

WELCOME TO EDGARS CREEK PRIMARY SCHOOL

Thank you for your interest in joining our vibrant school community

Edgars Creek Primary School opened at the beginning of 2021 and is proudly located on Macedon Parade in Wollert. We are part of a dynamic educational precinct that includes a child-care provider, the Ganbu Gulinj Community Centre (including kindergarten), and Edgars Creek Secondary College.

Our vision is to ***empower all students to strive for excellence and become independent, lifelong learners***. Our school values — ***Respect, Courage, Curiosity and Responsibility*** — underpin all aspects of school life. They are visible in our classrooms and guide the high expectations we hold for every member of our school community.

At Edgars Creek Primary School, we believe that ***every student matters and every moment counts*** on their educational journey. Our highly skilled and passionate staff are the foundation of our success. They are committed to creating a safe, nurturing and engaging environment where students thrive academically, socially and emotionally.

By placing students at the centre of every decision, we ensure each child leaves our school literate, numerate and equipped with the knowledge, skills and dispositions required for a successful transition to secondary school and beyond.

Our approach is grounded in ***high expectations and a commitment to excellence in teaching and learning***. Through evidence-based literacy and numeracy instruction, alongside enriching opportunities in The Arts, Physical Education, Spanish, Science, Digital Technologies and our High Ability Program, we aim to nurture each child's unique strengths, interests and abilities.

As a contemporary school, we are proud of our ***outstanding facilities***, including specialist classrooms for Visual Arts, Performing Arts, Science and Library, as well as a full-sized gymnasium for Physical Education. Our learning spaces are vibrant, flexible and thoughtfully designed to support whole-class, small-group and individual learning. Our outdoor areas and playgrounds provide engaging and inclusive play experiences for all students.

We warmly invite you to join our school community and look forward to welcoming you to Edgars Creek Primary School.

Teresa Marnik

Warm Regards,
Teresa Manik
Principal

Dear Prospective Families,

Thank you for your enquiry to enrol at Edgars Creek Primary School.

As per Department of Education guidelines, Edgars Creek Primary School is required to sight and keep copies of certain documentation. Official documentation to confirm your residency in our neighbourhood area is also required.

Please note the Department of Education privacy policy can be located on <https://www.vic.gov.au/schools-privacy-policy>.

Enrolment Documentation Checklist for Parents and Carers

Checklist

1. Name and date of birth

You **must** provide the school with evidence to verify your child's name and date of birth. This is **mandatory** for all students enrolling in a Victorian government school for the first time. Your child's birth certificate is the preferred document to verify their name and date of birth.

Check box	Document
<input type="checkbox"/>	Australian or International Birth Certificate (Preferred)

If your child's birth certificate is not available, you must provide **one** of the following documents to the school.

Check box	Document
<input type="checkbox"/>	Australian or International Passport
<input type="checkbox"/>	Australian Citizenship Certificate
<input type="checkbox"/>	Australian Visa documents
<input type="checkbox"/>	Immicard

If you do not have any of the documents listed above, the school will ask for other identifying documentation. This may include a Medicare card and a note from your general practitioner (GP) to confirm your child's name and date of birth.

2. Address

Some schools require evidence to verify your child's permanent residential address to process an enrolment application. If requested, you **must** provide evidence of your child's address.

Check box	Document
<input type="checkbox"/>	Contact the school to find out what documents are needed or refer to the enrolling in school website for more information: www.vic.gov.au/how-choose-school-and-enrol .

3. Residency status

If your child is an Australian citizen and they were born overseas, you **must** provide one of the documents listed below. You are not required to provide evidence of your child's Australian citizenship if they were born in Australia and are an Australian citizen.

Check box	Document
<input type="checkbox"/>	Student's Australian citizenship certificate
<input type="checkbox"/>	Student's Australian passport

If your child is an Australian permanent resident and holds a permanent residency visa, you **must** provide the school with a copy of one document combination listed below. This includes children who are New Zealand citizens.

Children who are born in Australia and have an Australian birth certificate are not automatically Australian citizens and may fall into this category.

