



APPLICATION FOR ENROLMENT

Padbury Catholic Primary School

O'Leary Road
Padbury WA 6025

Application Fee \$50.00 per child which is non refundable
(one enrolment form must be completed for each child)

Telephone (08) 9404 4000
Facsimile (08) 9307 7533
admin@padcath.wa.edu.au
www.padcath.wa.edu.au

Academic Year of Entry	Pre Kindy	Kindy	PP	1	2	3	4	5	6	(please circle)
Calendar Year of Entry	20									

STUDENT INFORMATION (Any change of address or email must be conveyed to the school. Failure to notify change of address will render the application void.)

Student's full name must appear as per their Australian Birth Certificate or Immigration visa documents

Student Surname _____

First Name _____ Other Name/s _____

Preferred Name _____ Male or Female _____

Address _____

Date of Birth _____ Place of Birth _____

Country of Birth _____ Nationality _____

Australian Permanent Resident Yes No

Country of Citizenship _____

Aboriginal/Torres Strait Islander Yes No If 'Yes' please state Group of Origin _____

Language spoken at home _____

If born outside of Australia, Date of Arrival _____ Visa Category Number _____ Visa Expiry _____

(Citizenship/visa needs to be photocopied and attached to this application)

Child resides with both parents mother father shared arrangement other _____

Religious Denomination of Student: Religious Denomination: _____ If Applicable: Parish: _____ Suburb: _____ Parish Priest: _____	Date and Place of Sacraments Received: (If applicable) Baptism: Date _____ Place _____ Reconciliation: Date _____ Place _____ First Communion: Date _____ Place _____ Confirmation: Date _____ Place _____
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A Non-refundable application fee of \$50.00 per enrolment is payable when you apply for a place/places at Padbury Catholic Primary School. See Credit Card Payment information on the last page of this enrolment form.
An enrolment deposit of \$100 per child is payable upon acceptance of a place offered. **Pre Kindy enrolment deposit is also \$100 and all PK fees must be paid prior to commencement of each term.** Enrolment fees will be deducted from the first instalment of fees once your child commences at Padbury Catholic Primary School. Should your child/children **subsequently not attend the school**, the fee becomes non-refundable and is retained to offset administration and processing costs.

PLEASE NOTE THAT THIS ENROLMENT APPLICATION WILL NOT BE ACCEPTED WITHOUT ALL RELEVANT SUPPORTING DOCUMENTS AND APPLICATION FEE.

FAMILY INFORMATION

Contact 1

Relationship to student	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other (please specify)	Marital Status
Title	First Name			Surname
Home Address				Fee account to this address <input type="checkbox"/> Yes
Telephone - Home	Mobile			Business
Email address				
Country of Birth	Language			Country of Citizenship
Occupation				Employer
Language spoken at home	Religious Denomination			Parish (if applicable)

Contact 2

Relationship to student	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other (please specify)	Marital Status
Title	First Name			Surname
Home Address				Fee account to this address <input type="checkbox"/> Yes
Telephone - Home	Mobile			Business
Email address				
Country of Birth	Language			Country of Citizenship
Occupation				Employer
Language spoken at home	Religious Denomination			Parish (If applicable)

CUSTODY/GUARDIANSHIP

Name of person(s) with legal guardianship of the student		
Are there any conditions enforced at law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If applicable, attach a copy of any Parental or Restraint Order attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No

CURRENT SCHOOL INFORMATION

Present School:	Suburb:
Current Year Level:	

SIBLINGS currently attending Padbury Catholic Primary School and other schools

Completing this section does not mean that younger or older siblings are automatically enrolled at Padbury Catholic Primary School.

Name	Year Level	<input type="checkbox"/> Brother	<input type="checkbox"/> Sister	School:
Name	Year Level	<input type="checkbox"/> Brother	<input type="checkbox"/> Sister	School:
Name	Year Level	<input type="checkbox"/> Brother	<input type="checkbox"/> Sister	School:

EMERGENCY CONTACT DETAILS (other than a Parent or Guardian)

Name:	Relationship to Student:
Home Address:	
Contact Numbers: Mobile:	Home:
Name:	Relationship to Student:
Home Address:	
Contact Numbers: Mobile:	Home:

Where did you hear about Padbury Catholic Primary School?

Why have you chosen to enrol your child at Padbury Catholic Primary School?

