RIVERSIDE EDUCATION SUPPORT CENTRE

WA PUBLIC SCHOOL STUDENT ENROLMENT FORM

Please complete the Student Enrolment Form and return it to the school for confirmation of this student’s enrolment. Family details should include details of parents, guardians or carers residing at the same address as the student being enrolled. Any details relating to parents not residing with the student may be included in the Parent/Guardian/Carer details section of this form. Please place X in □ provided.

When you enrol your child at this school, please check that you have the following:

- Birth certificate
- Identity documents (if applicable)
- Immunisation certificate
- Court order (if applicable)
- Proof of address

If your child was not born in Australia, you must provide:

- Evidence of the date of entry into Australia;
- Passport or travel documents; and
- Current visa and previous visas (if applicable).

In addition, if your child is a temporary visa holder you must provide:

- Confirmation of enrolment or evidence of permission to transfer provided by Education and Training International (if holding an International full fee student visa, sub class 571); or
- Evidence of the visitor and temporary resident visa (other than sub class 571 referred to above); or
- Evidence of the visa for which the student has applied (if the student holds a bridging visa).

Information to be provided

Where an item is marked with an asterisk (*) the information must be provided. This information is required by the Western Australian Department of Education and Training to meet legal obligations. All other information is needed to meet the purposes outlined below.

While it is not a legal requirement to provide all of the details requested in the Enrolment Form, the information is sought to enable the Department to:

- Undertake administrative and child/student care responsibilities including maintaining emergency contact information;
- Communicate with you about important matters;
- Provide first aid and plan for student health support requirements;
- Collect necessary statistical information and undertake analysis of the composition and performance of the student population; and
- Meet State and National reporting requirements.

It is compulsory to advise of change of details in relation to student’s name, usual place of residence and/or name and usual place of residence of Parent/Guardian/Carer.

Security and Confidentiality

The information provided in Enrolment Forms is stored securely in local school and Departmental databases. The management of these databases is governed by State and Departmental policies to ensure security, privacy and confidentiality.

Assistance with completing this form

If you require assistance completing this form, including translation services, please contact your school.
RIVERSIDE EDUCATION SUPPORT ENROLMENT CARD

Student Details

<table>
<thead>
<tr>
<th>Year</th>
<th>K</th>
<th>PP</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>Faction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Room</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>For school use only</td>
</tr>
</tbody>
</table>

* Surname: ______________________________

* Legal Surname: ________________________

* 1st Name: ____________________________

* 2nd Name: ____________________________

Preferred Name: ____________________________________________________________

Email Address: ______________________________________________________________

* Date of Birth: ______/_____/_____  Sex:  ☐Male  ☐Female

* Residential Address: _________________________________________________________

___________________________________________________  Postcode: ___________

Phone: _________________________________________________________________

Mobile: _________________________________________________________________

Fax: _________________________________________________________________

Names of brothers and sisters attending this school:

__________________________________________________________________________

_________________________________________________  ______________________

* Is this student in the care of the Child Protection Family Services (CPFS) Chief Executive Officer?  
YES ☐  NO ☐

If YES, please specify the name of the CPFS Case Manager, their CPFS District and their contact phone number:

_________________________________________________________________________

_________________________________________________  ______________________

* Is this student subject to any court orders in respect of their care, welfare and development?  
YES ☐  NO ☐  If YES, please specify and attach supporting documentation.

Parent/Guardian/Carer Details

Child lives with:
Both Parents ☐  Parent/Guardian/Carer 1 ☐  Parent/Guardian/Carer 2 ☐
Neither Parent ☐

Is this student subject to Access Restriction?  
YES ☐  NO ☐

If YES, please attach supporting documentation.

* Emergency Contact

Indicate, by placing a number in the box, the order in which the following people should be contacted in an emergency. Telephone number must be specified for the preferred emergency contact.

Parent/Guardian/Carer 1 ☐  Parent/Guardian/Carer 2 ☐  Other contacts ☐

_________________________________________________  ______________________

_________________________________________________  ______________________
Parent/Guardian/Carer 1 Details

Title:________  * First Name:___________________________  * Surname:___________________________

Please indicate relationship to the student:__________________________________________________________________________________________________

* Postal Address (if different from student residential address):__________________________________________________________________________________

* Phone:________________________________________ Email Address:__________________________________________________________________________

Occupation/Workplace:____________________________________________________________________________________________________________________

* Work Phone:__________________________________ * Mobile No:________________________________________

Do you mainly speak English at home? YES ☐ NO ☐
Do you speak a language other than English at home? (If more than one language, indicate the one that
is spoken most often.) NO, English only ☐ YES, other - please specify: ________________________________
What is the highest year of primary or secondary school you have completed?