Check box	Document
<input type="checkbox"/>	Student's New Zealand passport, or Student's New Zealand citizenship certificate
<input type="checkbox"/>	Student's New Zealand birth certificate, and <ul style="list-style-type: none">• One parent's New Zealand birth certificate (prior to 2006), or• One parent's New Zealand passport, or• One parent's Cook Island, Tokelau and Niue birth certificate.
<input type="checkbox"/>	Student's permanent residency visa, and Student's passport

If your child is a temporary resident and holds visa documents allowing them to attend school in Victoria on a short-term basis, you **must** provide the school with a copy of both documents listed below. This includes students on study visas (500 or 571) and visitor visas (600). It also includes students on bridging visas and those listed as dependents on their parent's visa.

Most students on temporary visas will need to pay fees and enrol in the International Student Program. For more information, please refer to www.study.vic.gov.au or contact the Department of Education International Education Division at international@education.vic.gov.au.

Check box	Document
<input type="checkbox"/>	Student's temporary residency visa, and Student's passport

If your child is a refugee but does not have a valid humanitarian visa, you **must** provide the school with a copy of one document listed below

Check box	Document
<input type="checkbox"/>	A letter from the Department of Home Affairs (DHA) or Adult Multicultural Education Services (AMES)

4. Living or care arrangements

If there is an intervention order, parenting order or any other court order impacting you or the child, you **must** provide the school with a copy of **all** court orders. If the child is living in a statutory or informal care arrangement such as foster care, kinship care, permanent care, residential care or lead tenant, you **must** provide **all** care arrangement documents to the school.

Check box	Document
<input type="checkbox"/>	Court orders or other care arrangement documents

If the child is living with you in an informal care arrangement, you **must** complete an Informal Carer's Statutory Declaration.

Check box	Document
<input type="checkbox"/>	Informal Carer's Statutory Declaration (available at: www2.education.vic.gov.au/pal/decision-making-responsibilities-students/policy)

5. Health and medical needs

If your child is enrolling in a primary school, you **must** provide a copy of your child's Immunisation History Statement. Secondary schools do not need to collect your child's immunisation history statement.

Check box	Document
<input type="checkbox"/>	Immunisation History Statement (available online through your myGov account, through the Express Plus Medicare mobile app , by calling the AIR enquiries line , or by asking your doctor to print a copy)

If your child has health or medical related needs, you **must** provide copies of the documents listed below if relevant.

Check box	Document
<input type="checkbox"/>	Asthma Action Plan (available at: www.asthma.org.au/treatment-diagnosis/asthma-action-plan/)
<input type="checkbox"/>	Anaphylaxis Action Plan (available at: www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis)
<input type="checkbox"/>	Allergy Action Plan – only required for students with a green plan (available at: www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-allergic-reactions)
<input type="checkbox"/>	Diabetes Action and Management Plan (available at: www.diabetesvic.org.au/support-services/diabetes-in-youth/diabetes-action-and-management-plans/)
<input type="checkbox"/>	Epilepsy Management Plan (available at: www.epilepsyfoundation.org.au/understanding-epilepsy/epilepsy-and-seizure-management-tools/epilepsy-plans/)
<input type="checkbox"/>	Emergency Medication Management Plan for Epilepsy (available at: www.epilepsyfoundation.org.au/understanding-epilepsy/epilepsy-and-seizure-management-tools/epilepsy-plans/)
<input type="checkbox"/>	Medical Advice Form (request from the school). If relevant, your child's medical practitioner will need to complete and return this form to the school.

Check box	Document
<input type="checkbox"/>	Medication Authority Form (request from the school). If relevant, your child's medical practitioner will need to complete and return this form to the school.

6. Other documents

If your child has a disability or additional learning needs, please provide any relevant information from their medical or allied health practitioners after they have been offered enrolment. This information will help the school make reasonable adjustments so that your child can participate in education on the same basis as their peers without a disability.

If requested, you **must** complete and return consent forms provided by the school. Examples of these consent forms are listed below. You can choose whether or not to give your consent.

