

# Enrolment Application

Student Family Name: \_\_\_\_\_

Student First Name: \_\_\_\_\_

Level Applying For: \_\_\_\_\_

Commencing in Year: \_\_\_\_\_

## Marian College

*A Community growing in Faith & Love • Serving Others • Striving to Achieve • Thinking for the Future*

### OFFICE USE ONLY

Family Code: \_\_\_\_\_

Student Code: \_\_\_\_\_

Year Level of Entry: \_\_\_\_\_

Year of Entry: \_\_\_\_\_

Homeroom: \_\_\_\_\_

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

Novell ID No: \_\_\_\_\_

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

Enrolment Fee Paid: \_\_\_\_\_

Interview Time: \_\_\_\_\_

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

Passport/Visa No: \_\_\_\_\_

## PERSONAL DETAILS OF STUDENTS

Family Name:	Given Name:
Preferred Name:	Victorian Student Number:
Application for Year	7      8      9      10      11      12      in 20
Residential Address:	Telephone:
Suburb:	Postcode:
Date of Birth:	
Is your child an Aboriginal or a Torres Strait Islander? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Birth: _____	
If born overseas please indicate date of entry into Australia: _____ (please supply photocopy of Visa/Passport)	
Name of first school in Australia: _____ Date of first school year in Australia: _____	
Main language spoken at home: _____	
Do you have refugee status? <input type="checkbox"/> Yes Type: _____ <input type="checkbox"/> No	
Has your daughter attended an English Language School/Centre?	
<input type="checkbox"/> Yes (please supply photocopy of School Report) <input type="checkbox"/> No	
Name of English Language School/Centre:	
Address: _____ Date of Enrolment: _____	
Religion: _____	Parish: _____
Date of Baptism: _____	Date of First Eucharist: _____ Date of Confirmation: _____
Parish: _____	Parish: _____ Parish: _____
Present School: _____	Year Level: _____
How many years enrolled at present school: _____ (Please attach photocopy of latest school report)	
Do you give permission for the previous school to forward any relevant documentation about your daughter to Marian College? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Information for the mailing of reports & general correspondence (if different from above)	
Name: _____	
Address: _____	
Postcode: _____ Telephone: _____ Mobile Phone: _____	
Student's place of residence (Please indicate with whom the student lives with):	
<input type="checkbox"/> Mother <input type="checkbox"/> Grandparent/s <input type="checkbox"/> Aunt <input type="checkbox"/> other _____	
<input type="checkbox"/> Father <input type="checkbox"/> Brother <input type="checkbox"/> Uncle	
<input type="checkbox"/> Guardian <input type="checkbox"/> Sister <input type="checkbox"/> 18 - no guardian	

### FOR STUDENTS ENROLLING IN VCE:

Previous VCE Enrolment  Yes  No

If yes please complete VCE Student Number: \_\_\_\_\_

**N.B. Students with previous VCE enrolment should attach a copy of their VCAA Statement of Results.**

PARENTAL/GUARDIAN INFORMATION	
FATHER/GUARDIAN	MOTHER/GUARDIAN
Family Name:	Family Name:
Given Name:	Given Name:
Address:	Address:
Suburb:	Suburb:
Postcode:	Postcode:
Home Phone:	Home Phone:
Mobile Phone:	Mobile Phone:
Business Phone:	Business Phone:
Email:	Email:
Religion:	Religion:
Main Language Spoken at home:	Main Language Spoken at home:
Country of Birth:	Country of Birth:
Date of entry into Australia:	Date of entry into Australia:
Name of Employer:	Name of Employer:
Business Address:	Business Address:
Occupation:	Occupation:
If Guardian, please state relationship to student:	If Guardian, please state relationship to student:
Please provide an email address for the electronic delivery of the College Newsletter, the <b>Marian News</b> : _____	

SUPPLEMENTARY ENROLMENT INFORMATION FOR NATIONAL REPORTING		
		Father/Guardian    Mother/Guardian
<b>Highest level of primary or secondary school completed</b> <i>(Please tick)</i>	Year 12 or equivalent	<input type="checkbox"/> <input type="checkbox"/>
	Year 11 or equivalent	<input type="checkbox"/> <input type="checkbox"/>
	Year 10 or equivalent	<input type="checkbox"/> <input type="checkbox"/>
	Year 9 or equivalent or below	<input type="checkbox"/> <input type="checkbox"/>
<b>Highest qualification completed</b> <i>(Please tick)</i>	Bachelor degree or above	<input type="checkbox"/> <input type="checkbox"/>
	Advance diploma/Diploma	<input type="checkbox"/> <input type="checkbox"/>
	Certificate I to IV (including trade certificate)	<input type="checkbox"/> <input type="checkbox"/>
	No non-school qualification	<input type="checkbox"/> <input type="checkbox"/>