AGREEMENT

- I/we promise to support the Catholic philosophy, policies, rules and regulations of CEWA and Padbury Catholic Primary School, and endeavour to ensure that my child will co-operate with the expectations of the school in this regard.
- I/we promise to ensure that my child wears the full Padbury Catholic Primary School uniform.
- I/we promise to take an active interest in school activities, eg Parent/Teacher Nights; P& F Association and the School Board.
- I/we understand and accept that the completion of this application form does not guarantee an enrolment interview, nor a place at the School. Successful applicants will be determined in accordance with the school's enrolment criteria.
- I/we understand and accept that attendance at an interview does not guarantee an enrolment offer being made.
- I/we understand that enrolment of a student in one Catholic school does not guarantee the enrolment of that student in any other Catholic school.
- I/we agree to abide by the policies and directions of the School and the Catholic Education Commission of Western Australia (CECWA) as they are enacted from time to time.
- I/we agree to give a full term's notice (in writing) before removal of a student, or a term's fees are payable.
- I/we have viewed, fully understood and agree to the terms and conditions set out in the school's fee collection policy.
- The signatories to this contract to enrol a student are liable jointly and severally to pay, and agree to pay, to the School, for all fees and charges incurred in respect of that student, regardless of:
 - Any pre-arranged or subsequent private agreement to share or apportion payment responsibility
 - Any Court Order or statutory direction that may apply to any signatory
 - Any separate or individual invoicing of any amountThis joint and several liability includes all costs that may be incurred by the School in the recovery of fees and charges including legal action if necessary.
- I/we have provided the necessary documentation that the School may request, to confirm the student's Australian residency status.
- I/we agree to pay all fees within the relevant time or make a suitable alternative arrangement with Padbury Catholic Primary School.
- I/we agree that Parents are responsible for payment of breakages or damage to school's property by their children.
- I/we have completed this application form fully and to the best of my/our knowledge. Further, I/we acknowledge and accept that if I/we have knowingly withheld information or included false information especially in relation to this student's details, individual needs, medical conditions, health care requirements and/or Parenting and Restraint Orders, then the enrolment may be refused or terminated on this ground.
- I/we have read and fully understand and agree and accept that enrolment in a Catholic school means that we and our child will participate fully in all required parts of the education program of the school including the Religious Education program of the school.
- I/we have received a Privacy Collection Notice (See last page of the Application for Enrolment Form)
- I/we have provided a copy of any Parenting or Restraint Order that applies to the prospective school.
- I/we have fully and truthfully completed the Application for Enrolment Form.

Parent/Guardian Signature

Print Name

Date

Parent/Guardian Signature

Print Name

Date

PRIVACY COLLECTION POLICY

- ❖ Catholic Education Western Australia Limited ('We') collect personal information, including sensitive information about you. This may be in writing, through technology systems or in the course of conversations. The primary purpose of collecting your information is to support the design and safe delivery of the educational programme to each student in their CEWA community of faith.
- ❖ Some of the information we collect is to satisfy our legal obligations, particularly to enable the Principal and CEWA to discharge their duty of care.
- ❖ The law also requires us to collect, use and disclose certain information. These include and are not limited to the School Education Act (WA) 1999, the Children and Community Services Act (WA) 2004, and common law
- ❖ Health information about students is sensitive information within the terms of the Privacy Act 1988. We may collect such information about students from time to time.
- ❖ A student's enrolment may be delayed or prevented and their education adversely affected if CEWA cannot collect certain personal information. This is particularly so where the information is relevant to the health and safety of the student, other students and/or staff.
- ❖ CEWA may disclose personal and sensitive information for educational, administrative and support purposes. This may include to:
 - Staff and governing bodies of Catholic, government and non-government schools;
 - Staff and governing bodies of order accountable schools who are CEWA members;
 - Government departments (including for policy and funding purposes);
 - The Catholic Education Office, the parish and the Archdiocese or Dioceses, other related church agencies/entities;
 - Medical practitioners.
 - People providing educational, support and health services to CEWA, including specialist visiting teachers, tutors, coaches, volunteers and counsellors;
 - People participating in, ancillary or incidental to, digital communication such as Team video and chats
 - Providers of learning and assessment tools;
 - Assessment and educational authorities, including the Australian Curriculum, Assessment and Reporting Authority (ACARA) and NAPLAN Test Administration authorities (who will disclose it to the entity that manages the online platform for NAPLAN);
 - Agencies and organisations to who we are required to disclose personal information for education and research purposes;
 - People providing administrative and financial services to CEWA;
 - Anyone you authorise CEWA to disclose information to; and
 - Anyone to whom CEWA is required or authorised to disclose the information to by laws, including child protection laws.
- ❖ Personal information collected from students is regularly disclosed to their parents or guardians.
- ❖ If you make an enrolment application to another CEWA or government school, personal information provided during the application stage may be used in this process. This personal information may include health information and is used for the purpose of considering and administering the enrolment.
- ❖ CEWA uses centralised information management and storage systems ('Systems'). These Systems are provided by CEWA and third-party service providers. Personal information is stored with and accessible by those providers for the purpose of providing services to CEWA.
- ❖ CEWA may use online or 'cloud' service providers to store personal information and to provide services that involve the use of personal information, such as services relating to email, instant messaging, online education and assessment applications. Some limited personal information may also be provided to these service providers to enable them to authenticate users that access their services. This personal information may reside on a cloud service provider's server which may be situated outside Australia. Further information about CEWA's use of an online or 'cloud' service providers is contained in CEWA's Statutory Privacy Policy.
- ❖ CEWA's Statutory Privacy Policy, accessible on CEWA's website, sets out how you may seek access and correct your personal information. However, access may be refused in certain circumstances such as where access would have an unreasonable effect on the privacy of others, where access may result in a breach of CEWA's duty of care to the student, where students have provided information in confidence or where CEWA is otherwise required or authorised by law to refuse access. Any refusal will be notified in writing with reasons (unless, given the grounds for refusal, it would be unreasonable to provide reasons).
- ❖ CEWA's Statutory Privacy Policy also sets out how you can make a complaint about a Privacy breach and how the complaint will be handled.
- ❖ CEWA may engage in fundraising activities. Your information may be used to make an appeal to you. It may also be disclosed to organisations that assist CEWA'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.
- ❖ On occasions information such as academic and sporting achievements, student activities and similar news is published in School newsletters and magazines, and on our website, or otherwise shared with the CEWA community. This may include photographs and videos of student activities such as sporting events, concerts and plays, school camps and school excursions. CEWA will obtain permissions from the student's parent or guardian (and from the student if appropriate) if we would like to include such photographs or videos or other identifying material in our promotions or otherwise make this material available to the public such as on the internet.
- ❖ If you provide CEWA with others' personal information, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the School and why.
- ❖ As with all decisions concerning children, the best interests of the student are a primary and overriding consideration in the management of information. A student's right to safety prevails above all other considerations, including theirs and others' right to privacy.

PLEASE ENCLOSE

Full Birth Certificate [Photocopy attached]	<input type="checkbox"/> Yes <input type="checkbox"/> No	Visa Documents {Photocopy attached}	<input type="checkbox"/> Yes <input type="checkbox"/> No
Immunisation Details [Photocopy attached]	<input type="checkbox"/> Yes <input type="checkbox"/> No	Latest School Report: [Photocopy attached]	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sacrament Certificates (If applicable eg: Baptism etc)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Latest NAPLAN Assessment [Photocopy attached]	<input type="checkbox"/> Yes <input type="checkbox"/> No
Parish Priest Reference (available on PCPS website)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Non-Refundable Application Fee (\$50.00):	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please ensure that ALL sections of this form are completed and all necessary documents are attached before returning it to Padbury Catholic Primary School.

CREDIT CARD PAYMENT for Application (\$50.00)

Card No: _____	Expiry Date: ____ / ____
Card Type: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> BankCard	Total Payment: _____
Cardholder Name _____	Signature: _____



STUDENT INDIVIDUAL NEEDS AND MEDICAL INFORMATION

Student's full name must appear as per their Australian Birth Certificate or Immigration visa documents

Student Surname _____

First Name _____

Other Name/s _____

Preferred Name _____

Male or Female _____

Address _____

Date of Birth _____

Place of Birth _____

STUDENT'S INDIVIDUAL NEEDS

The School Education Act 1999 requires the provision of:

16. Information required when applying to enrol

G....."details of any condition of the enrollee that may call for special steps to be taken for the benefit or protection of the enrollee or other persons in the school" (16G).

The Disability Standards for Education 2005 <https://www.education.gov.au/disability-standards-education-2005>

4.2 Enrolment standards (1) The education provider must take reasonable steps to ensure that the prospective student is able to seek admission to, apply for enrolment in, the institution on the same basis as a prospective student without a disability, and without experiencing discrimination.

To assist the school to respond to individual requirements please detail any additional needs your child has in the following area(s) that may affect his/her learning, participation, or welfare during school hours.

1. Medical/Health Care _____
2. Medication _____
3. Physical Needs _____
4. Learning Needs _____
5. Psychological/socio-emotional Needs _____
6. Sensory Needs (eg: Vision/Heaing) _____
7. Behavioural or Safety Needs _____
8. Communication Needs _____
9. Self-Care Needs _____
10. Allergies _____

If medication or medical/health care services are required during school hours please provide full details, name, contact number and signed authorization by the relevant practitioner.

EXTERNAL SERVICE PROVISION

Does your child receive any services from an external agency which may affect educational arrangements? Yes/No

If so please detail name of Service Provider and Contact number: _____

Does your child require special transport arrangements to and from school? Yes/No

Does your child receive Respite Care on a regular basis? Yes/No

MEDICAL INFORMATION

Family Doctor/Medical Clinic: _____ Address: _____

Contact Number: _____ Blood Group (if known): _____

Medicare Number: _____ Expiry: _____

Dentist/Dental Clinic _____ Address: _____

Contact Number: _____ Private Health Fund: _____

MMUNISATION RECORD*F- Fully immunised**N – Not immunised**I – incomplete immunisation**P- personal objections*

Measles Diphtheria Tetanus Hepatitis B OPV (Polio) Pertussis (Whooping Cough)

Measles Mumps Rubella Immunisation Record Attached

MEDICAL EMERGENCY AUTHORISATION

I/We authorise Padbury Catholic Primary School to seek medical/dental attention, call an ambulance or to hospitalise my son/daughter when considered necessary. If an emergency occurs requiring surgery, anesthesia, oxygen, blood transfusion, medication and I am/we are unable to be contacted within a reasonable time, Padbury Catholic Primary School has the authority to agree to medically recommended treatment by an accredited medical practitioner on my/our behalf.

Parent/Guardian Signature _____ Print Name _____ Date _____

Parent/Guardian Signature _____ Print Name _____ Date _____