

Form 4: Application for Enrolment



St Patrick's Pyramid Hill Application for Enrolment

This is a School which operates with the consent of the Bishop of the Catholic Diocese of Sandhurst and is owned, operated and governed by Catholic Education Sandhurst (CES) Limited, where formation and education are based on the principles of Catholic doctrine, and where the teachers are outstanding in true doctrine and uprightness of life. This application form is part of the CES Limited's Enrolment Framework which is available at https://www.sppyramidhill.catholic.edu.au.

	Date received: Select date		Yes	rtificate att	No	
Office use only	Enrolment date: Select date		Student/family code:			
	Start date: Select date			VSN:		
	Immunisation history statement attached: Yes No			Visa information attached (if relevant): Yes No		
DETAILS OF CHILD						
Surname:				Entry year (YYYY):		Entry level/grade:
First name/s:						
Preferred first name:						
Date of birth:	Religion: (include rite)					
Male:	Female:			Other:		
Proposed Commence	ement Date of E	nrolment:				
HOME ADDRESS OF (CHILD					
Street number and n	ame:					
Suburb: Pos			Postco	code:		
Home phone:						
PREVIOUS SCHOOL/	PRESCHOOL PER	RMISSION				

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Name and address of previous school/preschool:						
SACRAMENTAL INFO	DRMATION					
Baptism:	Date:			Parish:		
Confirmation:	Date:					
			Parish:			
Reconciliation:	Date:		Parish:			
Communion:	Date:	Date:		Parish:		
Current parish:						
NATIONALITY		ı		I		
Government Require	ement	Nationality:		Ethnicity:		
In which country was	s the student born?	Australia 🗌		Other – please specify:		
I .	original or Torres Strait Aboriginal and Torres	_	rigin, tick 'Yes' f	for both.)		
No 🗌		Yes, Aboriginal		Yes, Torres	Strait Islander	
IF NOT BORN IN AUSTRALIA, CITIZENSHIP STATUS*						
Please tick the relevant category below and record the visa subclass number as per government requirements: (original documents to be sighted and copies to be retained by the school)						
Australian citizen no			1:6:			
Australian citizen (Australian passport or naturalisation certificate number/document for travel if country of birth is not Australia)						
Australian passport number:						
Naturalisation certificate number:						
Visa subclass recorded on entry to Australia:						
Date of arrival in Australia:						
Not currently an Australian citizen, please provide further details as appropriate below:						
Permanent resident: (if ticked, record the visa subclass number)						
Temporary resident: (if ticked, record the visa subclass number)						
Other/visitor/overseas student: (if ticked, record the visa subclass number)						
* Please attach visa/ImmiCard/letter of notification and passport photo page.						
IMMUNISATION (please attach an immunisation history statement for your child)						

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All vaccines are recorded on the Australian Immunisation Register (AIR). You are required to obtain an immunisation history statement for your child (visit myGov) and provide it to the school with this enrolment form.			Immunisation history statement attached: Yes No No If no, please provide explanation:			
If the student ente		a humanitarian visa, heck?	Yes 🗌	No 🗌		
,						
SIBLINGS ATTEND	ING A SCHOOL/F	PRESCHOOL				
			ol (oldest to you	ingest) – include applicant:		
Name		School/preschool		Year/grade	Date of birth	
Collection Notice an	nd Privacy Policy	ll be held, used and discl available on its website		ance with the school's Privac eb address].	су	
PARENT A/GUARE	DIAN 1					
Surname:		Title: (e.g. Mr/Mrs/Ms	5)	First name:		
Address:						
Home phone:		Work phon	e:	Mobile:		
	or emergency an	d reminder purposes)		Yes	No 🔛	
Email:						
PARENT B/GUARD	DIAN 2					
Surname:	JAN 2	Title: (e.g.		First name:		
		Mr/Mrs/Ms	5)			
Address:		147=II		N/-L:1		
Home phone:	or opporant ==	Work phon	e:	Mobile:	No \square	
	or emergency an	d reminder purposes)		Yes	No	
Email:						

FAMILY DETAILS						
Should the Application be accepted and enrolment is completed, who will be responsible for payment of the school fees and levies?						
Surname	First name	Address and email	Phone	Relationship to the student		

By signing below, the applicant/s acknowledge/s:

- this is a request for the named child to be considered for enrolment in the school according to the school's Enrolment Policy, and that the school's receipt of this application does not mean the school has enrolled this child.
- the school will consider this request and endeavour to communicate the outcome of this consideration by Friday, 17 September 2021.
- That any initial offer will be provisional, with the applicants to then be required to provide additional information according to government and other requirements, and to agree to the Terms and Conditions of Enrolment.

PARENT/CARER/GUARDIAN	Date:
SIGNATURE:	Date.
PARENT/CARER/GUARDIAN	Date
SIGNATURE:	Date:

Note: The Victorian Government provides the following guidance regarding admission requirements:

Consent can be provided through the signature of:

- student, if they are over 15 and living independently
- parent as defined in the Family Law Act 1975

Note: In the absence of a current court order, each parent of a child who is not 18 has equal parental responsibility.

- both parents for parents who are separated, or a copy of the court order with any impact on the relationship between the family and the school
- an informal carer, with a statutory declaration.

Carers:

- may be a relative or other carer
- have day-to-day care of the student with the student regularly living with them
- may provide any other consent required e.g. excursions.

Notes for an informal carer:

- statutory declarations apply for 12 months
- the wishes of a parent prevail in the event of a dispute between a parent legally responsible for a student and an informal carer.

Note: Secondary students may complete parts of the form and co-sign.