

2018
Years 1 - 6



Attadale
Primary School

Foundations for life

Attadale Primary School
Wichmann Road Attadale WA 6156
Phone: 9330 3422 Fax: 9330 7486

OFFICE USE ONLY

Date received: _____
 Birth certificate sighted: YES NO
 Visa sighted YES NO
 Family Court Order sighted YES NO
 Application: accepted / not accepted

APPLICATION FOR ENROLMENT (CONFIDENTIAL)

1. PERSONAL DETAILS (PLEASE PRINT ALL DETAILS BELOW)

Child's surname	Given names	Date of birth	Sex (M/F)
Surname of parent/guardian	Given names	Mr/Mrs/Ms	
Residential Address (must be completed)		Postcode	
Nearest intersecting street			
Postal Address (if different from residential address)		Postcode	
Telephone – Home	Mobile:	Email:	
Are there any Family Court Orders regarding the day to day or long term care, welfare and development of the child? Please indicate (√) YES <input type="checkbox"/> NO <input type="checkbox"/>			
If applicable, year level child currently enrolled in (e.g. Year 7)			
If applicable, name of school at which the child is currently or was last enrolled:			
Are you applying to enrol in a specialist program at this school?		Please indicate (√) YES <input type="checkbox"/> NO <input type="checkbox"/>	
Name of specialist program:			
Are there any siblings currently attending this school?		Please indicate (√) YES <input type="checkbox"/> NO <input type="checkbox"/>	
Names and year levels:			
** Is your child currently under suspension from a school?		Please indicate (√) YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>	
If yes, name of school:			
** Has your child ever been excluded from a school?		Please indicate (√) YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>	
If yes, name of school:			

2. PERMANENT RESIDENT OF AUSTRALIA?

Please indicate (√) YES NO

If no, please indicate date entered Australia: _____ VISA SUB CLASS No: _____

3. DISABILITY/MEDICAL CONDITION?

This information will assist the school principal with considering whether any specific or additional resources are required and available to assist the school with providing the best educational program for your child. Please indicate (√)

Physical	Intellectual	Other	Medical Condition
YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

Please outline nature of disability/medical condition:

IMPORTANT – Please see over page for Declaration and Signature

** These questions are unlikely to apply to kindergarten and pre primary children

APPLICATION FOR ENROLMENT FORM FOR ENROLMENT IN A WESTERN AUSTRALIAN PUBLIC SCHOOL

Students in the compulsory years of schooling who are already enrolled at the school do not need to lodge a new application for that school each year.

DECLARATION

The information and statements provided in this application for enrolment are true and accurate in relation to:

Name of child: _____

Name of person enrolling child: _____

Relationship to child: _____

(Independent Minors and those aged 18 years or older may apply on their own behalf)

Signature: _____

Date: ____/____/____

NOTE: In the event that statements made in this application later prove to be false or misleading, a decision on this application may be reversed. Information supplied may need to be checked by the school.

DOCUMENTS TO BE PROVIDED

Please place **X** in to indicate each document is attached to this application form.

1. Birth Certificate or extract or other identity documents if applicable
2. 'Immunisation Certificate'
3. Copies of Family Court or any other court orders (if applicable)
4. Proof of address (see **Requested documentation** in the attached Parent information)
5. Information relating to suspensions or exclusions
6. Information relating to disability

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

1. Date of entry into Australia
2. Passport or travel documents
3. Current visa subclass and previous visa subclass (if applicable)

If your child is a temporary visa holder, you must also provide:

- Confirmation of enrolment or evidence of any permission to transfer provided by Education and Training International (ETI) at study.eti@dtwd.wa.gov.au.
(if holding an International full fee student visa, sub class 571); or
- Evidence of the visa for which the student has applied if the student holds a bridging visa.