Year 12 or equivalent ☐ Bachelor degree or above ☐
Year 11 or equivalent ☐ Advanced diploma/Diploma ☐
Year 10 or equivalent ☐ Certificate I to IV (including trade certificate) ☐
Year 9 or equivalent or below ☐ No non-school qualification ☐
(If you did not attend school, mark ‘Year 9 or equivalent or below’)

What is your occupation group? ☐ (Write 1, 2, 3, 4 or 8) Select the appropriate parental occupation
group from the list provided – see last page. If you are not currently in paid work, but have had a job in the last 12
months, please use your last occupation. If you have not been in paid work in the last 12 months, enter ‘8’ above.

Parent/Guardian/Carer 2 Details

Title:________  * First Name:___________________________  * Surname:___________________________

Please indicate relationship to the student:__________________________________________________________________________________________________

* Postal Address (if different from student residential address):__________________________________________________________________________________

* Phone:________________________________________ Email Address:__________________________________________________________________________

Occupation/Workplace:____________________________________________________________________________________________________________________

* Work Phone:__________________________________ * Mobile No:________________________________________

Do you mainly speak English at home? YES ☐ NO ☐
Do you speak a language other than English at home? (If more than one language, indicate the one that
is spoken most often.) NO, English only ☐ YES, other - please specify: ________________________________
What is the highest year of primary or secondary school you have completed?

Year 12 or equivalent ☐ Bachelor degree or above ☐
Year 11 or equivalent ☐ Advanced diploma/Diploma ☐
Year 10 or equivalent ☐ Certificate I to IV (including trade certificate) ☐
Year 9 or equivalent or below ☐ No non-school qualification ☐
(If you did not attend school, mark ‘Year 9 or equivalent or below’)

What is your occupation group? ☐ (Write 1, 2, 3, 4 or 8) Select the appropriate parental occupation
group from the list provided – see last page. If you are not currently in paid work, but have had a job in the last 12
months, please use your last occupation. If you have not been in paid work in the last 12 months, enter ‘8’ above.
Other Contact(s) Details

Title:_________ First Name:_____________________
Surname:____________________________________

Please indicate relationship to the student:___________________________________________

Postal Address (if different from student residential address):
_______________________________________________________________________________
Phone:________________________________________________________________________

Email Address: ________________________________________________________________

Occupation/Workplace:___________________________________________________________________________

Work Phone: __________________________________________ Mobile No: ______________________

Please advise the school if there are any other contacts you would like recorded.

Student Details - Additional Information

Religion:__________________ Is the student to be withdrawn from religious instruction? YES ☐ NO ☐

Is the student of Aboriginal or Torres Strait Islander origin? NO ☐ YES, Aboriginal ☐ YES, Torres Strait Islander ☐

(For students of both Aboriginal and Torres Strait Islander origin, mark both 'YES' boxes.)

Permission to use child’s image: media ☐ school news ☐ Riverside Education Support Centre website ☐ Department of Education, W.A. ☐

Does the student mainly speak English at home? YES ☐ NO ☐

Does the student speak a language other than English at home? NO, English only ☐ YES, other - please specify: ______________________________________

(If more than one language, indicate the one that is spoken most often.)

Out of school intake area: YES ☐ NO ☐ Health Card: YES ☐ NO ☐

* Citizenship: Australian ☐ Other - please specify: ______________________________________

* Permanent Resident: YES ☐ NO ☐

* Date entered Australia: _____/_____/_____

* Visa Expiry Date: _____/_____/_____ ☐ * Visa Sub-class No. ________

In Receipt of Allowance: Secondary Assistance ☐ Youth Allowance ☐
Assistance for Isolated Children (AIC) ☐ Abstudy ☐

In Birth Certificate seen: YES ☐ NO ☐ Date Sighted: _____/_____/_____

In which country was the student born? Australia ☐ Other - please specify __________________________

* Previous School: ____________________________________________ or

* If previously enrolled in Home Education, specify the Education District: __________________________

Reason for Moving: ___________________________________________________________________________
* Does the student have a disability?  YES ☐  NO ☐  If YES, please specify.

Disability: ____________________________________________________________

* Please indicate where you have documentation about your child’s disability in any of the following areas. Copies of this documentation will be required for school records.

☐ Autism Spectrum Disorder  ☐ Severe Mental Disorder
☐ Deaf or Hard of Hearing   ☐ Global Developmental Delay (prior to age 6)
☐ Specific Speech Language Impairment  ☐ Vision Impairment
☐ Intellectual Disability  ☐ Physical Disability

Student Details – Medical / Health

Does the student have a medical condition or intensive health care need?  YES ☐  NO ☐
If YES, please specify.

☐ Allergy – Anaphylaxis  ☐ Hearing condition (e.g. otitis media)
☐ Allergy – Other _________________________  ☐ Mental health or behavioural (e.g. depression, ADD/ADHD)
☐ Asthma  ☐ Intensive Health Care Need (e.g. tube feeding)
☐ Diabetes  ☐ Other _________________________
☐ Diagnosed migraine/headaches  ☐ Seizure Disorder (e.g. epilepsy) _________________________

If the student has a medical condition or intensive health care need you will also need to complete a separate Health Care Authorisation.

Medical Practice (Name and Address): ____________________________________________

Doctor’s Name: ___________________________ Phone: ____________________________

Do you have ambulance cover?  YES ☐  NO ☐ (If there is a medical emergency parents or guardians are expected to meet the cost of the ambulance)

Immunisation Details

<table>
<thead>
<tr>
<th>Measles Vaccination</th>
<th>Diphtheria, Tetanus And Pertussis Vac</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence Provided</td>
<td>Date Checked: <strong>/</strong>/__</td>
</tr>
<tr>
<td>MMR (1st dose at 12 months) Date</td>
<td>DTPa (Immunisation completed at school entry): __</td>
</tr>
<tr>
<td>MMR (2nd dose at 4 years) Date</td>
<td>DTPa (Year 7): __</td>
</tr>
<tr>
<td>Measles Exclusion (tick if not immunised)</td>
<td>Date of last Tetanus vaccination: <strong>/</strong>/__</td>
</tr>
</tbody>
</table>

Name of person enrolling student: ____________________________________________  (Please tick: parent ☐ or guardian ☐)

Signature: ___________________________ Date: __/__/__

Office Use Only:

Entry Date: _____/_____/____  Date Transfer Note Sent: _____/_____/____

Previous School: ___________________________ Records Received: Y / N

Publications/Internet Permission Form Completed:  YES ☐  NO ☐

Immunisation records provided:  YES ☐  NO ☐

Year: _______ Room: _______ House/Faction: ______________

Entered on School Information System by: ___________________________ Date: __/__/__

Leave Date: _______________ Destination: ___________________________ Records Sent: Y / N
**PARENTAL OCCUPATION GROUPS**

(Relates to questions in Parent/Guardian/Carer 1 and Parent/Guardian/Carer 2 Sections)

<table>
<thead>
<tr>
<th>GROUP 1</th>
<th>GROUP 2</th>
<th>GROUP 3</th>
<th>GROUP 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior management in large business organisation, government administration &amp; defence, and qualified professionals</td>
<td>Other business managers, arts/media/sportspersons and associate professionals</td>
<td>Tradesmen/women, clerks and skilled office, sales and service staff</td>
<td>Machine operators, hospitality staff, assistants, labourers and related workers</td>
</tr>
<tr>
<td>Senior executive/manager/department head in industry, commerce, media or other large organisation</td>
<td>Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business.</td>
<td>Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.</td>
<td></td>
</tr>
<tr>
<td>Public service manager (section head or above), regional director, health/education/police/fire services administrator</td>
<td>Specialist manager [finance/engineering/productivity/personnel/industrial relations/sales/marketing]</td>
<td>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]</td>
<td></td>
</tr>
<tr>
<td>Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]</td>
<td>Financial services manager [bank branch manager, finance/insurance/broker, credit/loans officer]</td>
<td>Skilled office, sales and service staff Office [secretary, personal assistant, desktop publishing operator, switchboard operator]</td>
<td></td>
</tr>
<tr>
<td>Defence Forces Commissioned Officer</td>
<td>Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]</td>
<td>Sales [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]</td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official]</td>
<td>Service [aged/disabled/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]</td>
<td></td>
</tr>
<tr>
<td>Health, Education, Law, Social Welfare, Engineering, Science, Computing professional. Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]</td>
<td>Associate professionals generally have diploma/technical qualifications and support managers and professionals</td>
<td>Assistant/aide [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]</td>
<td></td>
</tr>
<tr>
<td>Air/sea transport [aircraft/ships captain/officer/pilot, flight officer, flying instructor, air traffic controller]</td>
<td>Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]</td>
<td>Labourers and related workers Defence Forces ranks below senior NCO not included in other groups</td>
<td></td>
</tr>
<tr>
<td>Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]</td>
<td>Defence Forces senior Non-Commissioned Officer.</td>
<td>Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]</td>
<td></td>
</tr>
</tbody>
</table>

These categories have been determined nationally and are designed as broad occupational groupings. All Australian states and territories use the same categories.