

Phone: 9634-3675 Fax: 9899-5911 74A Glenhaven Road, Glenhaven, NSW, 2156 E-mail: glenhaven-p.school@det.nsw.edu.au Website: www.glenhaven-p.schools.nsw.edu.au

# IF YOUR CHILD WAS BORN IN AUSTRALIA

- Original Birth Certificate
- Proof of Residence 3 documents required
  - If you own your home -Or
     If you rent your home Current Council Rates
     Current Stamped Lease Agreement with Rental Bond Lodgement Receipt
  - 2. Electricity Bill
  - 3. Another utility bill (e.g. gas, water or telephone)
- Immunisation Certificate (See overleaf for certificate example Blue Book not accepted)

# Please note if both parents are born overseas, proof of one parent's Australian Citizenship (e.g. passport or citizenship certificate) needs to be sighted.

Only original documents can be accepted (photocopied, certified and returned).

# IF YOUR CHILD WAS NOT BORN IN AUSTRALIA

- Passport
- Proof of Residence 3 documents required
  - If you own your home -Or
     If you rent your home Current Council Rates
     Current Stamped Lease Agreement with Rental Bond Lodgement Receipt
  - 2. Electricity Bill
  - 3. Another utility bill (e.g. gas, water or telephone)
  - Immunisation Certificate (from an Australian GP)

If you require any assistance in completing the enclosed forms, or have any further questions, please do not hesitate to contact us or call in to the Administration Office.

Administration Office



# Application to enrol in a NSW Government school

# Thank you for your interest in seeking enrolment in a NSW Government school.

This application to enrol form is to be completed in English. If you need an explanation of any of the questions or help in completing this application, please ask for assistance from the school staff. You are welcome to provide further information on an attached sheet.

# Before beginning to complete this form please refer to pages 15 and 16 of this form for details about completing this application and documents that you are required to provide to the school. An explanation of the purpose and use of the information you provide is given on page 13.

The school will notify you of the results of your application. The information you have provided will be used by the school for student enrolment if your application is accepted. Please do not purchase items such as uniforms until you receive confirmation of enrolment.

# Student details

# A. Student details

Family name	
First given name	
Second given name	
Preferred first name	
Gender	Male Female Date of birth / / day month year
Into which year are you seekin	ng to enrol this student? (mark only one box) K 1 2 3 4 5 6 7 8 9 10 11 12
Intended start date	/ / day month year
OFFICE USE ONLY	
School name	
Student registration number	Date of enrolment at this school  //
Roll Class (eg 3 SMITH, 9R2)	
Current scholastic year in whic	th the student is enrolled (K-12) House group
SRE/SEE class	
Out of home care Yes	No Name of statutory care provider

#### **Student details**

#### **STUDENT'S BROTHERS AND SISTERS**

Does this student have any brothers or sisters currently, or previously (in the past 5 years), enrolled at a NSW Government school?

Yes	No						
lf yes, nam	e of most recent s	chool?					
If yes, plea	se provide the de	tails of the most recen	ntly enrolled b	rother or sister.			
Gender		Male I	Female	Date of birth	 day month	year	
Brother's/s	ister's family nan	ie					
Brother's/s	ister's given nam	e					
ABORIGI	NALITY						
Is the stud	ent of Aboriginal	or Torres Strait Island	er origin?				
No	Aboriginal	Torres Strait Islander	Both Abo	original and Torres S	trait Islander		

#### LANGUAGES OTHER THAN ENGLISH SPOKEN AT HOME

#### Does the student speak a language other than English at home?

No, English only Yes

If yes, what language(s) other than English are spoken at home?

Please write the actual language(s) used, for example, Swahili (not African), Punjabi (not Indian), Auslan, Aboriginal English, Torres Strait Creole.

Main language other than English spoken at home by the student

Other language(s) spoken at home

#### SPECIAL RELIGIOUS EDUCATION

In every government school, time is to be allowed for the religious education of children of any religious persuasion.

Completion of the following is optional. This information is used to plan for Special Religious Education (SRE) at individual schools. SRE is taught by approved SRE providers.

#### Please identify the student's religion if you want the student to participate in SRE.

Information about the organisation of SRE at individual schools, and details of alternative activities, will be provided by your school.

Special Education in Ethics (SEE) is an alternative activity offered at some primary schools for students who do not participate in SRE. Please contact your school if you would like further information about SEE or other alternative activities.

