



# Application for Enrolment in a Western Australian Public School (Primary)

## You must complete a separate enrolment application for each student. You need to complete an enrolment application form if:

- You are enrolling a child in Kindergarten for the following year.
- You are enrolling a child in Pre-primary for the following year.
- You are enrolling a child in Year 7 at a new school for the following year.
- You are enrolling a child transferring from another school in any year level.

Submitting an application for enrolment does not guarantee you will receive a place at the school. The school will notify you in writing of the outcome of your application.

If you are unable to complete this application form, please contact the school for help.

#### SCHOOL NAME

#### School name

PERSONAL DETAILS (	Please complete a	ll details below)		
Child's surname				
Legal surname (if different)				
Given names				
Date of birth (dd/mm/yy)	1		Gender OMale OFema	le ONot Specified
Parent Surname				
Parent First Name			Title Mr Mrs Ms	Other
Residential Address (must be completed)				
				Postcode
<b>Postal Address</b> (if different from residential address)				
,				Postcode
Telephone (Home)			Telephone (Work) (If convenient)	
Mobile Phone No.			Email	

PERSONAL DETAILS (Continued)	
Year Level enrolling in Start date: Beginning of school yea	ar 2022 YES NO
If no, indicate start date / /	
If applicable, year level your child is currently enrolled in (e.g. Year 6)	
If applicable, name of school at which your child is currently or was last enrolled	
Are there any Family Court Orders regarding the day to day or long term care, we	alfare and development of your child?
Does your child have an Australian Immunisation Register (AIR) Immunisation Hist	ory Statement?
If your application is accepted, you will be asked to provide an Australian Immunisation Reg not more than two months old.	jister (AIR) Immunisation History Statement that is
Will there be any brothers or sisters attending this school?	
Name/s and year levels	
Is your child currently under suspension from a school?	
If yes, name of school	
Is your child a temporary resident?	○ YES ○ NO If yes, please indicate:
Date entered Australia if born overseas.	
Visa Sub Class No.	Visa expiry date / /
Does your child have health or medical condition, disability or additional needs?	
This information will assist the school principal in planning to provide the best education	al program for your child. Please provide details:

## DECLARATION

The information and statements provided in this application for enrolment are true and accurate in relation to:						
Name of person enrolling child						
Title	Mr Mrs Ms	Other				
Relationship to child						
(Independent minors and those aged 18 years or older may apply on their own behalf)						
Telephone (Home)		Telephone (Work)				
Mobile Phone No.						
Signature			Date	1	/	
				_		

If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct

Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.

## DOCUMENTS TO BE PROVIDED

#### The school will advise you of any additional documentation required.

Checklist: Check the box  $\boxtimes$  to indicate documents you can provide to support this application.

- 2. Copies of Family Court or any other court orders (if applicable)
- 3. Proof of address
- 4. Information relating to suspensions
- 5. Information relating to health or medical condition, disability or additional needs (if applicable)
- 6. If your child is not a permanent resident of Australia, you must provide evidence of current visa subclass and previous visa subclass (if applicable, such as if current visa is a bridging visa)

Please provide any other relevant information.

## OFFICE USE ONLY

Documents provided:					
1. Birth Certificate or extract or other identity documents			NO		
2. Copies of Family Court or any other court orders			NO		
3. Proof of address			NO		
4. Information relating to suspensions			NO		
5. Information relating to health or medical condition, disability or additional needs			NO		
Date application received	/ / Year Level				
Principal's approval	Application for Enrolment approved $\bigcirc$ YES	NO			
Name					
Signature of principal/delegate			Date	/	1