## SPECIAL PROGRAM OR ASSISTANCE

Please tick if the following have been part of your daughter's school education:

- English as a Second Language Program       Visiting Teacher  
 Integration       New Arrivals Program  
 Special Needs Program

Are there any other issues about your daughter's learning and care that should be taken into account in our planning for her enrolment?       Yes       No

If yes, please specify: \_\_\_\_\_

Has your daughter any special needs?       Yes       No

If yes, please identify: \_\_\_\_\_

Does your daughter receive a disability allowance from Centrelink?       Yes       No

Was your daughter eligible for Commonwealth funding for special needs?       Yes       No

Please indicate if any of the following (or other) areas may affect your child's schooling:

- Exceptional abilities       Speech or language disabilities  
 Problems in home life       Social Interaction

please comment: \_\_\_\_\_

## MEDICAL INFORMATION

Has your daughter been diagnosed with Anaphylaxis?       Yes       No

If 'Yes' does she have an Anaphylaxis Management Plan provided by her doctor?       Yes       No

**If 'Yes' please attach a copy with the Enrolment Form.**

Has your daughter any health/medical conditions of which the school should be aware?

- Eye sight       Hearing loss       Speech       Physical Disability  
 Diabetics       Asthma       Allergies       Other

please specify: \_\_\_\_\_

Is your daughter receiving regular treatment/medication?       Yes       No

please specify: \_\_\_\_\_

Doctor's Name:

Phone No:

Address:

Medicare No:

Medical Insurance Name:

Card No:

Does your family have Ambulance Cover?       Yes

Membership No:

No

***In the event of an accident or illness, I/we authorise the person in charge to consent, where it is impractical to communicate with me, to my daughter receiving such medical or surgical treatment as may be deemed necessary.***

Signature of Father/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Mother/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## EMERGENCY CONTACT OTHER THAN PARENTS

Please give the name and telephone number of two people, **other than the parent/s or guardian**, who will act as a contact, should your daughter become ill at school and we are **UNABLE to contact you**:

Name of contact person:

Relationship to student:

Home Phone:

Business Phone:

Mobile Phone:

Name of contact person:

Relationship to student:

Home Phone:

Business Phone:

Mobile Phone:

## FAMILY INFORMATION

Position of Daughter in Family? (eg. First)

Do you have other daughter's enrolled at Marian?  Yes  No

**Name of Brother/s and Sister/s**

**Date of Birth**

**Preschool/School/College**

Name of Brother/s and Sister/s	Date of Birth	Preschool/School/College

## ACCOUNT INFORMATION:

I recognise our financial commitment to pay full tuition fees for the duration of my/our daughter's education at Marian College. If my/our financial situation should change, I/we will contact the Accounts Department.

Mother's Signature:

Date:

Father's Signature:

Date:

Guardian's Signature:

Date:

Person/s responsible for the receiving school fee statements:

Name:

Home Phone:

Business Phone:

Mobile Phone:

Address:

Signature:

Date:

If English is not your primary language, and you need assistance in dealing with any school issues, please indicate a contact person we can speak to:

Name:

Home Phone:

Business Phone:

Mobile Phone:

Address:

Signature:

Date:

Do you have a Centrelink Healthcare Card  Yes Please provide Card Number: \_\_\_\_\_  No

Does your daughter receive: Youth Allowance:  Yes  No or Abstudy:  Yes  No

## PUBLICATION OF STUDENT WORK AND PHOTOGRAPHS

At certain times throughout the year, our students may have the opportunity to be photographed for our school publications, such as the school's newsletter, magazine, prospectus, brochures, displays, or website, or to promote the school in local newspapers.

Please sign below indicating your permission for Marian College to publish your daughters work or photograph as indicated above.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Catholic Education Office Melbourne (CEOM) and the Catholic Education Commission of Victoria Ltd (CECV) may also require student photographs in print and online promotional and educational materials.