#### **STUDENT'S MOBILE PHONE**

Student's mobile phone number (if applicable)

Student details						
COUNTRY OF BIRTH						
What is the country of birth of the student seeking	to be enrolled?					
STUDENT'S RESIDENCY STATUS	Australian citizen		New Zealand citiz	<b>a</b> n	Norfolk Islander	
What is the student's residency status?	Permanent residen	<b>*</b>	Temporary visa ho		Residence determination	
A student born in Australia is only automatically a			, ,			sidont
when the student was born. To determine the student is only alternatically a bepartment's website. If the student is a tempora student is holding or applying for visa subclass 57	dent's residency s ry visa holder, plea	tatus, refei ase contac	to the Proof of Id t the Temporary R	entity and Re esidents Prog	esidency Status policy or gram on 1300 300 229.	n the
If born overseas, on what date did the student arriv	ve in Australia?	/	/			
		day	month year			
For Australian born citizens, if the student was livin	ng overseas for tw	o or more y	ears, on what dat	e did the stu	dent return to Australia?	
		/	/			
		-	month year			
If the student is a permanent or temporary visa h	nolder, please pro	vide the fo	ollowing information	ion		
Current visa sub-class	Visa expiry date	/	/			
		,	month year			
If this is not the student's first enrolment at an A	ustralian school,	what was	the student's first	date of enr	olment at an Australian	school?
		/	/			
PREVIOUS SCHOOLS		day	month year			
Please provide details of any school where the stud	ent has previously	been enro	lled (NSW, intersta	te or oversea	s) starting with the most	recent.
Name of school last attended						
Location of school last attended (suburb/town/state/c	ouptry)					
	ountry)					
Dates of attendance (for example: from 05/2009 to 0	6/2011)	,	to	,		
Dates of attendance (for example, from 05/2009 to 0		/ nth	to vear mo	l nth ve	ear	
Names of other schools attended and their location			year mo	intir ye		
If more space is needed, please attach a page ma	arked `Previous Sc	hools'.				
KINDERGARTEN STUDENTS						
In the year before school, has the student been in r	on-parontal care	on a roquia	r basis and/or atto	ndad anv ath	or adjugational programs	-7
-	ion-parentai care o	on a regula	i basis anu/or atte	nueu any ou	ler educational programs	
Yes No		4		6 11		
If <b>yes</b> , indicate any of the following that apply and show				or full time (15	hours or more per week).	
Preschool		Full time	Postcode			
Long Day Care (with a preschool program)	Part time	Full time	Postcode			
Long Day Care (without a preschool program)		Full time	Postcode			
Family Day Care		Full time				
Grandparent	Part time	Full time				
Other formal or informal care (eg occasional care, playgroup, other relative, nanny		Full time				
Preschools usually operate on school days and in s	chool terms, and p	orovide stru	ctured early learnir	ng to children	in the year or two befor	e school.
Long day care services offer all-day care for m	ost of the year for	r children a	ared 0 to 6 They	may also off	er 'preschool programs	,

specifically for children in the year or two before school.

#### Name of preschool/long day care service

# B. Parent/Carer 1 with whom this student normally lives

If applicable, copies of any relevant family law or other court orders must be provided.

Title (eg Mr/Ms/Mrs/Dr)				Gender	Male	Female
Relationship to student (	eg moth	er/father/carer,	)			
Family name						
Given name						
Country of birth						
Aboriginality	No	Aboriginal	Torres Strait Islander	Both Aborigina	l and Torres	Strait Islander

#### **OCCUPATION GROUP**

#### Please choose the group that best describes your occupation

Mark one box only. If you have retired or stopped work in the last 12 months, choose the group in which you used to work. See page 16 for more information and examples.

Group 8	Have not been in paid work in the last 12 months
Group 4	Machine operators, hospitality staff, assistants, labourers and related workers
Group 3	Tradespeople, clerks and skilled office, sales and service staff
Group 2	Other business managers, arts/media/sportspersons and associate professionals
Group 1	Senior management in large business organisation, government administration and defence, and qualified professionals

#### Occupation

#### **SCHOOL EDUCATION**

#### What is the highest level of schooling completed?

For persons who never attended school, mark 'Year 9 or equivalent or below' (mark one box only).

Year 12 or equivalent	Year 11 or equivalent	Year 10 or equivalent	Year 9 or equivalent or below
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#### **EDUCATIONAL QUALIFICATIONS**

#### What is the highest qualification completed?

No non-school qualification Certificate I to IV (including trade certificate) Advanced diploma/diploma Bachelor degree or above

#### LANGUAGES OTHER THAN ENGLISH SPOKEN AT HOME

#### Does this parent/carer speak a language other than English at home?

No, English only Yes

If yes, what language(s) other than English are spoken at home?

Please write the actual language(s) used, for example, Swahili (not African), Punjabi (not Indian), Auslan, Aboriginal English, Torres Strait Creole.

Main language other than English spoken at home by parent/carer 1

#### Other language(s) spoken at home

Interpreters may be available during school interviews. Would an interpreter be required? Yes No

# Parent/Carer 2 with whom this student normally lives

If applicable, copies of any relevant family law or other court orders must be provided.

Title (eg Mr/Ms/Mrs/Dr)				Gender	Male	Female
Relationship to student (	eg moth	er/father/carer,	)			
Family name						
Given name						
Country of birth						
Aboriginality	No	Aboriginal	Torres Strait Islander	Both Aborigina	l and Torres	Strait Islander

#### **OCCUPATION GROUP**

#### Please choose the group that best describes your occupation

Mark one box only. If you have retired or stopped work in the last 12 months, choose the group in which you used to work. See page 16 for more information and examples.

Group 8	Have not been in paid work in the last 12 months
Group 4	Machine operators, hospitality staff, assistants, labourers and related workers
Group 3	Tradespeople, clerks and skilled office, sales and service staff
Group 2	Other business managers, arts/media/sportspersons and associate professionals
Group 1	Senior management in large business organisation, government administration and defence, and qualified professionals

#### Occupation

#### **SCHOOL EDUCATION**

#### What is the highest level of schooling completed?

For persons who never attended school, mark 'Year 9 or equivalent or below' (mark one box only).

Year 12 or equivalent Year 11 o	or equivalent Year 10 or equivalent	t Year 9 or equivalent or below
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#### **EDUCATIONAL QUALIFICATIONS**

#### What is the highest qualification completed?

No non-school qualification Certificate I to IV (including trade certificate) Advanced diploma/diploma Bachelor degree or above

#### LANGUAGES OTHER THAN ENGLISH SPOKEN AT HOME

#### Does this parent/carer speak a language other than English at home?

No, English only Yes

If yes, what language(s) other than English are spoken at home?

Please write the actual language(s) used, for example, Swahili (not African), Punjabi (not Indian), Auslan, Aboriginal English, Torres Strait Creole.

#### Main language other than English spoken at home by parent/carer 2

#### Other language(s) spoken at home

Interpreters may be available during school interviews. Would an interpreter be required? Yes No

# Family details

# C. Parents/carers with whom this student normally lives Name to be used for all correspondence (eg Mr and Mrs A Black, Ms B Green) Residential address (eg 1 High Street, Sydney, NSW, 2000) Is this the residential address of the student to be enrolled? Yes No Correspondence address If you have a correspondence address that is different to your residential address please write it below (eg PO Box 51, Sydney, NSW, 2001). If the school needs to contact a parent/carer, please specify, in order of preference, who to contact If there are any special conditions or times relevant to any contact number, please include this in the comment box next to the number (If there are any special conditions or times relevant to any contact number, please include this in the comment box next to the number

#### NAME OF PARENT/CARER TO CONTACT FIRST

Phone number (mobile)

Phone number (home)

Phone number (work)

Contact email address

# NAME OF PARENT/CARER TO CONTACT SECOND

Phone number (mobile)

Phone number (home)

Phone number (work)

Contact email address

Comments

Comments

# D. Parents/carers not living with this student

Complete only if applicable. Copies of any relevant family law or other court orders must be provided. Please print and attach additional pages if required for multiple parents/carers not living with this student.

Title (eg Mr/Ms/Mrs/Dr)				Gender	Male	Female
Relationship to student (	eg moth	er/father/care	r)			
Family name						
Given name						
Aboriginality	No	Aboriginal	Torres Strait Islander	Both Aboriginal and	d Torres Stra	it Islander

#### **OCCUPATION GROUP**

#### Please choose the group that best describes your occupation

Mark one box only. If you have retired or stopped work in the last 12 months, choose the group in which you used to work. See page 16 for more information and examples.

Group 8	Have not been in paid work in the last 12 months
Group 4	Machine operators, hospitality staff, assistants, labourers and related workers
Group 3	Tradespeople, clerks and skilled office, sales and service staff
Group 2	Other business managers, arts/media/sportspersons and associate professionals
Group 1	Senior management in large business organisation, government administration and defence, and qualified professionals

#### Occupation

#### SCHOOL EDUCATION

What is the highest level of schooling completed? For persons who never attended school, mark 'Year 9 or equivalent or below' (mark one box only).

Year 12 or equivalent	Year 11 or equivalent	Year 10 or equivalent	Year 9 or equivalent or below	
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#### **EDUCATIONAL QUALIFICATIONS**

#### What is the highest qualification completed?

No non-school qualification Certificate I to IV (including trade certificate) Advanced diploma/diploma Bachelor degree or above

#### **CONTACT DETAILS**

If there are any special conditions or times relevant to any contact number, please include these in the comment box next to the number (eg Mondays and Tuesdays only).

Comments

Phone number (mobile)

Phone number (home)

Phone number (work)

Preferred email address for correspondence

### Family details

# D. Parents/carers not living with this student (continued)

Residential address (eg 1 High Street, Sydney, NSW, 2000)

Does the student sometimes reside at this address? Yes No

#### **Correspondence address**

If you have a correspondence address that is different to your residential address please write it below (eg PO Box 51, Sydney, NSW, 2001).

# Additional emergency contacts

#### E. Additional emergency contacts

Please nominate two people over the age of 18 years who may be contacted in the event of an emergency if the school is unable to contact the parents/carers listed in Section C. Ideally each contact should be someone who lives near the school. Please ensure that you have discussed with these people their willingness to be emergency contacts.

