ST. SCHOLASTICA'S COLLEGE

ABN 20 003 866 859

Day and Boarding College
4 Avenue Road, Glebe NSW 2037
Day School: 9660 2622
Boarding School: 9660 0342
Facsimile: 9660 7939
www.scholastica.nsw.edu.au

STUDENT ENROLMENT FORM

STUDENT DETAILS

FAMILY NAME: _____ GIVEN NAMES: _____

PREFERRED FIRST NAME: _____

PROPOSED YEAR OF ENTRY: _____ FOR YEAR LEVEL: _____

DAY STUDENT ☐ BOARDER ☐

DATE OF BIRTH: _____ COUNTRY OF BIRTH: _____ CITY: _____

NATIONALITY: _____ CULTURE: _____

STUDENT RELIGION: _____ BAPTISED: ☐ CONFIRMED ☐

LANGUAGES SPOKEN AT HOME

Does the student speak a language other than English at home? No ☐ English Yes ☐ Other _____ (Please specify)

Main Language spoken at home: _____

Is the student Aboriginal or Torres Strait Islander origin? No ☐ Yes ☐ Torres Strait Islander

Yes ☐ Aboriginal Yes ☐ both Aboriginal & Torres Strait Islander

CHILDREN IN THE FAMILY (include student being enrolled)

	M / F	Date of Birth	Name	School Attending
1				
2				
3				
4				
5				
6				

HISTORICAL INFORMATION - Sisters previously at St. Scholastica's College

	Name	Year
1		
2		

If Mother was a previous student, please provide maiden name: _____

Years of attendance: _____

Any other St. Scholastica's association: _____

PREVIOUS SCHOOLS ATTENDED

Name of School	Years Attended	Location of School

Please provide the name and details of any school where the student has previously been enrolled (NSW interstate or overseas) starting with the most recent. If more space is required please attach a page to the back of this enrolment form and mark as "Previous schools attended".

STUDENT 'S HOME ADDRESS

NAME FOR CORRESPONDENCE:
eg. Mr. & Mrs. Smith

RESIDENTIAL ADDRESS:

Postcode:

RMB/P.O. BOX

Postcode:

HOME PHONE: STUDENT MOBILE:

STUDENT 'S MEDICAL DETAILS

Doctor's Name:

Address:

Suburb: Postcode:

ALLERGIES:
Please specify any Allergies suffered by the student

MEDICAL CONDITIONS:
Please specify any Medical Conditions the school should be aware of including any daily medication to be taken by the student.

PARENT / GUARDIAN 1 (Residing at the same address as the student)

TITLE Mr ☐ Mrs ☐ Ms ☐ Other

FAMILY NAME:

GIVEN NAMES: RELIGION:

WORK TELEPHONE NO: MOBILE TELEPHONE NO:

EMAIL ADDRESS:

Does this parent speak a language other than English at home No ☐ English Yes ☐ Other
(Please specify)

EMPLOYMENT DETAILS

Employed ☐ Unemployed ☐

OCCUPATION:

What is the Occupation Group of the Student's Parent/Guardian 1.
(write 1,2,3, 4, or 8) (See Parental Occupation Groups):

Please select the appropriate parental occupation group from the list provided on the last page. If the person is not currently in paid work but has had a job or retired in the last 12 months, please use the person's last occupation. If the person has not been in paid work in the last 12 months, please write "8" in the box above.

PARENTAL SCHOOL EDUCATION
What is the highest year of primary or secondary school the Student's Parent/Guardian 1 has completed.

Year 12 or equivalent ☐ Year 10 or equivalent ☐

Year 11 or equivalent ☐ Year 9 or equivalent ☐

PARENTAL POST-SCHOOL EDUCATION
What is the level of the highest qualification the Student's Parent/Guardian 1 has completed.