Check box	Document
<input type="checkbox"/>	Head lice consent form
<input type="checkbox"/>	Photographing, Filming and Recording students consent form

To ensure a smooth enrolment process, please make sure all of the above documents are fully completed.

If your child currently attends another Government school, please advise them of your intentions to enrol at Edgars Creek Primary School.

Thank you for your understanding.
Edgars Creek Primary School

Form to Enrol in a Victorian Government School

EDGARS CREEK PRIMARY SCHOOL PREP 2027

Student Enrolment Information – 20	OFFICE USE ONLY	CASES21 Student ID:
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The information requested in this form is required for enrolment purposes. This information is collected to plan for and support the educational needs of your child.

This form should be completed by parents or carers who are responsible for enrolling their child. It is the responsibility of the person completing this form to consult with all other adults that need to be involved in the enrolment process. Parents or carers can co-sign the same form or complete separate forms if personal details are unable to be shared between them.

If required information is not provided or there is a dispute between parents or carers about a child's enrolment, the enrolling principal is required to consider the student's education and wellbeing when deciding whether to defer or accept the enrolment.

Only one enrolment form should be submitted per student. By completing and submitting this enrolment form, you are accepting a place for your child at the specified school (subject to any further checks required by the school).

All schools across Australia are expected to collect the same information. Questions marked with a ❖ are asked as a requirement of the Commonwealth Government to meet data collection, funding and reporting requirements under the Australian Education Regulations 2013.

STUDENT DETAILS

Surname:	
First Given Name:	
Second Given Name: <i>(if applicable)</i>	
Preferred First Name: <i>(if applicable)</i>	
❖ Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____
Date of Birth: <i>(dd-mm-yyyy)</i>	___ / ___ / _____ Student Mobile Number: <i>(if applicable)</i>

Which year are you seeking to enrol this student?
<input type="checkbox"/> Foundation <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> Ungraded

Intended start date:
<input type="checkbox"/> Day 1, Term 1 <input type="checkbox"/> Other: <i>(dd-mm-yyyy)</i> _____ / _____ / _____

Student's Permanent Residence

Your child's permanent residence is the address where they spend the majority of their days during the school week. If they spend an equal amount of time at two addresses, both are considered their permanent address and your child will be entitled to enrol in the designated neighbourhood school for either address.

The school may make enquiries to verify the information provided, such as checking the electoral roll at an Australian Electoral Commission office or the Victorian Electoral Commission head office; checking with a real estate agent; or checking whether there are any regulations/codes limiting the number of people living at one residence, for example if a rental property is a studio or one bedroom unit.

No. & Street Address:			
Suburb:			
State:		Postcode:	

How often does this student live at this address?

Always Mostly Balanced (50%)

If the student lives at another address during the school week, please provide further details including the address, who they reside with and how many days a week the student lives there:

Siblings

A sibling is defined broadly and can include step-siblings and students residing together as part of a multiple family cohabitation or out-of-home-care arrangements, including foster care, kinship care, permanent care and residential care.

Does the student have any siblings at this school? Yes No (move to next section)

Name	Current Year Level	Reside at same residential address as the student
1		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
2		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
3		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
4		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes

PARENT/CARER DETAILS

Enrolling Adult 1

Title

First Given Name

Surname

Gender Male Female
 Self-described: _____

Adult 1 Relationship to student:

Parent Step Parent
 Host Family Relative
 Self (adult student / mature minor) Friend
 Foster Parent Other: _____

Student lives with Adult 1:

Always Mostly
 Balanced (50%) Occasionally

No. & Street Address:

Suburb:

State: **Postcode:**

Enrolling Adult 2

Title

First Given Name

Surname

Gender Male Female
 Self-described: _____

Adult 2 Relationship to student:

Parent Relative
 Host Family Friend
 Foster Parent Other: _____
 Step Parent

Student lives with Adult 2:

Always Mostly
 Balanced (50%) Occasionally

Address is the same as Enrolling Adult 1 Yes No (complete below)

No. & Street Address:

Suburb:

State: **Postcode:**

Adult 1 Job Title:	
Adult 1 Employer:	

Adult 2 Job Title:	
Adult 2 Employer:	

In which country was Adult 1 born?
<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify): _____