#### **CONTACT DETAILS** (first preference)

Family name

Given name

#### Relationship to student (eg neighbour/aunt/uncle)

If there are any special conditions or times relevant to any contact number, please include these in the comment box next to the number (eg Mondays and Tuesdays only).

Phone number (mobile)

Phone number (home)

Phone number (work)

#### **CONTACT DETAILS** (second preference)

Family name

Given name

Relationship to student (eg neighbour/aunt/uncle)

If there are any special conditions or times relevant to any contact number, please include these in the comment box next to the number (eg Mondays and Tuesdays only).

Phone number (mobile)

Phone number (home)

Phone number (work)

#### Comments

Department of Education | Application to enrol in a NSW Government school

#### Comments

# Student details – additional information

# F. Special circumstances

#### Are there any special circumstances about the student seeking to be enrolled that the school should know prior to enrolment?

(eg living apart from parental supervision, subject of a court order, subject of bullying by others, out of home care arranged by the state, pregnancy, mature age, asylum seeker student living in immigration detention, eg community detention).

Yes No

If yes, please provide a brief description of the circumstances. Write in the spaces below.

# G. Students with additional learning and support needs, including disability

Does the student re	quire sup	port for learning	because of disabilit	y? Yes	No
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Legislation and NSW Department of Education policy recognise that adjustments may be required for students with special needs, including students with disability, so that they can participate at school. School personnel and parents work together to identify the adjustments that may be needed to meet the student's learning and support needs.

Is there anything that you do or modify at home that may help us at school to meet the student's educational needs? Yes	onal needs? Yes No
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If yes, please specify

#### Please indicate any learning adjustments that may be required to allow the student to participate at school (complete only if applicable)

changes to learning programs and/or teaching strategies

communication, eg speaking and/or listening

modification to equipment, furniture, learning spaces and/or learning materials

support for personal care needs, eg hygiene, mealtimes and/or health care needs

social support to engage safely with other children and teachers

other (please specify)

#### Please indicate if the student has any of the following

autism	a hearing impairment	a language disorder
a physical disability	difficulties in learning	acquired brain injury
behaviour disorder	intellectual disability	mental health disorder
a vision impairment	other (please specify)	

#### Has any previous education provider prepared a documented plan to support the student's additional learning needs? Yes No

If yes, please provide details

# Student details – additional information

# H. Student medical details and health conditions

It is essential you inform the school before your child is enrolled if he or she has any medical conditions. This must include any known allergies. You should also contact the school as soon as you are aware of any newly diagnosed allergies, other medical conditions or changes to an existing condition. This will assist the school to support the safety and wellbeing of your child and allow planning to occur to determine the best way to meet the individual health and support needs of your child. This is important information for your child's safe participation at the school.

Note: Where the words 'your child' are used, they should be taken as a reference to the student seeking enrolment.

Student's Medicare number		Student's Medicare card refere	nce number					
Medicare card valid to date	/ month year							
Doctor's name/medical centre								
Doctor's address (eg 1 High Stree	et, Sydney, NSW, 2000)							
Doctor's phone number (work)	Doctor's phone number (work)							
· · · · ·	,	other doctor or medical specialist who may currently b completing Section H. Attach an additional page if rec	5,					
Allergy / medical condition	Doctor's name	Address	Telephone					

If your child has a documented plan to support any health or medical needs from a previous school or organisation (eg preschool, occasional care, etc) please provide it to the school as an attachment to this form.

#### ALLERGIES – THESE CAN INCLUDE ALLERGIES TO INSECT STINGS, DRUGS, LATEX, FOOD (EG NUTS, EGGS, PEANUTS) OR OTHER.

If your child has an allergy, please specify in the box below. For this allergy, answer the 11 questions that follow (where applicable). If there is insufficient space, please attach additional pages clearly marked 'Section H'.

For any **additional allergies** your child has, **please answer each of the 11 questions** (where applicable) on a separate page for each allergy. Attach this additional information (clearly marked 'Section H') to the back of this form.

#### Allergy to

- 1. Has a doctor diagnosed this allergy? Yes No
- 2. Is this a severe allergy (anaphylaxis)? Yes No

Anaphylaxis is a severe, potentially life-threatening, allergic reaction.

3. Has your child been hospitalised with a severe allergic reaction (anaphylaxis) or any other allergy? Yes No

4. If yes, which hospital?

5. Does your child have an ASCIA Action Plan for Anaphylaxis? Yes No

6. If yes, is this plan attached? Yes No

7. Has your child been prescribed an adrenaline autoinjector (ie EpiPen®)? Yes No

If your child has been prescribed an adrenaline autoinjector, you will need to provide the school with one (and renew prior to expiry date).

Each time your child is prescribed a new adrenaline autoinjector the doctor should issue an updated ASCIA Action Plan for Anaphylaxis. It is important that any updated plan is provided to the school.

# Student details - additional information

8. What is the expiry date of the adrenaline autoinjector that will be provided to the school?	/	
	month	year
If not known at the time of completing this form, the school will require this information	ation on enro	olment.
9. Does your child have an ASCIA Action Plan for Allergic Reactions? Yes No		
<b>10. If yes, is this plan attached?</b> Yes No		
It is important that any updated plan is provided to the school.		
11. Please list any other medication prescribed for this allergy		

#### The school will require further details in relation to prescribed medication on enrolment.

Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form. Information is also available on the Department's website.

#### MEDICAL CONDITIONS OTHER THAN ALLERGIES AND ANAPHYLAXIS (EG ASTHMA, SEVERE ASTHMA, DIABETES, EPILEPSY)

Please identify and provide details below of any other medical condition for which your child is being treated. (If more than one condition or insufficient space, please attach additional pages and include answers to all 7 questions that follow).

Medical condition							
1. Has a doctor diagnosed this conditi	ion?		Yes	No			
2. Has your child been hospitalised wi	ith this	condition?	Yes	No			
3. If yes, which hospital?							
4. Does your child have a documented	l action	plan from a doc	tor (eg a	sthma a	ction plan)?	Yes	No
5. If yes, is this plan attached?	Yes	No					
6. Is your child taking prescribed med	lication	for this conditio	n?	Yes	No		
7. If yes, what is the prescribed medic	ation?						

#### The school will require further details in relation to prescribed medication on enrolment.

Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form. Information is also available on the Department's website.

# Student details - additional information

# I. Student's history relevant to risk assessment

The NSW Department of Education has a responsibility to assess and manage any risk of harm to its staff and students. This application gives you the opportunity to provide schools with information that will help facilitate the smooth transition of the student into this specific school setting. This may include preparing a behaviour management plan or other appropriate strategies directed at meeting the particular needs of the student. The action taken in response to the information you provide will help ensure the safety of this student, other students and staff.

# To your knowledge, is there anything in the student's history or circumstances (including medical history not listed in Section H) which might pose a risk of any type to this student, other students, or staff at this school?

Yes No

If yes, please provide a brief description of the student's medical or other history which might pose a risk of any type to him or her, other students, or staff at this school.

Please provide names and contact details of health professionals or other relevant bodies that have knowledge of these issues.

Does the student have any history of violent behaviour? Yes No

If yes, please provide details.

Has the student ever been suspended or expelled from any previous school?	Yes	No
If yes, was this for:		
Actual violence to any person?	Yes	No
Possession of a weapon or any item used to cause harm or injury?	Yes	No
Threats of violence or intimidation of staff, students, or others at the school?	Yes	No
Illegal drugs?	Yes	No

Are you aware of any other incidents of the kind listed above in which the student has been involved outside of the school setting?

#### Yes No

If yes, please provide a brief outline of these incidents.

# Personal information, consent, and declaration of accuracy

The personal information collected on this application is for purposes directly related to your child's education including processing this application.

Any information provided to the NSW Department of Education (the Department) will be used, disclosed and stored consistent with the NSW privacy laws.

Certain information is required by the Department to meet its duty of care and other legal obligations under public health, education and child protection legislation and for meeting data collection and reporting requirements under Commonwealth – State funding agreements which may involve evaluation and assessment of student outcomes.

Information may be disclosed to NSW State and Commonwealth government agencies and other organisations for the above purposes and as authorised or required by law.

Information will be stored on a secure electronic database. You may access or correct the information by contacting your child's school. If you have a concern or complaint about the information collected or how it has been used or disclosed you should contact the school.

If you choose not to provide some requested information it may have a detrimental impact on your child's enrolment, resourcing of the school or meeting your child's educational needs.

Further information about the collection of information while your child is enrolled at a NSW Government school, and how we protect your privacy, is available on the Department's website or from your school.

# Publishing student information

The school/Department may publish information about your child for the purposes of sharing his/her experiences with other students, informing the school and broader community about school and student activities and recording student participation in noteworthy projects or community service.

This information may include your child's name, age, class and information collected at school such as photographs, sound and visual recordings of your child, your child's work and expressions of opinion such as in interactive media.

The communications in which your child's information may be published include but are not limited to:

- Public websites of the Department including the school website, the Department's intranet (staff only), blogs and wikis
- Departmental publications including the school newsletter, annual school magazine and school report, promotional material published in print and electronically including on the Department websites
- Official departmental and school social media accounts on networks such as the school's YouTube, Facebook and Twitter pages.

# Declaration of accuracy and signature

I declare that the information provided in this application is, to the best of my knowledge and belief, accurate and complete.

I have read and understand the information in this application including about the collection of personal information, publishing student information, online services and consent.

Where I have given personal information about people other than myself or my child(ren) I have done so with their authorisation.

