



# BUNBURY PRIMARY SCHOOL

## APPLICATION FOR ENROLMENT FORM

### OFFICE USE ONLY

Date received: \_\_\_\_\_  
 Year Level: .... \_\_\_\_\_  
 Birth certificate/Passport/Travel document sighted (Circle):  
 AIR immunisation history statement  YES  NO  
 Student resides within local intake area  YES  NO  
 Visa sighted:  YES  NO  
 Family Court Order/s:  YES  NO

### DECLARATION

The information and statements provided in this application for enrolment are true and accurate in relation to:

Name of child: \_\_\_\_\_

Name of person enrolling child (complete below):

Title: \_\_\_\_\_ 1<sup>st</sup> Name: \_\_\_\_\_ 2<sup>nd</sup> Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Tel (H): \_\_\_\_\_ Tel (W): \_\_\_\_\_ Mobile: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**NOTE 1:** Children may be enrolled in Kindergarten in one school only, either public or private.

**NOTE 2:** In the event that statements made in this application later prove to be false or misleading, a decision on this application may be reversed. Information supplied may need to be checked by the school.

### DOCUMENTS TO BE PROVIDED

#### Checklist:

Please place an \*X' in the box  to indicate each document attached (or sighted) to this application form.

1. Birth Certificate (original or certified copy) or extract or other identity documents .....
- if applicable.
2. Australian Immunisation Register (AIR) Immunisation History Statement; or AIR Immunisation History Form; or Immunisation Certificate issued by the Chief Health Officer .....
3. Copies of Family Court or any other court orders (if applicable) .....
4. Proof of address (e.g. utilities account or lease agreement) .....
5. Information relating to suspensions or exclusions .....
6. Information relating to disability .....

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

1. Date of entry into Australia .....
2. Passport or travel documents .....
3. Current visa subclass and previous visa subclass (if applicable) .....

#### If your child is a temporary visa holder, you must also provide:

Confirmation of placement or enrolment for an overseas fee-paying student or evidence of any permission to transfer provided by TAFE International WA .....

Or

Evidence of the visa for which the student has applied if the student holds a bridging visa .....

**PERSONAL DETAILS (PLEASE PRINT ALL DETAILS BELOW)**

Child's surname  Legal (if different):	Given names:	Date of birth:	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>
Surname of parent / responsible person:	Given names:	Mr / Mrs / Ms / Other:	
Residential Address (must be completed):			Postcode:
Nearest intersecting street:			
Postal Address (if different from residential address):			Postcode:
Telephone (Home):	Mobile Phone No:		
Work (if convenient):	Email:		
Are there any Family Court Orders regarding the day to day or long term care, welfare and development of the child? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Is the child subject to access restriction? If yes, please specify and attach supporting documentation. <input type="checkbox"/> YES <input type="checkbox"/> NO			
Current Year Level: _____ Start date: Beginning of school year 20____ <input type="checkbox"/> YES <input type="checkbox"/> NO. <b>If NO</b> , indicate start date: __/__/____			
Name of school at which the child is currently or was last enrolled:			
Immunisation: <b>you are required to provide the school with this information when you apply to enrol your child</b> Is the child immunised? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, does the child have an Australian Immunisation Register (AIR) Immunisation History Statement that is not more than two months old? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Will there be any brothers or sisters attending this school? <input type="checkbox"/> YES <input type="checkbox"/> NO Name/s and year levels:			
Is your child currently under suspension from a school? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name of school:			
Has your child ever been excluded from a school? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name of school:			
Is your child a permanent resident of Australia? <input type="checkbox"/> YES <input type="checkbox"/> NO If NO, please indicate date entered Australia: _____ Visa Sub Class No.: _____			
<b>Does your child have a disability/medical condition?</b> <i>This information will assist the school principal with considering whether any specific or additional resources are required and available to assist the school with providing the best educational program for your child.</i> <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please indicate whether it is: <input type="checkbox"/> Physical <input type="checkbox"/> Intellectual <input type="checkbox"/> Other medical condition/s Please outline nature of disability/medical condition/s (or attach details).  Application for Enrolment approved: _____ (Signature of Principal/Delegate)  _____/____/____ (date)			