or livestock farmer/farm manager, stock and station agent, building/ construction, manufacturing, mining, wholesale, import/ export, transport business manager, real estate business

Specialist manager e.g. works manager, engineering manager, sales/marketing manager, purchasing manager, supply/shipping manager, customer service manager, property manager, personnel, industrial relations

Financial services manager e.g. bank branch manager, finance/investment/insurance broker, credit/loans officer

Retail sales/services manager e.g. shop, post office, restaurant, real estate agency, travel agency, betting agency, petrol station, hotel/motel/caravan park, sports centre, theatre/cinema, gallery, car rental, car fleet, railway station

ARTS / MEDIA / SPORTSPERSONS

Artist/Writer e.g. editor, journalist, author, media presenter, photographer, designer, illustrator, musician, actor, dancer, painter, potter, sculptor

Sports e.g. sportsman/woman, coach, trainer, sports official

ASSOCIATE PROFESSIONALS

Generally have diploma /technical qualifications and provide support to managers and professionals

Medical, science, building, engineering, computer technician/associate professional

Health/social welfare e.g. enrolled nurse, community health worker, paramedic/ambulance officer, massage therapist, welfare/parole officer, youth worker, dental hygienist/technician

Law e.g. police officer, government inspector, examiner or assessor, occupational/environmental health officer, security advisor, private, law clerk, court officer, bailiff

Business/administration e.g. recruitment/employment/ industrial relations/training officer, marketing/ advertising specialist, market research analyst, technical sales representative, retail buyer, office/business manager, project manager/administrator, other managing supervisors

Defence Forces e.g. senior non-commissioned officer

Other e.g. library technician, museum/gallery technician, research assistant, proof reader

OCCUPATION GROUP C

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.

TRADESMEN/WOMEN

Trades e.g. Electrician, plumber, welder, cabinet maker, carpenter, joiner, plasterer, tiler, stonemason, painter decorator, butcher, pastry cook, panel beater, fitter, toolmaker, aircraft engineer

CLERKS, SKILLED OFFICE, SALES AND SERVICE STAFF

Clerk e.g. bookkeeper, bank clerk, PO clerk, statistical/ actuarial clerk, accounts/claims/audit/payroll clerk, personnel records clerk, registry/filing clerk, betting clerk, production recording clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk/dispatcher, bond clerk, customs agent/clerk, customer inquiry/complaints/service clerk, hospital admissions clerk

Office e.g. secretary, personal assistant, desktop publishing operator, switchboard operator

Sales e.g. company sales representative (goods and services), auctioneer, insurance agent/assessor/loss adjuster, market researcher

Carer e.g. aged/disabled/refuge care worker, child care assistant, nanny

Service e.g. meter reader, parking inspector, postal delivery worker, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/gaming table supervisor

OCCUPATION GROUP D

Machine operators, hospitality staff, office assistants, labourers and related workers

DRIVERS, MOBILE PLANT, PRODUCTION/PROCESSING MACHINERY AND OTHER MACHINERY OPERATORS

Driver or mobile plant operator e.g. car, taxi, truck, bus, tram or train driver, courier/ deliverer, forklift driver, street sweeper driver, garbage collector, bulldozer/loader/grader/ excavator operator, farm/horticulture/forestry machinery operator

Production/processing machine operator e.g. engineering, chemical, petroleum, gas, water, sewerage, cement, plastics, rubber, textile, footwear, wood/paper, glass, clay, stone, concrete, production/processing machine operator

Machinery operator e.g. photographic developer/printer, industrial spray painter, boiler/air- conditioning/ refrigeration plant, railway signals/points, crane/hoist/lift, bulk materials handling machinery

HOSPITALITY, OFFICE STAFF

Sales staff e.g. 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, sales demonstrator, shelf stacker

Office staff e.g. typist, word processing/dataentry/business machine operator, receptionist

Hospitality staff e.g. hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, fast food cook, usher, porter, housekeeper

Assistant/aide e.g. trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, home helper, salon assistant, animal attendant

LABOURERS AND RELATED WORKERS

Defence Forces other ranks (below senior NCO) without trade qualification not included above

Agriculture, horticulture, forestry, fishing, mining worker e.g. farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand

Other worker e.g. labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor