



APPLICATION FOR ENROLMENT

INFORMATION TO INCLUDE IN YOUR APPLICATION

Please ensure you have the following documents readily available before you begin this application form, as you may need to refer to them. Copies of the documents need to be provided with your application.

You will also need to pay an application fee, via EFTPOS at the office or over the phone.

STUDENT DOCUMENTS CHECKLIST

- Birth Certificate*
- Australian Immunisation Register (AIR) Immunisation Status Report*
- Medicare*
- Passport (if not born in Australia)
- Visa (if not an Australian citizen)
- Baptism (if applicable)
- Reconciliation (if applicable)
- First Communion (if applicable)
- Confirmation (if applicable)

CAREGIVER DOCUMENTS CHECKLIST

- Caregivers' Passport (if not born in Australia)
- Caregivers' Visa (if not an Australian citizen)
- Health Care Card (if applicable)

OTHER DOCUMENTS CHECKLIST

- Parish Priest Reference (if applicable)
- Custodial Court Order (if applicable)

APPLICATION FEE

- Pay the non-refundable application fee (via EFTPOS at the office or over the phone)*

SECTION 1: STUDENT INFORMATION

STUDENT

First name	
Middle name	
Surname	
Preferred name	
Date of birth	
Gender	

ENTRY LEVEL

Academic entry level	Kindergarten Pre-Primary Y1 Y2 Y3 Y4 Y5 Y6
Year of entry	

DEMOGRAPHICS

Country of birth	
Aboriginal Torres Strait Islander	<input type="checkbox"/> Aboriginal Origin <input type="checkbox"/> Torres Strait Islander Origin <input type="checkbox"/> Both Torres Strait and Aboriginal Origin
Country of citizenship	
Visa number (if not Australian citizen)	
Visa expiry date (if applicable)	
Date of arrival in Australia (if applicable)	
Main language spoken at home	

OUR LADY OF MERCY PRIMARY SCHOOL

Other language/s spoken at home	
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RELIGION

Religious denomination	
Parish	
Baptised	Yes / No
Reconciliation	Yes / No
First Holy Communion	Yes / No
Confirmation	Yes / No

CURRENT SCHOOL (IF APPLICABLE)

School	
Location	
Academic level	

SECTION 2: CAREGIVER INFORMATION

This section relates to the student's primary caregivers (e.g. mother and father). You can enter up to two primary caregivers using this form. If you need to provide additional caregivers, please contact the office and we will be happy to add their details to the student record.

CAREGIVER 1

Title	
First name	
Middle name	
Surname	
Gender	

OUR LADY OF MERCY PRIMARY SCHOOL

Relationship to child	
Does the child live with you?	<input type="checkbox"/> Yes - always <input type="checkbox"/> Yes - some of the time <input type="checkbox"/> No - never

CONTACT DETAILS

Email and mobile phone are our preferred methods of contact; please provide both if available.

Email	
Telephone - mobile	
Telephone - home	
Telephone - work	
Number and street	
Suburb	
Postcode	
State	
Other address (e.g. if relocating)	

DEMOGRAPHICS

Country of birth	
Country of citizenship	
Visa number (if not Australian citizen)	
Visa expiry date (if applicable)	

OUR LADY OF MERCY PRIMARY SCHOOL

Date of arrival in Australia (if applicable)	
Main language spoken at home	
Other language/s spoken at home	
Occupation	
Employer	

RELIGION

Religious denomination	
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DATA COLLECTION

All schools are required to collect information to enable nationally comparable reporting of students' outcomes. Results are reported in terms of total numbers of students and no individual, school or system is identifiable in the analysis. The following information, along with the child's gender, country of birth, indigenous status and main home languages, is submitted to the Department of Education. We manage personal information according to CEWA's Statutory Privacy Policy.

Have you been in paid work in the past 12 months (either in full or part of)?	Yes / No
If yes, indicate your occupation group	<input type="checkbox"/> Group 1: Elected officials, senior executives/manager, management in large business organisation, government administration and defence, and qualified professionals <input type="checkbox"/> Group 2: Other business managers/professionals and associate professionals <input type="checkbox"/> Group 3: Tradespeople and advanced/intermediate clerical, office, sales, carer and service staff <input type="checkbox"/> Group 4: Machine operators, sales/office/service/hospitality staff, assistants, labourers and related workers
Highest year of primary or secondary school completed	<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent

OUR LADY OF MERCY PRIMARY SCHOOL

	<input type="checkbox"/> Year 9 or equivalent or below
Level of highest qualification completed	<input type="checkbox"/> Bachelor's 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

SECOND CAREGIVER

Does the student have a second caregiver?

- Yes
- No, I am the sole caregiver

CAREGIVER 2

Title	
First name	
Middle name	
Surname	
Gender	
Relationship to child	
Does the child live with you?	<input type="checkbox"/> Yes - always <input type="checkbox"/> Yes - some of the time <input type="checkbox"/> No - never

CONTACT DETAILS

Email and mobile phone are our preferred methods of contact; please provide both if available.

Email	
Telephone - mobile	
Telephone - home	

OUR LADY OF MERCY PRIMARY SCHOOL

Telephone - work	
Number and street	
Suburb	
Postcode	
State	
Other address (e.g. if relocating)	

DEMOGRAPHICS

Country of birth	
Country of citizenship	
Visa number (if not Australian citizen)	
Visa expiry date (if applicable)	
Date of arrival in Australia (if applicable)	
Main language spoken at home	
Other language/s spoken at home	
Occupation	
Employer	

RELIGION

Religious denomination	
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Highest year of primary or secondary school 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
Level of highest qualification completed	<input type="checkbox"/> Bachelor's 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

SECTION 3: GUARDIANSHIP

Please identify the legal guardian(s) of the student	<input type="checkbox"/> Caregiver 1 <input type="checkbox"/> Caregiver 2 <input type="checkbox"/> Other - please specify:
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OUR LADY OF MERCY PRIMARY SCHOOL

Are there any legally binding parenting or restraining orders, or other conditions we should be aware of? (Please specify).	Yes / No
Caseworker's name	
Office	
Email	
Phone	

SECTION 4: SIBLINGS

This section relates to the student's siblings.

SIBLINGS ATTENDING THIS SCHOOL
Name
Name
Name

Younger siblings not yet at school.

YOUNGER SIBLING	DATE OF BIRTH

SECTION 5: MEDICAL INFORMATION

EMERGENCY CONTACT 1 (OTHER THAN CAREGIVERS)

Name	
Telephone	

OUR LADY OF MERCY PRIMARY SCHOOL

Relationship to child	
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EMERGENCY CONTACT 2 (OTHER THAN CAREGIVERS)

Name	
Telephone	
Relationship to child	

HEALTH PROVIDERS

Family doctor	
Medical clinic	
Telephone	
Medicare card number	
Medicare card expiry date	
Medicare individual reference number for student (number to left of name)	
Do you have ambulance cover?	Yes / No
Private Health Fund and number (if applicable)	

IMMUNISATION

Government regulations require schools to obtain immunisation records at the time of enrolment and keep records. School Health Services has to notified of children who are not immunised.

Only an Australian Immunisation Register (AIR) Immunisation Status Report can be accepted.

Do you have an AIR Immunisation Status Report for the student?	Yes / No
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SECTION 6: OTHER INFORMATION

Any other information you would like to provide.

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SECTION 7: BILLING

SCHOOL FEES

Who will be the Fee Payer and responsible for the paying of school fees?

- Both caregivers
- Caregiver 1 only
- Caregiver 2 only
- Other (provide details below)

Name	
Email	

HEALTH CARE CARD

The Health Care Card Discount Scheme provides fee concession to the holders of eligible means-tested family concession cards.

Do you possess a valid concession card?

- Family Health Care Card
- Pensioner Concession Card

Card number	
Date of expiry	

OUR LADY OF MERCY PRIMARY SCHOOL

- I have not claimed, nor do I intend to claim, Aboriginal Secondary Grants Scheme (ABSTUDY).
- The student is not in receipt of any Bursary/Scholarship more than \$1,000.
- I will notify the school if my concession card status changes and will present a new card when this card expires.

SECTION 8: CONSENT AND AGREEMENT

Consent and agreement are provided for the duration of the student's enrolment. Any changes need to be notified in writing.

MEDICAL EMERGENCY AUTHORISATION

I/we acknowledge that the school will seek medical/dental attention, call an ambulance or hospitalise my child when considered reasonable as part of its duty of care to students.

Yes

USE OF STUDENT IMAGES

As part of the school's communication activities, a student's image may be required for use. The names of children are not published in social media. Only first names are used in the school newsletter. I/We hereby give permission for use of my/our child or children's image in school and Catholic Education WA's website, social media, local media and promotional material.

If I/we decline permission, then I/we understand that their images will be excluded from assemblies, carnivals, discos, excursions, camps, school publications and all other school events.

I/We must inform my/our child or children of my/our decision and direct them to remove themselves from all photos or videos being taken.

Yes

No

CLASS REPRESENTATIVE LIST

I/We give permission for my/our email details to be included in my/our child's class mailing list, managed by the Class Representatives.

Yes

No

OUR LADY OF MERCY PRIMARY SCHOOL

DISCLOSURE

I/We authorise the school to exchange information with the Catholic Education Office of Western Australia and relative agencies and other Catholic Schools if necessary.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I/We agree that the relevant information in the Student Information and Family Information sections can be provided to the Parish Priest for the Sacramental Program.	<input type="checkbox"/> Yes <input type="checkbox"/> No

KINDERGARTEN

I/We confirm our child will not be attending another registered four-year-old Kindergarten.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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CLASSROOM HELPERS AND VISITORS' CONFIDENTIALITY

All children's classroom work, records, results and behaviour are highly confidential and must not be discussed or referred to outside the classroom with another person. I/We confirm an understand of and need for confidentiality when working in the classroom.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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INTERNET USAGE

Children will have access to the Internet within the school guidelines and adequate supervision will always be available whilst using the Internet. If a child encounters any material on the web that may make them feel uncomfortable, they should minimise the screen and inform the teacher. The children will be advised to never give out personal information, including their phone number, last name or home address when using the Internet. I/We give my permission for my child to use the Internet at school as per the permission guidelines.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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HIGH SCHOOL PREFERENCE

Please indicate which secondary high school you would prefer your child to attend.	
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APPLICATION AND ENROLMENT AGREEMENT

This agreement makes reference to the Enrolment Policy, Privacy Policy and School Fees Policy available on our website.

I/We agree to each of the following statements:

1. Submitting an Application for Enrolment does not guarantee an interview nor a place at the school. Conditions for entry are in accordance with the school’s Enrolment Policy.
2. Enrolment in one Catholic school does not guarantee enrolment in any other Catholic school.
3. Students participate in all required parts of the education program, including the Religious Education program.
4. Families abide by the school’s Code of Conduct
5. Families abide by the policies and directives of the school and CEWA as they are enacted from time to time.
6. Where applicable, documentation relating to Parenting or Restraining Orders and Australian residency status are provided.
7. Acceptance of the Enrolment Policy.
8. Acceptance of the Privacy Policy.
9. Acceptance of the School Fees Policy.
10. Information provided for Application and Enrolment is fully and truthfully completed. Enrolment may be refused or terminated if relevant information has knowingly been withheld.

I/We hereby provide consent to this agreement for the duration of my/our child’s enrolment unless I/we withdraw this consent in writing.

Name of Caregiver 1	Signature	Date
Name of Caregiver 2	Signature	Date