In which country was Adult 2 born?
<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify): _____

❖ Does Adult 1 speak a language other than English at home?
<input type="checkbox"/> No, English only
<input type="checkbox"/> Yes (please specify): _____

❖ Does Adult 2 speak a language other than English at home?
<input type="checkbox"/> No, English only
<input type="checkbox"/> Yes (please specify): _____

Please indicate any additional languages spoken by Adult 1:	
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Please indicate any additional languages spoken by Adult 2:	
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Is an interpreter required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Is an interpreter required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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❖What is the highest year of primary or secondary school that Adult 1 has completed?
<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent
<input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below / no schooling

❖What is the highest year of primary or secondary school that Adult 2 has completed?
<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent
<input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below / no schooling

❖What is the level of the highest qualification that Adult 1 has completed?
<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma / Diploma
<input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualification

❖What is the level of the highest qualification that Adult 2 has completed?
<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma / Diploma
<input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualification

❖What is the occupation group of Adult 1? Please select the appropriate current parental occupation group from the attached list at the end of the document.
<ul style="list-style-type: none"> If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'.
<input type="text"/>

❖What is the occupation group of Adult 2? Please select the appropriate current parental occupation group from the attached list at the end of the document.
<ul style="list-style-type: none"> If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'.
<input type="text"/>

What is the main language spoken between the student and adult at home?	
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What is the main language spoken between the student and adult at home?	
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Preferred language of communications:	
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Preferred language of communications:	
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Is Adult 1 interested in being involved in school group participation activities? (e.g., School Council, excursions)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Is Adult 2 interested in being involved in school group participation activities? (e.g., School Council, excursions)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Can we contact Adult 1 during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is Adult 1 usually home during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Home Phone:		
Work Phone:		
Mobile:		
SMS Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Email Address:		
Email Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult 1's preferred method of contact: <i>(Email shall be used for communication that cannot be sent via phone)</i>	<input type="checkbox"/> Mobile	<input type="checkbox"/> Email
	<input type="checkbox"/> Home Phone	<input type="checkbox"/> Work Phone
Specify any other special conditions or times related to contact?		

Can we contact Adult 2 during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is Adult 2 usually home during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Home Phone:		
Work Phone:		
Mobile:		
SMS Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Email Address:		
Email Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult 2's preferred method of contact: <i>(Email shall be used for communication that cannot be sent via phone)</i>	<input type="checkbox"/> Mobile	<input type="checkbox"/> Email
	<input type="checkbox"/> Home Phone	<input type="checkbox"/> Work Phone
Specify any other special conditions or times related to contact?		

Emergency Contacts

Please provide emergency contacts in the event that the enrolling parents/carers are unavailable. Please ensure those listed as emergency contacts are aware that their information has been provided for this purpose.

Name	Relationship <i>Neighbour, Relative, Friend or Other (please specify)</i>	Telephone Contact	Language Spoken <i>Write E for English</i>
1			
2			
3			
4			

Billing Details

You are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extra-curricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees.

Send bills to: (select one)	<input type="checkbox"/> Adult 1	<input type="checkbox"/> Adult 2	<input type="checkbox"/> Another person / address* (complete details below)
Name to be used for all billing correspondence:			
No. & Street or PO Box			
Suburb:			
State:		Postcode:	
Billing Email:			

* Note: If you would like to send bills to another person / address, please ensure Additional Parent/Carer details are completed on pages 13-15.

Correspondence Details

Send correspondence addressed to: (select one)	<input type="checkbox"/> Adult 1	<input type="checkbox"/> Adult 2	<input type="checkbox"/> Both Adults	<input type="checkbox"/> Neither
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Additional Parents/Carers

Are there additional parents/carers in the student's life? <input type="checkbox"/> Yes (provide details below) <input type="checkbox"/> No (move to next section)
Name of Adult 3:
Name of Adult 4:

If yes, please complete the Adult 3 and/or Adult 4 sections as attachments to this form on pages 13-15. If required, you may request a separate form for additional parents/carers from the school. The separate form allows for the capture of four further parents/carers.