Bachelor Degree or above ☐ Certificate 1 to 1V (including Trade Certificate) ☐

Advanced Diploma/Diploma ☐ No non-school qualification ☐

PARENT / GUARDIAN 2 (Residing at the same address as the student)

TITLE Mr ☐ Mrs ☐ Ms ☐ Other

FAMILY NAME:

GIVEN NAMES: RELIGION:

WORK TELEPHONE NO: MOBILE TELEPHONE NO:

EMAIL ADDRESS:

Does this parent speak a language other than English at home No ☐ English Yes ☐ Other
(Please specify)

EMPLOYMENT DETAILS

Employed ☐ Unemployed ☐

OCCUPATION:

What is the Occupation Group of the Student's Parent/Guardian 2.
(write 1,2,3, 4, or 8) (See Parental Occupation Groups):

Please select the appropriate parental occupation group from the list provided on the last page. If the person is not currently in paid work but has had a job or retired in the last 12 months, please use the person's last occupation. If the person has not been in paid work in the last 12 months, please write “8” in the box above.

PARENTAL SCHOOL EDUCATION
What is the highest year of primary or secondary school the Student's Parent/Guardian 2 has completed.

Year 12 or equivalent ☐ Year 10 or equivalent ☐

Year 11 or equivalent ☐ Year 9 or equivalent ☐

PARENTAL POST-SCHOOL EDUCATION
What is the level of the highest qualification the Student's Parent/Guardian 2 has completed.

Bachelor Degree or above ☐ Certificate 1 to 1V (including Trade Certificate) ☐

Advanced Diploma/Diploma ☐ No non-school qualification ☐

PARENT / GUARDIAN 3 (NOT Residing at the same address as the student)

TITLE Mr ☐ Mrs ☐ Ms ☐ Other

FAMILY NAME: GIVEN NAMES:

ADDRESS:

HOME TELEPHONE NO: MOBILE TELEPHONE NO:

WORK TELEPHONE NO: RELATIONSHIP TO STUDENT:

EMAIL ADDRESS:

Does this parent speak a language other than English at home No ☐ English Yes ☐ Other
(Please specify)

EMPLOYMENT DETAILS

Employed ☐ Unemployed ☐

OCCUPATION: _____

What is the Occupation Group of the Student's Parent/Guardian 3. (write 1,2,3, 4, or 8) (See Parental Occupation Groups): _____

Please select the appropriate parental occupation group from the list provided on the last page. If the person is not currently in paid work but has had a job or retired in the last 12 months, please use the person's last occupation. If the person has not been in paid work in the last 12 months, please write "8" in the box above.

PARENTAL SCHOOL EDUCATION
What is the highest year of primary or secondary school the Student's Parent/Guardian 3 has completed.

Year 12 or equivalent ☐ Year 10 or equivalent ☐

Year 11 or equivalent ☐ Year 9 or equivalent ☐

PARENTAL POST-SCHOOL EDUCATION
What is the level of the highest qualification the Student's Parent/Guardian 3 has completed.

Bachelor Degree or above ☐ Certificate 1 to 1V (including Trade Certificate) ☐

Advanced Diploma/Diploma ☐ No non-school qualification ☐

EMERGENCY CONTACT

Please nominate a person who may be contacted in the event of an emergency if parent cannot be contacted.
Ideally the contact person should be someone who lives in the neighbourhood of the school.

Emergency Contact Name: _____

Home Telephone Number: _____

Work Telephone Number: _____

Mobile Telephone Number: _____

Relationship to student: (Grandparent, uncle/aunt/neighbour) _____

ALTERNATIVE EMERGENCY CONTACT

Emergency Contact Name: _____

Home Telephone Number: _____

Work Telephone Number: _____

Mobile Telephone Number: _____

Relationship to student: (Grandparent, uncle/aunt/neighbour) _____

CONDITIONS OF ENROLMENT & AGREEMENT

Please read through these conditions carefully and sign in the appropriate place.

OFFER PLACE - An offer of placement in the College is secured upon payment of the Advance Fee. This amount will be deducted from Semester 1 fees.

RELIGIOUS EDUCATION - Accepting a place at St. Scholastica's College implies both parents'/guardians' acceptance of the Catholic foundations. Studies of Religion is a compulsory subject for all students.