Please sign below indicating your permission for the CEOM & CECV to publish your daughters work or photograph as indicated above.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## EXPECTATIONS OF MARIAN COLLEGE

Upon enrolment at Marian College I/we agree to abide by the reasonable expectations of the College:

- *We will actively support the ideals and values of the College as expressed in the College Mission Statement.*
- *We will fully support the Religious Education Program as offered by the College.*
- *We will support participation of my/our daughter in activities considered by the College as a necessary part of the curriculum and the completion of all set work.*
- *We will support the College's student behaviour expectations.*
- *We will adhere and support the College's uniform expectations.*
- *We will encourage our/my daughter to participate in co-curricular activities offered by the College.*
- *We will agree to ensure that my/our daughter attends the College regularly and punctually.*
- *We will support the College discipline policy.*
- *We will agree to the payment of the school fees and levies as set by the Marian College Stewardship Council.*
- *We will notify the College in writing of any change of address or telephone numbers.*
- *We will agree to the payment of a non-refundable Enrolment Fee once my/our daughter is accepted by the College.*

Signature of Father/Guardian:	Date:
Signature of Mother/Guardian:	Date:
Signature of Student:	Date:

## HOW DID YOU FIND OUT ABOUT MARIAN COLLEGE?

- |  |  |   |
|--|--|---|
| Marian College Website <input type="checkbox"/>    | Local Newspaper <input type="checkbox"/> | Themes Magazine <input type="checkbox"/>        |
| Friend <input type="checkbox"/>                    | Family <input type="checkbox"/>          | Family Member attended <input type="checkbox"/> |
| Daughter's Primary School <input type="checkbox"/> |  |   |
| Other: _____                                       |  |   |

## CHECKLIST: *Please tick boxes once you have completed the following:*

- |  |  |
|--|--|
| <b>Attached a photocopy of:</b><br>Passport or Visa if born overseas <input type="checkbox"/><br>Secondary School Reports (previous 2 years) <input type="checkbox"/><br>School Report if attended an English Language Centre <input type="checkbox"/> | <b>Completed &amp; signed relevant questions regarding:</b><br>Email Address for Receiving Marian News <input type="checkbox"/><br>Permission to publish daughters photo <input type="checkbox"/><br>Emergency Contact other than Parents <input type="checkbox"/> |
|--|--|



# Marian College

196 Glengala Road, Sunshine West 3020

Phone 9363 1711 Fax: 9363 2386 [www.mariansw.catholic.edu.au](http://www.mariansw.catholic.edu.au)

## STANDARD COLLECTION NOTICE

1. The School collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil's enrolment at the School. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the School to provide schooling to the pupil and to enable them 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 a school require certain information to be collected and disclosed. These include relevant Education Acts, and Public Health and Child Protection laws.
4. Health information about pupils is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. We may ask you to provide medical reports about pupils from time to time.
5. The School from time to time discloses personal and sensitive information to others for administrative and educational purposes, including to facilitate the transfer of a pupil to another school. This includes to other schools, government departments, Catholic Education Office, the Catholic Education Commission, the School's local diocese and the parish, Schools within other Dioceses/other Dioceses, medical practitioners, and people providing services to the School, including specialist visiting teachers, sports coaches, volunteers and counsellors.
6. Personal information collected from pupils is regularly disclosed to their parents or guardians.
7. The School may store personal information in the 'cloud' which may mean that it resides on servers which are situated outside Australia.
8. The School's Privacy Policy sets out how parents or pupils may seek access to personal information collected about them. However, there will be occasions when access is denied. Such occasions would include 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 pupil, or where pupils have provided information in confidence.
9. The School Privacy Policy also sets out how you may complain about a breach of privacy and how the School will deal with such a complaint.
10. As you may know 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.
11. On occasions information such as academic and sporting achievements, pupil activities and similar news is published in School newsletters and magazines and on our website. Photographs of pupil activities such as sporting events, school camps and school excursions may be taken for publication in School newsletters and magazines and on our website. The School will obtain separate permissions from the pupils' parent or guardian prior to publication if we would like to include photographs or other identifying material in promotional material for the school or otherwise make it available to the public such as on the internet.
12. We may include pupils' and pupils' parents' contact details in a class list and School directory.
13. 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, that they can access that information if they wish and that the School does not usually disclose this information to third parties.