STUDENT DEMOGRAPHICS

❖ In which country was the student born?	
<input type="checkbox"/> Australia	<input type="checkbox"/> Other (please specify): _____
If born overseas, on what date did the student arrive in Australia? (dd-mm-yyyy) ____ / ____ / ____	
What is the student's residency status? *	
<input type="checkbox"/> Australian citizen – holds Australian Passport	<input type="checkbox"/> Permanent Resident (provide visa details below)
<input type="checkbox"/> Australian citizen – eligible for Australian Passport	<input type="checkbox"/> Temporary Resident (provide visa details below)
<input type="checkbox"/> New Zealand citizen	
Visa Sub Class:	Visa Expiry Date: (dd-mm-yyyy) ____ / ____ / ____
Visa Statistical Code: (Required for some sub-classes)	

* Note: An Australian birth certificate does not guarantee Australian residency or citizenship. Further information is available at www.passports.gov.au/getting-passport-how-it-works/documents-you-need/citizenship

Does the student hold a Bridging Visa?	<input type="checkbox"/> Yes (provide further detail below) <input type="checkbox"/> No
If Yes, what was the student's previous visa?	
If Yes, what visa has the student applied for?	

International Student ID*: (Not required for exchange students)
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* Note: If you are unsure of your International Student ID, please contact the International Education Division via phone (03 9084 8497) or email (international@education.vic.gov.au).

Does the student speak English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
❖ Does the student speak a language other than English at home?	
<input type="checkbox"/> No, English only	
<input type="checkbox"/> Yes (please specify the main language spoken at home): _____	
❖ Is the student of Aboriginal or Torres Strait Islander origin?	
<input type="checkbox"/> No	<input type="checkbox"/> Yes, Aboriginal
<input type="checkbox"/> Yes, Torres Strait Islander	<input type="checkbox"/> Yes, Both Aboriginal & Torres Strait Islander
Is the student a young carer (providing support/care for other family member/s)? *	<input type="checkbox"/> Yes <input type="checkbox"/> No

* A young carer is a young person under 25 years of age who provides, or intends to provide care, assistance, or support to a family member with a mental illness, physical illness, disability, chronic illness, or who is aged or has an addiction.

What are the student's living arrangements?	
<input type="checkbox"/> Student lives with parents/carers together at the same residence	<input type="checkbox"/> Student lives with each parent/carer at different times
<input type="checkbox"/> Student lives with one parent/carer only	<input type="checkbox"/> State Arranged Out of Home Care*
<input type="checkbox"/> Informal care arrangement#	<input type="checkbox"/> Student is independent
<input type="checkbox"/> Homeless	
If the student has a Case Manager, please provide their contact details below:	

* Students who live in court ordered alternative care arrangements away from their parents. These court ordered care arrangements include living with relatives or friends (kinship care), living with non-relative families (foster care or adolescent community placements) and living in residential care units.

If the student is living in an informal care arrangement, please contact the school for an Informal Carer's Statutory Declaration, which must be completed. If there are any **court orders** about the child, please provide copies of those orders to the school with this form.

How will the student primarily travel to and from school?				
<input type="checkbox"/> Walking	<input type="checkbox"/> School Bus	<input type="checkbox"/> Train	<input type="checkbox"/> Driven by parent/carer	<input type="checkbox"/> Taxi / Ride Share
<input type="checkbox"/> Bicycle	<input type="checkbox"/> Public Bus	<input type="checkbox"/> Tram	<input type="checkbox"/> Self-Driven	<input type="checkbox"/> Other: _____
If the student catches public transport to school, what station/stop does their journey commence:				
If the student drives themselves to school, what is their Car Registration Number:				

Students residing in rural and regional Victoria or attending special schools may be entitled to receive travel assistance. Travel assistance may be in the form of access to a school bus service or financial support through a conveyance allowance to assist with the cost of travel. Information on eligibility and the application process can be obtained from the school.

SCHOOL DETAILS

Are you seeking to enrol the student at this school full-time? <input type="checkbox"/> Yes (<i>move to next section</i>) <input type="checkbox"/> No				
If No, how many days a week would the student be attending this school?				
If No, provide reason you are seeking part-time enrolment:				
If No, provide details for other schools:				
Other school name:	Days / week:	Has enrolment been accepted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other school name:	Days / week:	Has enrolment been accepted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Previous Education – Students Enrolling in Foundation for the First Time

Is the student attending a funded kindergarten program* in the year before Foundation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of kindergarten or early childhood service:	

* Note: A kindergarten program that is funded and approved by the Victorian Government, has a play-based learning program, and is delivered by a qualified teacher. Funded kindergarten programs can be found at www.education.vic.gov.au/findaservice

Previous Education – Other

Has the student previously been enrolled at another school?	<input type="checkbox"/> Yes, in Victoria – Government School	<input type="checkbox"/> Yes, in Victoria – Catholic or Independent School
	<input type="checkbox"/> Yes, interstate	<input type="checkbox"/> Yes, overseas <input type="checkbox"/> No (<i>move to next section</i>)

If Yes, name of last school attended:	
If Yes, location of last school attended: (suburb/town/state/country)	
If Yes, date of attendance: (dd-mm-yyyy) _____ / _____ / _____ to _____ / _____ / _____	
If Yes, year levels of previous education:	
If the student studied overseas, what age did the student first start school?	
What was the language of the student's previous education?	
Period of interruption to education: (months/years)	Is the student repeating a year level? <input type="checkbox"/> Yes <input type="checkbox"/> No

STUDENT MEDICAL DETAILS

Schools require the health information requested in this section to plan for and support the health and wellbeing needs of students.

Please note: If there is a situation or incident which requires first aid to be administered to your child, school staff will administer first aid that is reasonably necessary and appropriate to their level of training. School staff will also seek emergency medical attention for your child if it is considered reasonably necessary. Any costs associated with student injury rest with parents/carers unless the Department of Education is liable in negligence (liability is not automatic). In the event that your child needs medical attention, school staff will contact you as soon as practically possible.

Medical Conditions

Does the student have an allergy? If yes, please provide the school with an ASCIA Action Plan for Allergies (available at: www.allergy.org.au/hp/ascia-plans-action-and-treatment#r2a)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the student at risk of anaphylaxis? If yes, please provide the school with an ASCIA Action Plan for Anaphylaxis (available at: www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the student have asthma?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has a current Asthma Action Plan been provided to School? If No, please provide an Asthma Action Plan to the School (available at: www.asthma.org.au/treatment-diagnosis/asthma-action-plan/)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the student have any other medical condition or other relevant medical assessment that the school needs to know about? If Yes, please ask the school for the appropriate <u>medical advice form</u> , to be completed by the treating medical practitioner and returned to school.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes to <u>any of the above</u> , please specify:		

Medication

Does the student take medication?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the medication required during school hours? If Yes, please ask the school for a <u>Medication Authority Form</u> , to be completed by the treating medical practitioner and returned to school	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Name of medications taken:		

Student Doctor

Doctor's Name:	
Medical Centre:	
Street Address:	
Suburb:	Postcode:
State:	Telephone Number:

ADDITIONAL LEARNING AND SUPPORT NEEDS

The Department of Education recognises that adjustments may be required for students with additional needs, including students with disability, so that they can participate at school. School personnel and parents or carers work together to identify the adjustments that may be needed to meet the student's learning and support needs.

Does the student have additional needs and require support for learning?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Does the student have additional needs in any of the following areas?	Hearing:	<input type="checkbox"/> Yes (please specify): _____
	Vision:	<input type="checkbox"/> Yes (please specify): _____
	Speech/Language:	<input type="checkbox"/> Yes (please specify): _____
	Physical:	<input type="checkbox"/> Yes (please specify): _____
	Cognitive/Learning:	<input type="checkbox"/> Yes (please specify): _____
	Social/Emotional:	<input type="checkbox"/> Yes (please specify): _____

Has the student had a disability assessment before?	<input type="checkbox"/> No	<input type="checkbox"/> Yes (specify outcome): _____
Has the student received individualised disability funding before?	<input type="checkbox"/> No	<input type="checkbox"/> Yes (please specify): _____
Has any previous education provider prepared a documented plan to support the student's additional learning needs?	<input type="checkbox"/> No	<input type="checkbox"/> Yes (provide details): _____

