

## **APPLICATION FOR ENROLMENT**

 $teaching \cdot challenging \cdot transforming$ 

Return this completed Application for Enrolment to your school of choice along with necessary documentation to support your application:

- Birth Certificate or identity documents
- Baptism Certificate (if applicable)
- Current school and NAPLAN reports (if applicable)
- Health or Medical Assessment reports (if applicable)
- Current Visa or Passport (if applicable)
- Legal Documentation (if applicable)

Once all documentation is received, the application is considered complete. Submission of an application does not guarantee enrolment.

Please refer to the Application for Enrolment Notes Booklet.

| Student Information   |                                  |  |  |  |
|---|----------------------------------|--|--|--|
| School Name   | School Suburb                    |  |  |  |
| Student's Legal Surname   |                                  |  |  |  |
| Student's Legal First Name  |                                  |  |  |  |
| Student's Preferred Surname (to be used only with Principal's approval)                         |                                  |  |  |  |
| Student's Preferred First Name (if different from Legal First Name)                             |                                  |  |  |  |
| Student's Date of Birth dd/mm/yyyy  | Gender ☐ Male ☐ Female           |  |  |  |
| Birth Certificate Number Bir  | th Certificate Registration Date |  |  |  |
| What year level/year of enrolment is this for   |                                  |  |  |  |
| What is the start date of this enrolment?   | dd/mm/yyyy                       |  |  |  |
| Has your child ever been enrolled in a Brisbane Catholic Education School? (please list school) | ☐ Yes ☐ No                       |  |  |  |
| Does the student have any school-aged siblings currently attending a BCE School                 |                                  |  |  |  |
| Sibling's Legal Name and School (if applicable)   |                                  |  |  |  |
| Sibling's Date of Birth dd/mm/yyyy  | Sibling's Gender                 |  |  |  |

| Student Background   |   |
|--|---|
| In which country was the student   | : born?   |
| ☐ Australia ☐ Other (Birth Country)  |   |
| Is the student an Australia Citizer  | 1?  |
|  | oorn in Australia, or the student was born in Australia and the parents were not born in proof of Australian Citizenship documentation <u>must be</u> provided) |
| Is the student of Aboriginal or To   | rres Strait Islander origin?  |
| <ul> <li>□ No</li> <li>□ Yes, Aboriginal</li> <li>□ Yes, Torres Strait Islander</li> <li>□ Yes, Both Aboriginal and Torres St</li> </ul> | trait Islander  |
| What is the first language spoken  | by the student?   |
| ☐ English ☐ Other (Please specify  |   |
| What is the main language spoke  | n at home?  |
| <ul><li>No, English Only</li><li>Yes, Other (Please specify)</li></ul>   |   |
| Is another language spoken at ho   | me other than those noted above?  |
| <ul><li>☐ No</li><li>☐ Yes, Other (Please specify)</li></ul>   |   |
| Student Visa Details   |   |
| Complete this section for students who are<br>Passport (including passport number must   | e NOT either Australian or New Zealand citizens – a legible copy of the student's Visa and<br>t be attached)  |
| Country of Passport Issue  |   |
| Date of Entry to Australia   | dd/mm/yyyy  |
| Visa Sub-Class Number  |   |
| Visa Expiry Date   | dd/mm/yyyy  |
| Previous School  |   |

Provide details of any educational environment which the student currently attends or has previously attended, starting with the most recent

| Previous School Name, S   | uburb & State        | Last Enrolled<br>Year Level | Dates of Attendance   |
|---|----------------------|-----------------------------|---|
|   |                      |                             |   |
|   |                      |                             |   |
|   |                      |                             |   |
|   |                      | _                           |   |
| Student's Religion  |                      |                             |   |
| Student's Religion  | ☐ Catholic           |                             |   |
|   | Other (please        | specify)                    |   |
| Has the student received S<br>must be supplied and details of an                                    |                      |                             | legible copy of the student's Baptismal Certificate below). |
| _ ·   | Date Received        |                             | Parish and State  |
| Baptism   | dd/mm/yyyy           |                             |   |
| ☐ Reconciliation  | dd/mm/yyyy           |                             |   |
| ☐ Eucharist   | dd/mm/yyyy           |                             |   |
| ☐ Confirmation  | dd/mm/yyyy           | j                           |   |
| Parent/Legal Guardia  | an/Caregiver (1)     | Details                     |   |
| Legal Surname   |                      |                             |   |
| Legal First Name  |                      |                             |   |
| Other Given Names   |                      |                             |   |
| Preferred Surname<br>(if different from Legal Surname)  |                      |                             |   |
| Preferred First Name<br>(if different from Legal First Name   | ?)                   |                             |   |
| Title (e.g. Mr/Ms/Dr)   |                      |                             |   |
| Gender  | ☐ Male ☐ I           | Female                      |   |
| Date of Birth   | dd/mm                | 1/уууу                      |   |
| Is an Interpreter required?   | Yes 🗌 I              | No                          |   |
| Country of Birth  | stralia 🗌 Other (ple | ase specify)                |   |
| Country of Passport Issue<br>(if not eligible for an Australian pa                                  | essport)             |                             |   |
| Main Language Spoken at I<br>(does the parent/Legal Guardian s<br>Language other than English at he | speak a              |                             | es, Other please specify)                                   |
| Other Language Spoken at  | Home No No           | Yes, Other (please          | e specify)  |

| Religion<br>(please specify)  |   |                |                |                             |        |
|---|---|----------------|----------------|-----------------------------|--------|
| Parish of Worship (if applicable)   |   |                |                |                             |        |
| Highest Year of Seco<br>(please place a 'x' in appli  |   | ompleted       |                |                             |        |
| Year 12 or equivaler Year 11 or equivaler Year 10 or equivaler Year 9 or equivalent Not Stated/Unknown              | nt<br>nt<br>t or below  |                |                |                             |        |
| Highest Qualification<br>(please place a 'x' in appli   |   | ed             |                |                             |        |
| Bachelor degree or a Advanced diploma/I Certificate I to IV (ir No non-school quali Not Stated/Unknown              | Diploma<br>ncluding trade cert<br>fication                                | ificate)       |                |                             |        |
| Occupation Group<br>(please place a 'x' in appli  | icable box)   |                |                |                             |        |
| Senior Management Other Business Man Tradespeople, clerks Machine Operators, Not in paid work in Not Stated/Unknown | agers<br>s and skilled office,<br>hospitality staff, as<br>last 12 months |                |                | ers                         |        |
| <b>Occupation</b> (e.g. plumber, fire fighter,  | , student, nurse)   |                |                |                             | _<br>_ |
| Workplace   |   |                |                |                             |        |
| Talents<br>(indicate any special talen  | nts)  |                |                |                             | _      |
| Interests<br>(indicate any special interests  | ests)   |                |                |                             | _<br>_ |
| Parent/Legal G  | uardian/Care  | giver (1) Addr | ess and Contac | ct Information              |        |
| Residential Address<br>(Not a post office box)  |   |                |                |                             | _<br>  |
|   | ame as Resident<br>different to Resid                                     |                |                |                             |        |
| Mobile Telephone Nu   | ımber   |                |                | (Indicate best contact orde | <br>r) |
| Home Telephone Nu   | mber  |                |                |                             |        |
| Work Telephone Nur  | nber  |                |                | -<br>┐                      |        |

| Email Address  |                                      |   |  |
|--|--------------------------------------|---|--|
|  |                                      |   |  |
| Parent/Legal Gua   | rdian/Caregiver (1) Rela             | ationship to the S  | tudent                                       |
| What is the relationsh  Mother Father Other  | ip of Parent/Legal Guardian/         | Caregiver 1 to the st   | udent?                                       |
| Yes  | lian/Caregiver 1 the 1st Emer        | -   | e student?                                   |
|  | ian/Caregiver 1 the Legal Gu         | •   | ? (if this person is not a birth or adoptive |
| Is Parent/Legal Guard<br>general wellbeing of a stude<br>Yes   |                                      | ver of this student?  | (a person who has responsibility for the     |
| Is Parent/Legal Guard Yes No   | lian/Caregiver 1 the Main Coi        | ntact of this student?  | (A student must have one main contact)       |
| Is this person to recei<br>Report Cards/Progress Re<br>Newsletters<br>Invitations<br>Parent Portal Access<br>SMS<br>Parent Slips | ·                                    | es No |  |
| Does Parent/Legal Gu ☐ Yes ☐ No  | ardian/Caregiver 1 reside wi         | th the student  |  |
| Parent/Legal Gua   | ardian/Caregiver (2) Rel             | ationship to the S  | Student                                      |
| Legal Surname  |                                      |   |  |
| Legal First Name   |                                      |   |  |
| Other Given Names  |                                      |   |  |
| <b>Preferred Surname</b> (if a   | lifferent from Legal Surname)        |   |  |
| <b>Preferred First Name</b>  | (if different from Legal First Name) |   |  |
| Title (e.g. Mr/Ms/Dr)  |                                      |   |  |
| Gender   | ☐ Male ☐ Female                      |   |  |

| Date of Birth   | dd/mm/yyyy                      |                  |                     |  |  |
|---|---------------------------------|------------------|---------------------|--|--|
| Is an Interpreter required? ☐ Yes ☐ No  |                                 |                  |                     |  |  |
| Country of Birth  | ☐ Australia ☐ Other             | (please specify) |                     |  |  |
| Country of Passport Iss   | sue                             |                  |                     |  |  |
| Main Language Spoken<br>(does the parent/Legal Guard<br>Language other than English   | dian speak a                    |                  | Other<br>e specify) |  |  |
| Other Language Spoke  | n at Home 🗌 No                  |                  | Other<br>e specify) |  |  |
| Religion (please specify)   |                                 |                  |                     |  |  |
| Parish of Worship (if applicable)   |                                 |                  | )                   |  |  |
| Highest Year of Second (please place a 'x' in applicab  |                                 |                  |                     |  |  |
| Year 12 or equivalent Year 11 or equivalent Year 10 or equivalent Year 9 or equivalent or Not Stated/Unknown  | below                           |                  |                     |  |  |
| Highest Qualification Le (please place a 'x' in applicab  |                                 |                  |                     |  |  |
| ☐ Bachelor degree or abo ☐ Advanced diploma/Dipl ☐ Certificate I to IV (inclu ☐ No non-school qualificate ☐ Not Stated/Unknown  | oma<br>uding trade certificate) |                  |                     |  |  |
| Occupation Group (please place a 'x' in applicable box)   |                                 |                  |                     |  |  |
| <ul> <li>□ Senior Management</li> <li>□ Other Business Managers</li> <li>□ Tradespeople, clerks and skilled office, sales and service staff</li> <li>□ Machine Operators, hospitality staff, assistants, labourers and related workers</li> <li>□ Not in paid work in last 12 months</li> <li>□ Not Stated/Unknown</li> </ul> |                                 |                  |                     |  |  |
| Occupation (e.g. plumber, fire fighter, std   | udent, nurse)                   |                  |                     |  |  |
| Workplace   |                                 |                  |                     |  |  |
| Talents<br>(indicate any special talents)   |                                 |                  |                     |  |  |
| Interests (indicate any special interests   | 5)                              |                  |                     |  |  |

| Parent/Legal  | Guardian/Ca   | regiver (2) A   | ddress and  | Contact     | Information                            |
|---|---|---|---|-------------|--|
| Residential Addres<br>(same as Parent/Legal   | _   | r 1)  | ☐ Yes   | ☐ No        |  |
| If No, please suppl<br>(not a post office box)  | y address   |   |   |             |  |
| Postal Address  | ☐ Same as Res   | idential Address  | ☐ Different   | to Reside   | ential Address (please specify below)  |
|   |   |   |   |             |  |
| Mobile Telephone  | Number  |   |   |             | [ (Indicate best contact order)        |
| Home Telephone N  | lumber  |   |   |             |  |
| Work Telephone N  | umber   |   |   |             |  |
| Email Address<br>(not to be the same  |   |   |   |             |  |
| email address as Paren  | t/Legal Guardian/C  | aregiver 1)   |   |             |  |
| Parent/Legal (  | Guardian/Ca   | regiver (2) R   | elationship   | to the S    | Student                                |
| parent, then Legal docu Yes No Is Parent/Legal Gu   | rify)  uardian/Caregion  uardian/Caregion  uardian/Caregion  umentation must be | ver 2 the 1 <sup>st</sup> Emo<br>ver 2 the Legal G<br>e attached) | ergency Conta   | act for the |  |
| Yes No  |   |   |   |             |  |
| _   | ıardian/Caregi  | ver 2 the Main C  | ontact of this  | student?    | (A student must have one main contact) |
| Is this person to re Report Cards/Progres Newsletters Invitations Parent Portal Access SMS Parent Slips  Does Parent/Legal Yes No | ss Reports  |   | Yes No |             |  |

### Additional Student Information **Residential Address of the student** Student lives with both adults together Student lives with each adult at different times Student lives with Parent/Legal Guardian 1 Student lives with Parent/Legal Guardian 2 (please specify alternative address below)ceadie ☐ Other *(please specify)* Is there any limitation(s) on contact between the student and a parent or another person, or are there any legal issues concerning the student of which the school should be aware? ☐ Yes (Provide details below and ensure a copy of any relevant legal document is forwarded to proceed the enrolment.) ..... Is the student in the Care of the State? Yes ☐ No Does the Student have a medical condition of which the school should be aware? (Note that if any medication is required to be administered to the student during school time or if the student has a Management Plan, a management plan will need to be provided upon enrolment and retained on the student's file.) **Condition Other Medical Information Requires Medication Has Management Plan** ☐ Allergy (please specify) ☐ Yes No | | Yes l No Anaphylaxis Yes No Yes No **Asthma** Yes No Yes No No ☐ Diabetes Mellitus Type 1 Yes Yes No | Epilepsy | Yes No l l Yes No Febrile Convulsions Yes No Yes No ☐ Yes Yes ☐ Other *(please specify)* No No Has the student had any specialist assessments of which the school should be aware? (an assessment by a speech pathologist, behavioural psychologist, orthopaedic specialist, paediatrician etc.) Yes (please specify) □ No Does the student have any educational support requirements of which the school should be aware? Yes (please specify) No Has the student been diagnosed with a disability? Yes (please specify) □No Has the student been verified by an educational sector in Queensland (e.g. Department of Education and Training, Independent Schools Queensland, Catholic Education or from interstate or overseas education sectors? Yes (please specify) ☐ No Does the student have younger siblings not yet attending school? ☐ Yes (please provide the children's names and dates of birth)

■ No

# BRISBANE CATHOLIC EDUCATION (BCE) INFORMATION COLLECTION NOTICE

**Information we collect:** Brisbane Catholic Education collects and records personal information, including sensitive information about students, parents/legal guardians and volunteers, before and during the course of a student's enrolment at our school. Laws governing or relating to the operation of schools require that certain information is collected. These may include Education, Public Health and Child Protection laws. We may ask you to provide medical reports about students from time to time. Health information about students is sensitive information within the terms of the Australian Privacy Principles under the *Privacy Act (1988)*.