FEES - Fees are billed each Semester in February and July. Fees may be paid in instalments. A schedule will be posted to you with your fees. The College does not issue split bills to parents/ guardians. **Enrolling parents/guardians are jointly responsible for the payment of tuition fees and other charges**.

ILLEGAL SUBSTANCES - Possession or use of drugs (including alcohol) will result in immediate suspension and review of enrolment. Students who supply drugs may face immediate expulsion.

COMMUNICATION - The College publishes a newsletter "Schols News" fortnightly which is emailed to parents. It is also available on our website.

MEDICAL - In the event of illness to the student necessitating hospital or medical treatment including injection, blood transfusions and the like and where the parent or guardian cannot be contacted to authorise such treatment, a responsible member of St. Scholastica's College staff is automatically empowered to give the necessary authority for such treatment without the College incurring any legal liability whatsoever. Parents and guardians are responsible for all associated costs.

ATTENDANCE - Students are expected to be in attendance at the College for the duration of each school term. Only in special circumstances will permission be given for a student to return late or leave early for term vacations, or be absent during term. In the case of illness a written explanation from the parent/guardian is required for every absence on the next day of attendance at the College. A Doctor's Certificate is required if assessment tasks are missed due to illness in Years 10-12.

It is the responsibility of parents/guardians to inform the College as soon as known, of any changes of address, phone or other information (e.g.: health/medication).

Please check that you have included photocopies of the following:

- **Birth Certificate**
- **Latest school reports**
- **Years 3/5 NAPLAN Reports (**if enrolling in Year 7) or Year 9 NAPLAN (if enrolling in higher years).
- **Application Fee of $220.00.** This application will not be processed until the fee is paid. THIS FEE IS NOT REFUNDABLE.

I UNDERSTAND THAT THE SIGNING OF THIS ENROLMENT FORM CARRIES WITH IT MY SUPPORT OF THE AIMS AND VALUES OF THE COLLEGE, MY LIABILITY TO PAY SCHOOL FEES AND THE RESPONSIBILITY THAT THE INFORMATION ABOVE AND THE CONSENT FORM IS COMPLETE AND ACCURATE.

Signature of Parent/Guardian 1 _____ date: _____

Signature of Parent/Guardian 2 And/Or _____ date: _____

Signature of Parent/Guardian 3 _____ date: _____

STUDENT CONTRACT

I understand that St. Scholastica's College will set high standards for me and will expect me to treat all members of the College community with respect, courtesy and consideration. I agree to co-operate with my teachers and to abide by the Student Code of Conduct, College Uniform Policy and associated policies as set out in the College diary.

Student's Signature: _____ **Date:** _____

PARENT/GUARDIAN AUTHORITY AND CONSENT FORM

I, _____

Home Address: _____

Parent/Guardian of _____ hereby

1. Consent to my child participating in all activities organised by the school including any form of public or private transport as is necessary.
2. Consent to the school seeking medical or dental advice on behalf of my child in the event of an accident or illness.
3. Consent to treatment deemed necessary in the opinion of medical or dental practitioners including the administration of anaesthetic, blood transfusion or the performance of any surgical operation.
4. Certify that the consent which I have given above is valid at all times while my child is in the custody of the school including school camps, work experience, excursions or functions.
5. Certify that my child does not to my knowledge suffer from any illness or disability which might interfere with or inhibit any medical or dental treatment.
6. Consent to the school using photographs of my child in print or electronic publicity material ☐ Yes ☐ No
7. Advise that my child suffers from the following illnesses or disabilities and/or takes medication which might interfere with any medical or dental treatment.

_____

_____

_____

Parent/ Guardian Signature: _____ **Date:** _____

LIST OF PARENTAL OCCUPATION GROUPS

Group 1: 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** [air/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller]

Group 2: 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, proof reader, 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 3: Tradesmen/women, clerks and skilled office, sales and service staff

Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women 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 services 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/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]

Group 4: 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, kitchenhand, 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, nursery assistant, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]
- **Other worker** [labourer, factory hand, storeperson, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]