<p>Please indicate any adjustments that may assist the student to participate at school:</p>
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Privacy Statement

The personal and health information collected in this form, and any attachments, is required for enrolment at all Victorian Government Schools. The information is collected to ensure accurate enrolment, and to plan for and support the educational needs of students. The information will be managed securely and accessed only by staff, on a need-to-know basis, and in accordance with the Department of Education Schools' Privacy Policy which applies to all government schools (available at: www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx) or where mandated or allowed by law.

Please also refer to the Victorian Government School Privacy Collection Notice for details on handling of personal and health information in schools: www.education.vic.gov.au/Pages/Schools'-Privacy-Collection-Notice.aspx

DECLARATION

Thank you for completing this Student Enrolment form. The information provided is required to enable staff to properly enrol your child at our school as such it is important that it is accurate and up to date.

I/We confirm that:

- **I am/We are the person/people named as completing this form.**
- **The information in this form is true and correct.**
- **I/We agree to authorise this form by electronic means with an electronic signature.**

Signature of Enrolling Adult: _____ Date: ____ / ____ / ____

Signature of Enrolling Adult (if applicable): _____ Date: ____ / ____ / ____

Please select the category that best describes who has signed and completed this form. This will assist the school with the enrolment process.

- Both parents/carers have completed and signed this form.
- Parents/carers are completing separate forms (schools can provide additional forms on request).
- One parent has completed and signed this form on behalf of both parents. Contact details for the other parent have been provided in the form for the school's use as required.
- One parent has completed and signed this form and the contact details for the other parent are unknown to the enrolling parent/carer and not provided.
- There is only one parent/carer with legal responsibility for the child and that person has completed and signed this form.
- Other, please specify: (for instance, where the contact details for the other parent are known but it is not appropriate or safe to contact them) _____

If there are any court orders about the child, please provide copies of those orders to the school with this form.

WHO CAN SIGN THIS FORM?

- **A person with parental responsibility:** a parent of a child under 18 years of age, subject to relevant court orders (including parenting orders made under the *Family Law Act 1975* and protection orders made under the *Children, Youth and Families Act 2005* by the Children's Court, or other person granted parental responsibility under a relevant court order).
- **A carer formally authorised by Child Protection to enrol the student:** the Department of Families, Fairness and Housing (DFFH) can issue a written authorisation to the carer of a child in out of home care to make decisions about the child. In some circumstances this will include specific authorisation to enrol the child at school.
- **Informal carer:** an Informal Carer is a relative or other responsible adult with whom the child lives, and who has day to day care of the child. The informal carer should provide an Informal Carer Statutory Declaration to confirm their status as an informal carer. A copy of this statutory declaration can be obtained from www.education.vic.gov.au/PAL/informal-carer-statutory-declaration-template.pdf
- **Students living independently:** If the student is an adult or a mature minor for the purpose of enrolment and they live independently. These students will need to be considered in accordance with the www.education.vic.gov.au/pal/decision-making-responsibilities-students/policy policy.
- **Adult Students:** a student 18 years of age or older is considered an adult and can sign their own consent form.

ATTACHMENT 1 – PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. Please indicate your current occupation – not your qualification. This information is used for determining funding allocations to schools.

Group A: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation

Public Service Manager (Section head or above), regional director, health / education / police / fire services administrator

Other administrator (school principal, faculty head / dean, library / museum / gallery director, research facility director)

Defence Forces Commissioned Officer

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:

- Health, Education, Law, Social Welfare, Engineering, Science, Computing professional
- Business (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)
- Air/sea transport (aircraft / ship's captain / officer / pilot, flight officer, flying instructor, air traffic controller)

Group B: Other business managers, arts/media/sportspersons and associate professionals

Owner / Manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business

Specialist Manager (finance / engineering / production / personnel / industrial relations / sales / marketing)

Financial Services Manager (bank branch manager, finance / investment / insurance broker, credit / loans officer)

Retail sales / Services manager (shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency)

Arts / Media / Sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proofreader, sportsman/woman, coach, trainer, sports official)

Associate Professionals - generally have diploma / technical qualifications and support managers and professionals:

- Health, Education, Law, Social Welfare, Engineering, Science, Computing technician / associate professional
- Business / administration (recruitment / employment / industrial relations / training officer, marketing / advertising specialist, market research analyst, technical sales representative, retail buyer, office / project manager)
- Defence Forces senior Non-Commissioned Officer

Group C: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a 4-year Trade Certificate, usually by apprenticeship. All tradespeople are included in this group

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)

Skilled office, sales, and service staff:

- Office (secretary, personal assistant, desktop publishing operator, switchboard operator)
- Sales (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)
- Service (aged / disabled / refuge / childcare worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

Group D: Machine operators, hospitality staff, assistants, labourers and related workers

Drivers, mobile plant, production / processing machinery and other machinery operators

Hospitality staff (hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper)

Office assistants, sales assistants, and other assistants:

- Office (typist, word processing / data entry / business machine operator, receptionist, office assistant)
- 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)
- Assistant / aide (trades' assistant, school / teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum / gallery attendant, usher, home helper, salon assistant, animal attendant)

Labourers and related workers

- Defence Forces - ranks below senior NCO not included above
- 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)
- Other worker (labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)

Billing Details

You are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extra-curricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees.

Send bills to: <i>(select one)</i> <input type="checkbox"/> Adult 3 <input type="checkbox"/> Adult 4 <input type="checkbox"/> Another person / address* (complete details below)	
Name to be used for all billing correspondence:	
No. & Street or PO Box	
Suburb:	
State:	Postcode:
Billing Email:	

* Note: If you would like to send bills to another person / address, please ensure Additional Parent/Carer details are completed on pages 13-14.

Correspondence Details

Send correspondence addressed to: <i>(select one)</i> <input type="checkbox"/> Adult 3 <input type="checkbox"/> Adult 4 <input type="checkbox"/> Both Adults <input type="checkbox"/> Neither
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ATTACHMENT 4 – OFFICE USE ONLY SECTION

OFFICE USE ONLY				
Child's Name sighted:		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Enrolment Date:
Year level:	Home Group:	Timetabling Group:	House:	Campus:
Student Email Address:				
Australian residency confirmed:		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sighted / provided
Date of birth confirmed:		<input type="checkbox"/> Yes – Birth certificate	<input type="checkbox"/> Yes – Doctor certificate	<input type="checkbox"/> Yes - Other <input type="checkbox"/> Not sighted / provided
Does the student have a Disability ID number?		<input type="checkbox"/> Yes (please specify): _____ <input type="checkbox"/> No		

Does the student have a Victorian Student Number (VSN)?		
<input type="checkbox"/> Yes, please specify: _____	<input type="checkbox"/> Yes, but the VSN is unknown	<input type="checkbox"/> No, the student has never been issued a VSN

For Foundation students, has a Transition Learning and Development Statement been provided?	<input type="checkbox"/> Yes, via Insight Assessment Platform	<input type="checkbox"/> Yes, direct from teacher/parent/carer	<input type="checkbox"/> No	<input type="checkbox"/> Pending
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Immunisation Certificate received:	<input type="checkbox"/> Yes – Up to date	<input type="checkbox"/> Yes – Not up to date	<input type="checkbox"/> Not sighted / provided
Are there any Notice/s on the Immunisation History Statement:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the student have asthma, allergies or anaphylaxis?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the student need to take medication during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
*Have the required medical forms been provided to the school?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A – no medical conditions

*Note: Additional forms including student medical advice and condition forms can be found here: [Medical Advice Forms](#)

Can the student Individual Education Plan include travel training?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the student attending their nearest school?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the student reside in Designated Transport Area (if attending special school)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can the student be accommodated on an existing route (if applicable)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pick-up Point:	Map Ref:	Time AM:
Set Down Point:	Map Ref:	Time PM:

Current Court Order or other access document placed on student file?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet to be provided to the school)