I am aware that if information I have given is false or misleading, any decision made as a result of this application may be changed.

Parents should be aware that when information is published on public websites and social media channels it can be linked to by third parties and may be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information.

# Permission to publish

I have read the information about publishing student information (above) and

#### I give permission I do not give permission

for the school/Department to publish information about my child in publicly accessible communications. This permission remains effective until I advise otherwise.

# **Online services**

The Department provides students with filtered access to the Internet. Students also have access to a secure learning portal. After logging into their portal, students have access to a personalised email account and online applications. These resources enable students to collaborate with peers, publish online, and securely store their data for access within, or outside of, school.

When accessing some online services, data, including your child's name and files they have saved, are stored with the online application service provider in a location outside of the Department's network. The Department has worked closely with online application providers to assess privacy impacts and data security controls. Information about student privacy for parents is available from **http://www. schools.nsw.edu.au/learning/learning-tools/index.php** or from your school.

#### I give permission I do not give permission

for my child to have access to online services provided by the Department. This permission remains effective until I advise the school otherwise.

# Consent

Signature of parent/carer

I have provided information about the learning and support needs, including health condition(s) and/or special need(s) and/or history relevant to a risk assessment, related to the student listed in Section A of this application form.

I consent to the school/Department of Education seeking information from previous schools, other NSW government departments, public hospitals, health professionals or other organisations that may also hold information related to this assessment for the student named on page 1.

I consent to the health professional(s) treating any medical or health condition identified in this application, to provide the school/Department with information about any condition that has been identified in this application. This may include any other aspects of the student's health that may impact on the condition or on the health and safety of this student or other students at school or on staff at the school.

(at least one of the student's	parents/carers must sign the application to e	enrol)
Print name		]
Date (dd/mm/yyyy)	1 1	
Signature of second pare	nt/carer	
Print name		
Print name		
Date (dd/mm/yyyy)	/ /	

# OFFICE USE ONLY

Record of evidence	Principal's checklist
Original documents must be sighted and photocopied. All students	1. Enrolment interview conducted?   Yes   No
<b>Student Identity</b> (name and age eg birth certificate, passport etc)	2. Special circumstances, additional Yes Not required support needs and student history assessed?
Yes No	3. Risk assessment required?
<b>Residential address</b> (eg rates notice, rental agreements, electricity accounts etc)	
Evidence supplied Yes No	If yes, risk assessment conducted?
In area?	4. Is personalised learning and support         required for this student?
In addition, for students who are not Australian citizens, more information is required.	If yes: Consultation with parents/carers conducted
Passport or travel documentation no.	
	Planning to personalise learning and support completed? Yes Not required
Country of issue	Behaviour Management Plan (violence) developed?*
	Behaviour Management Plan (other) developed?*
Current visa sub-class (if applicable)	Individual Health Care Plan developed?*
Previous visa sub-classes (if applicable)	Emergency response plan developed?**
	5. Communication of documented provision/s
In addition (for temporary visa holders) Authority to Enrol code	and plan/s to relevant staff?
	* It may be necessary to defer the finalisation of enrolment until this action has been taken. This may require development of an interim
Medical/emergency plans sighted and copied	plan until all relevant medical or other information has been obtained. Consideration must be given to all special needs when developing
(eg ASCIA Plan) Yes Not applicable	behaviour management or health care plans. Any deferral should be no more than reasonably necessary to collect the required information.
Disability or other support needs, including any personal learning and support plan sighted and copied	An emergency response plan must be included in the student's individual health care plan where the student is diagnosed at risk of a medical emergency.
Yes Not applicable	** Where a student has been diagnosed at risk of anaphylaxis the emergency response plan will be the ASCIA Action Plan for Anaphylaxis,
ACIR Immunisation Statement sighted, and a copy retained, for students	which will be provided by the parent, completed and signed by the treating doctor.
enrolled in a NSW Government primary school for the first time	
Yes No	Principal's certification
If yes, ACIR Immunisation History statement indicates immunisation status	On the basis of the information provided on this form and gained from the required assessments,
Up to date Not up to date	I accept, or
Any family law, AVOs or other relevant court order sighted and copied	I decline this application to enrol
Yes Not applicable	Signature of principal
For parent not living with student (Section D p7)	
Shared parental responsibility	Print name
Receive academic report	
Enrolment notes	Date

# Application to enrol in a NSW Government school – Information Sheet

#### PLEASE TEAR OFF THIS BACK PAGE BEFORE RETURNING YOUR APPLICATION TO THE SCHOOL.

#### Having trouble with this form?

If you have difficulty understanding this form or would like further information, please call the school.

If you need assistance with English please call the **Telephone Interpreter Service** on telephone **131 450** and ask for an interpreter in your language. The operator will get an interpreter on the line to assist you with your conversation. You will not be charged for this service.

