



# Caladenia Primary School

OFFICE USE ONLY	
Date received:	_____
Year Level: .....	_____
Birth certificate/Passport/Travel document sighted (Circle).	
Student resides within local intake area	<input type="checkbox"/> YES <input type="checkbox"/> NO
Visa sighted:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Family Court Order/s:	<input type="checkbox"/> YES <input type="checkbox"/> NO

## APPLICATION FOR ENROLMENT FORM (For enrolment in a Western Australian Public School)

Students in the compulsory years of schooling who are already enrolled at the school do not need to lodge a new application for that school each year.

### DECLARATION

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

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

Name of adult person enrolling child:

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

Relationship to child: \_\_\_\_\_  
(Independent Minors and those aged 18 years or older may apply on their own behalf)

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

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

*NOTE: Children may be enrolled in Kindergarten in one school only, either public or private.*  
*NOTE: 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 to this application form.

1. Birth Certificate (original or certified copy) or extract or other identity documents .....   
if applicable.
2. 'Immunisation Certificate' (ACIR Immunisation History Statement Only) .....
3. Copies of Family Court or any other court orders (if applicable) .....
4. Proof of address (see Requested documentation in the attached Parent information) .....
5. Information relating to suspensions or exclusions .....
6. Information relating to disability .....
7. Last School Report .....

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 (including visa grant number) .....

If your child was born in Australia and both parents were born outside Australia, you must provide evidence of:

1. Parents current visa or citizenship .....

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

Confirmation of enrolment or evidence of any permission to transfer .....   
 provided by Education and Training International (ETI) email: [study.eti@dtwd.wa.gov.au](mailto:study.eti@dtwd.wa.gov.au)  
 (if holding an International full fee student visa, sub class 571);

**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: Preferred Name	Date of birth:	Sex (M / F):
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			
Year Level: Start date: Beginning of school year <b>2020</b> : <input type="checkbox"/> YES <input type="checkbox"/> NO. If NO, indicate start date: _____			
If applicable, year level child currently enrolled in (e.g. Year 7):			
Name of School/Country at which the child is currently or was last enrolled:			
What is the main language spoken at home?			
What level of spoken English does your child have? <input type="checkbox"/> No English <input type="checkbox"/> Limited English <input type="checkbox"/> Intermediate level of English <input type="checkbox"/> Fluent English			
Are there any brothers or sisters attending this school? <input type="checkbox"/> YES <input type="checkbox"/> NO Name/s and year levels:			
Will there be any other siblings that will attend in the future? <input type="checkbox"/> YES <input type="checkbox"/> NO Name/s and Date of Births			
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:			
Was your child born in Australia? <input type="checkbox"/> YES <input type="checkbox"/> NO If NO, please indicate country of birth: _____ Passport No: _____ please indicate date entered Australia: _____ Visa Sub Class No: _____ Visa Grant No: _____			
Does your child have a disability/medical condition? <input type="checkbox"/> YES <input type="checkbox"/> NO <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. Please indicate whether:</i> <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) __/__/____ (date)			