**Purpose of collection:** The primary purpose of collecting and recording this information is to enable the provision of a quality Catholic/Christian education. In addition, some of the information we collect and record is to satisfy the school's legal obligations, particularly to enable the school to discharge its duty of care to students and parents/legal guardians. This information may also be used to perform necessary associated administrative activities, which will enable students to take part in activities at the school and for appropriate parish purposes.

**Disclosure of information:** Personal and sensitive information may be disclosed by the school for educational, administrative and support purposes to others including, but not limited to, personnel within the Brisbane Catholic Education Office, other Brisbane Catholic Education schools, other related church entities/agencies, medical practitioners, people providing services to schools, such as specialist visiting teachers and consultants, volunteers and counsellors, 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), people providing administrative and financial services to the school, anyone you authorise the school to disclose information to and anyone to whom the school is required or authorised to disclose the information to by law, including child protection laws. In addition, we may be required by law to disclose this information to government departments, both State and Federal (including for policy and funding purposes).

Personal information collected from students is regularly disclosed to their parents/guardians.

The school may use online or 'cloud' service providers to store personal information and to provide services to the school that involves the use of personal information, such as services relating to email, instant messaging and 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.

On occasions, information such as academic and sporting achievements, student activities and other news may be published in newsletters, magazines, and on the school website and school social media accounts. This may include photographs and videos of student activities such as sporting events, school camps and school excursions. The school will obtain permissions from the student's parent/guardian if we would like to include such photographs or videos in our promotional material or otherwise make this material available to the public such as on the internet. Parents may seek access to personal information collected about them and their son/daughter by contacting the school.

The Brisbane Catholic Education Privacy Policy sets out how parents/guardians or students may seek access to and correction of their personal information which the school has collected and holds. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the school's duty of care to the student or where students have provided information in confidence. Any refusal will be notified in writing with reasons if appropriate. The Brisbane Catholic Education Privacy Policy also sets out how parents/guardians and students may complain about a breach of privacy and how the complaint will be handled.

The school may from time to time engage in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the school'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. We may include your contact details in a class list and school directory.

If you provide the school with the personal information of others, such as the student's other parents, doctors or emergency contacts, we request that you inform them that you are disclosing that information to all Brisbane Catholic Education schools and why. They should also be informed that they can access that information if they wish and that the school does not usually disclose the information to third parties.

**Our privacy position:** Brisbane Catholic Education is bound by the *Privacy Act (1988)* and has adopted the thirteen (13) Australian Privacy Principles. The Brisbane Catholic Education Privacy Policy detailing Brisbane Catholic Education's practices and procedures for the use and management of the personal and sensitive information it collects and records can be accessed on the school's website or the Brisbane Catholic Education website <a href="https://www.bne.catholic.edu.au">www.bne.catholic.edu.au</a>. Alternatively, a hard copy of the statement may be provided on request.

**Information required:** If we do not obtain the personal and sensitive information referred to above, we may not be able to enrol or continue to enrol your student.

| Parent/Legal Guardian/Caregiver Declaration  |  |  |  |  |
|--|--|--|--|--|
| Is there any other information which you believe may assist with this application for enrolment? |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

#### I declare that:

- I have completed this form in conjunction with the Application for Enrolment Notes Booklet.
- The information provided in this form is complete and is a full and frank disclosure of information pertinent to the student seeking enrolment.

### I understand that:

- I have an obligation to inform the school of any change to the information provided in this form that may affect this Application for Enrolment.
- Should this Application for Enrolment be successful, I have an ongoing obligation to provide the school with relevant, current information about the student for the period of enrolment at the school.
- Submission of this form does not guarantee enrolment at this school.

| Signature of Parent/Legal Guardian/Caregiver | Signature of Parent/Legal Guardian/Caregiver |
|--|--|
| Full Legal Name                              | Full Legal Name                              |
| Relationship to Student                      | Relationship to Student                      |
| Date Signed d d / m m / y y y y              | Date Signed dd/mm/yyyy                       |