# How to complete this application form

- All applicants **must** complete sections A, B, C, E, H and I
- You may be required to complete sections D, F and G
- Use a black or blue pen to fill in this form
- When you are asked to mark a box, put a tick or a cross in the box like this: Image: Second S
- When you are asked to put information into boxes, put a single number in each box like this:

1	2	3	4												
---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--

Please print as neatly and legibly as possible like this:

Write as clearly as possible in the box

- Attach any additional information securely to the back of this form. Clearly indicate which section (A–I) this information refers to.
- If you require another application form, you can download additional copies from: www.schools.nsw.edu.au/media/downloads/
  - languagesupport/enrol/application/english.pdf

#### **Complaints, Compliments and Suggestions**

If you have a complaint, compliment or suggestion or are concerned about any aspect of our services we're keen to hear from you.

We encourage you to contact the school to talk about your concerns, as most problems can be solved by talking to the school office staff, your child's teacher or the school principal. They know your child and are best placed to help you. Also, it's best if you let them know about your concerns as early as possible.

We will deal with your issue thoroughly and fairly and we have a clear process for resolving problems.

Further information, including access to our Complaints Handling Policy and procedures, is available from:

www.dec.nsw.gov.au/about-us/how-we-operate/ how-we-handle-complaints

# Checklist

When you come to the school to enrol, please bring these original documents with you:

**Proof of student's residential address** (eg council rates notice, residential lease, electricity accounts, statutory declaration etc)

Birth certificate or identity documents

Australian Childhood Immunisation Register (ACIR) Immunisation History Statement (only required for students enrolling in NSW Government primary schools for the first time)

#### In addition

If your child is the subject of family law matters you will need to provide:

Copies of any family law or other relevant court orders

#### In addition

If your child has health, disability or other support needs you will need to provide:

Copies of medical/healthcare or emergency action plans

Evidence of any disability or other support needs, including any learning and support plans

#### In addition

Non-Australian Citizens

If your child is a permanent resident but not an Australian citizen you will need to provide:

Passport or travel documents

Current visa and previous visas (if applicable)

#### In addition

Temporary visa holders

If your child is a temporary visa holder you will need to provide:

Passport or travel documents

Current visa and previous visas (if applicable)

Authority to Enrol issued by the Temporary Residents Program Unit. This is required for visitor and temporary visa holders (other than sub class 571P referred to below)

Authority to Enrol or evidence of permission to transfer issued by the International Student Centre (if holding an international full fee student visa, sub class 571P)

**Evidence of the visa the student has applied for** (if the student holds a bridging visa)

# Need more help? Contact your school or visit www.schools.nsw.edu.au

# Parent occupation groups

The main purpose for collecting this information is to promote and implement the National Goals for Schooling by informing State and Commonwealth Governments on matters that may affect resourcing to your child's school and preschool.

You will need to use this table to complete the 'Occupation Group' section on pages 4, 5 and 7.

The five groups listed here are used by the Australian Bureau of Statistics to classify occupations. Please choose the group (1, 2, 3, 4 or 8) that you think best describes your occupation.

If you have retired or stopped work in the past 12 months, choose the group in which you used to work.

Group 8	• You have not been in paid work in the last 12 months	
Group 4 Machine operators, hospitality staff, assistants, labourers and related workers	<ul> <li>Drivers, mobile plant, production/processing machinery and other machinery operators</li> <li>Hospitality staff (hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper)</li> <li>Office assistants, sales assistants and other assistants</li> <li>Office (typist, word processing/data entry/business machine operator, receptionist, office assistant)</li> <li>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)</li> </ul>	<ul> <li>Assistant/aide (trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/ gallery attendant, usher, home helper, salon assistant, animal attendant)</li> <li>Labourers and related workers</li> <li>Defence Forces ranks below senior NCO not included below</li> <li>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)</li> <li>Other worker (labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)</li> </ul>
Group 3 Tradespeople, clerks and skilled office, sales and service staff	<ul> <li>Tradespeople generally have completed a         <ul> <li>4 year Trade Certificate, usually by apprenticeship.</li> <li>All tradespeople are included in this group.</li> </ul> </li> <li>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)</li> <li>Skilled office, sales and service staff</li> </ul>	<ul> <li>Office (secretary, personal assistant, desktop publishing operator, switchboard operator)</li> <li>Sales (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)</li> <li>Service (aged/disabled/refuge/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/ supervisor)</li> </ul>
Group 2 Other business managers, arts/media/ sportspersons and associate professionals	<ul> <li>Owner/manager of farm, construction, import/ export, wholesale, manufacturing, transport, real estate business</li> <li>Specialist manager (finance/engineering/production/personnel/ industrial relations/sales/marketing)</li> <li>Financial services manager (bank branch manager, finance/investment/insurance broker, credit/loans officer)</li> <li>Retail sales/services manager (shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency)</li> <li>Arts/media/sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer,</li> </ul>	<ul> <li>designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official)</li> <li>Associate professionals generally have diploma/technical qualifications and support managers and professionals</li> <li>Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional</li> <li>Business/administration (recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager)</li> <li>Defence Forces senior Non-Commissioned Officer</li> </ul>
Group 1 Senior management in large business organisation, government administration and defence, and qualified professionals	<ul> <li>Senior executive/manager/department head in industry, commerce, media or other large organisation</li> <li>Public service manager (section head or above),regional director, health/education/police/ fire services administrator</li> <li>Other administrator (school principal, faculty head/dean, library/museum/gallery director, research facility director)</li> <li>Defence Forces Commissioned Officer</li> </ul>	<ul> <li>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</li> <li>Health, Education, Law, Social Welfare, Engineering, Science, Computing professional</li> <li>Business (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)</li> <li>Air/sea transport (aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller)</li> </ul>



