

STUDENT ENROLMENT INFORMATION		CASES21 STUDENT ID								
Enrolment Date: ____/____/____		Birth Certificate Sighted:		YES <input type="checkbox"/> NO <input type="checkbox"/>						
VSN ____-____-____		YEAR LEVEL ____		Immunisation Certificate Sighted:		YES <input type="checkbox"/> NO <input type="checkbox"/>				
STUDENT DETAILS										
SURNAME:										
FIRST NAME:										
SECOND NAME:										
PREFERRED NAME:										
GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> SELF-DESCRIBED				BIRTH DATE: (DD/MM/YYYY) / /						
ADULT A DETAILS					ADULT B DETAILS					
GENDER: <input type="checkbox"/> F <input type="checkbox"/> M TITLE: MR/MS/MRS/MISS					GENDER: <input type="checkbox"/> F <input type="checkbox"/> M TITLE: MR/MS/MRS/MISS					
SURNAME					SURNAME					
FIRST NAME					FIRST NAME					
OCCUPATION					OCCUPATION					
EMPLOYER					EMPLOYER					
COUNTRY OF BIRTH					COUNTRY OF BIRTH					
LANGUAGE OTHER THAN ENGLISH: YES NO					LANGUAGE OTHER THAN ENGLISH: YES NO					
OTHER LANGUAGE:					OTHER LANGUAGE:					
INTERPRETER REQUIRED YES/NO					INTERPRETER REQUIRED YES/NO					
♦What is the highest year of school completed?					♦What is the highest year of school completed?					
Year 12 or equivalent					Year 12 or equivalent					
Year 11 or equivalent					Year 11 or equivalent					
Year 10 or equivalent					Year 10 or equivalent					
Year 9 or equivalent or below					Year 9 or equivalent or below					
♦What is the highest qualification level completed?					♦What is the highest qualification level completed?					
Bachelor Degree or above					Bachelor Degree or above					
Advanced Diploma/Diploma					Advanced Diploma/Diploma					
Certificate I to IV (Including trade certificate)					Certificate I to IV (Including trade certificate)					
No non-school qualification					No non-school qualification					
♦Parent A – currently employed Y/N					♦Parent B – currently employed Y/N					
If Yes Current occupation is:					If Yes Current occupation is:					
Occupation Group:					Occupation Group:					
RELATIONSHIP OF ADULT A TO STUDENT					RELATIONSHIP OF ADULT B TO STUDENT					
Parent					Parent					
Step-Parent or Foster Parent					Step-Parent or Foster Parent					
Relative					Relative					
Friend					Friend					

THE STUDENT LIVES WITH ADULT A:				THE STUDENT LIVES WITH ADULT B:			
	Always				Always		
	Mostly				Mostly		
	Balanced				Balanced		
	Occasionally				Occasionally		
	Never				Never		
ADULT A HOME ADDRESS				ADULT B HOME ADDRESS (Tick if same as Adult A) <input type="checkbox"/>			
No & Street:				No & Street:			
Suburb				Suburb			
State		Postcode		State		Postcode	
ADULT A POSTAL ADDRESS				ADULT B POSTAL ADDRESS (Tick if same as Adult A) <input type="checkbox"/>			
Street/Box No:				Street/Box No:			
Suburb				Suburb			
State		Postcode		State		Postcode	
Send Correspondence addressed to:				Adult A Adult B Both Adults			
ADULT A CONTACT INFORMATION				ADULT B CONTACT INFORMATION			
HOME PHONE No:				HOME PHONE No:			
MOBILE PHONE No:				MOBILE PHONE No:			
BUSINESS HOURS PHONE No:				BUSINESS HOURS PHONE No:			
Can we contact at work? YES NO				Can we contact at work? YES NO			
EMAIL:				EMAIL:			
EMERGENCY CONTACT INFORMATION (OTHER THAN PARENTS)							
Name		Relationship to Student		Phone Number/s			
1							
2							
3							
4							
DEMOGRAPHIC DETAILS OF STUDENT							
♦ In which country was the student born? Australia Other – Please Specify:							
What is the residential status of the student? Permanent Temporary							
Basis of Australian Residency: Eligible for Passport Holds Passport Permanent Residency Visa							
Date of Arrival in Australia: (dd/mm/yyyy) / / Visa Expiry Date: / / / Visa Subclass:							
Does the student speak English? YES NO				♦ Does the student speak a language other than English at home? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please specify:			
♦ Is the student of Aboriginal or Torres Strait Islander origin? (Please specify)							
♦ Questions marked with this symbol are asked as a requirement of the Commonwealth Government. All schools across Australia are required to collect the same information.							
No Yes, Aboriginal Yes, Torres Strait Islander Yes, Aboriginal & Torres Strait Islander							
♦ Questions marked with this symbol are asked as a requirement of the Commonwealth Government. All schools across Australia are required to collect the same information.							

PRE-SCHOOL/PREVIOUS SCHOOL DETAILS			
Name of Pre-School/Previous School _____			
Previous School Year Level _____			
STUDENT RESTRICTIONS DETAILS			
ACCESS RESTRICTIONS: IS THE STUDENT AT RISK?		YES	NO
Is there an Access Alert for the student?		YES/NO (If Yes, then complete the following questions)	
Access Type: Family Law/Parenting Order Parenting Plan Intervention Order Child Protection Order DFFH Authorisation Other _____			
*** Please provide a copy of any legal orders to the School. ***			
Is there an Activity Alert for the student?		NO	YES - If Yes, please describe the activity restriction:
FAMILY DOCTOR DETAILS			
Doctors Name:		Phone:	
MEDICAL CONDITIONS DETAILS			
Does the student suffer impairments in any of the following areas:			
	Hearing		Vision
	Speech		Mobility
STUDENTS WITH ADDITIONAL LEARNING AND SUPPORT NEEDS			
Does the student have additional needs and require support for learning?		YES	NO
Please indicate any adjustments that may assist the student to participate at school:			
DOES THE STUDENT HAVE A DISABILITY ID NUMBER? PLEASE PROVIDE THIS HERE:			
DOES THE STUDENT SUFFER FROM ASTHMA?		YES	NO
ASTHMA MEDICAL CONDITION DETAILS (Answer the following ONLY if the student suffers from Asthma)			
Please indicate if your child suffers from any of the following symptoms: (Please circle all applicable)			
Coughing	Wheezing	Difficulty Breathing	Exhibits symptoms after exertion Tight Chest
Does the student take medication for asthma?		YES	NO
If Yes please provide an Asthma Management Plan to the School and asthma medication.			
ALLERGIES e.g. Anaphyllaxis			
Does the student have any allergies?		YES	NO
If Yes, please specify: e.g. Nuts, shellfish, penicillin – Please provide the school with an Allergy Action Plan			
Does the student require an Epipen?		YES	NO
If Yes please provide the school with a current Anaphyllaxis Action Plan from your doctor. Please provide Epipen.			
Name and dosage of other medication taken for allergies: e.g Claratyne			
Is the medication taken as a preventative or in response to symptoms?		Preventative	Response
OTHER MEDICAL CONDITIONS			
Does the student have any other medical conditions?		YES	NO

If Yes, please specify:
Symptoms:
Does the student take medication for the above medical condition?
Name and dosage of medication taken:

PERMISSIONS

HEAD LICE INSPECTION CONSENT:
I **DO/DO NOT** (please circle one) consent to the child named on this enrolment form to participate in the school's head lice inspection program during his/her time at this school unless otherwise notified.

Signature of Parent/Guardian: _____ Date: ____/____/____

MEDIA/ PUBLICATIONS:
I **DO/DO NOT** (please circle one) give permission for photographs and other visual information regarding my child to be used by the school for promotion and other educational purposes: eg school newsletter, school website, newspaper, television and Internet.

Signature of Parent/Guardian: _____ Date: ____/____/____

MEDICAL CONSENT :
In the event of illness or injury to my child whilst at school, on an excursion, or travelling to or from school:
I authorise the Principal or teacher-in-charge of my child, where the Principal or teacher-in-charge is unable to contact me, or it is otherwise impracticable to contact me to: **(cross out any unacceptable statement)**

Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner,
Administer such first aid as the Principal or staff member may judge to be reasonably necessary.

Signature of Parent/Guardian: _____ Date: ____/____/____

Comments: _____

I certify that the information contained within this form is true and correct.

Signature of Parent/Guardian: _____ Date: ____/____/____

Please include a copy of Student Birth Certificate & Immunisation record with this form.

ATTACHMENT – 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)