Phone: 9634-3675 Fax: 9899-5911 74A Glenhaven Road, Glenhaven, NSW, 2156 E-mail: glenhaven-p.school@det.nsw.edu.au Website: www.glenhaven-p.schools.nsw.edu.au

28 March, 2017

Dear Parent/Caregiver

# AUTHORITY TO PUBLISH

I am seeking your permission to obtain and publish content that may include the image and/or name of your child in our publicly available school communications. These could be in print, video, and/or our publicly available school website.

Content examples include but are not limited to photographs, text, videos, graphics, illustrations, sound recordings, examples of student work.

Our school communications include but are not limited to:

- school's public website
- school newsletter (online and hard copy)
- local community newspaper / magazine
- media promotions and advertising activities
- electronic and print promotional material
- annual school report
- school year book

Please complete the permission slip below and return to the School Administration Office as soon as possible.

Kerry Maxwell PRINCIPAL

keep this section

# GLENHAVEN PUBLIC SCHOOL AUTHORITY TO PUBLISH

I give permission for the school to obtain and publish content related to my child in school communications, as outlined above.

	Yes	
Child's name:		 . Class:
Parent/caregiver's name:		 
Parent/caregiver's signature:		 Date:

This signed permission remains effective until I advise the school otherwise.



Phone: 9634-3675 Fax: 9899-5911 74A Glenhaven Road, Glenhaven, NSW, 2156 E-mail: glenhaven-p.school@det.nsw.edu.au Website: www.glenhaven-p.schools.nsw.edu.au

29 January, 2018

Dear Parents/Caregivers,

# K-6 - GLENHAVEN OVAL

Throughout the school year, we have the benefit of using the playing fields located at Glenhaven Oval. Many of our activities and classroom lessons require the use of a large space and Glenhaven Oval is the perfect venue for more expansive activities.

During 2018, classroom teachers will often use this space to support their classroom programs. This space is also often used to support many different extra-curricular activities.

So that a separate note is not required each time we use the facility or walk within the local area, we are requesting permission to be signed, allowing your child to take part throughout their enrolment at Glenhaven Public School.

In order for your child to participate, please complete the permission slip below and return it to the **Red Box in the School Administration Office Foyer**, no later than **Monday 5 February, 2018**.

David Reid		
Assistant Principal		

Kerry Maxwell Principal

(Please keep this section for your information)

Please return this section to the School Administration Office no later than Monday 5 February, 2018

# GLENHAVEN PUBLIC SCHOOL K – 6 - GLENHAVEN OVAL PERMISSION NOTE

I give permission for my child ..... in class ..... in class ..... to walk to and from Glenhaven Oval as appropriately determined by a Glenhaven Public School staff member.

I understand that my child will be supervised by a teacher during any activity run or organised by the school during school hours of 9.00am to 2.55pm.

I understand that my child's participation is optional and their inclusion is dependent upon the permission note being returned by **Monday 5 February, 2018.** 

I also understand that this permission note is valid for the duration of your child's enrollment at Glenhaven Public School.



Phone: 9634-3675 Fax: 9899-5911 ABN: 31 796 180 350 74A Glenhaven Road, Glenhaven, NSW, 2156 E-mail: glenhaven-p.school@det.nsw.edu.au Website: www.glenhaven-p.schools.nsw.edu.au

Dear Parents/Caregivers,

# SCRIPTURE CLASSES

As you are probably aware, children at Glenhaven Public School have half an hour per week of religious instruction known as "Scripture".

We have two denominations: Roman Catholic and Protestant. Protestant is made up of Anglican, Church of England, Uniting, Baptist, Methodist, Presbyterian, Assemblies of God and Penticostal.

We have a Non-Scripture group if your child doesn't attend Roman Catholic or Protestant.

Could you please indicate the scripture group you would like your child to attend.

Kerry Maxwell PRINCIPAL

Keep this section

.....×

# GLENHAVEN PUBLIC SCHOOL SCRIPTURE CLASSES

I wish my child: to attend:		of Class:
	Protestant:	
	Roman Catholic:	
	Non- Scripture:	
Signed:		Date: