



**CHRIST THE KING
Catholic Primary School**

54 THOMPSON STREET

DECEPTION BAY 4508

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Confidential

APPLICATION FOR ENROLMENT

For

NAME: _____

YEAR LEVEL: _____ **20**_____

OFFICE USE ONLY		Interviewed by _____	
Date of Application _____		Date _____	
Commencement Date _____		Approved by _____	
Family Key _____		Date _____	
Application Fee Receipt No _____		Enrolment No. _____	
Birth Certificate	YES/NO	Special Circumstances	YES/NO
Baptism Certificate	YES/NO	Parish Member	YES/NO

PRIVACY STATEMENT

Information we collect

Our school collects and records personal information, including sensitive information about students and parents or guardians, before and during the course of a student's enrolment at our school. Laws governing or relating to the operation of schools require that certain information is collected. These may include Public Health and Child Protection laws. We may ask you to provide medical reports about students from time to time. Health information about students is sensitive information within the terms of the National Privacy Principles under the *Privacy Act* (1988).

Purpose of collection

The primary purpose of collecting and recording this information is to enable the provision of quality Catholic education. In addition, some of the information we collect and record is to satisfy the school's legal obligations, particularly to enable the school to discharge its duty of care to students and parents/guardians. This information may also be used for appropriate parish purposes.

Disclosure of information

This information may be disclosed by us for administrative and educational purposes to others including, but not limited to, personnel within Brisbane Catholic Education Centre, other systemic schools, medical practitioners, people providing services to schools, such as specialist visiting teachers and consultants.

Personal information collected from students is regularly disclosed to their parents or guardians. On occasions, information such as academic and sporting achievements, student activities, and other news may be published in newsletters, magazines, and on our website. Parents may seek access to personal information collected about them and their son/daughter by contacting the school.

Students may also seek access to personal information about them. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the school's duty of care to the student, or where students have provided information in confidence.

The school from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the school's fundraising activities solely for that purpose. We will not disclose your personal information to third parties for their own marketing purposes without your consent.

We may include your contact details in a class list and school directory.

If you provide the school with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the school and why. They should also be informed that they can access that information if they wish and that the school does not usually disclose the information to third parties.

Our privacy position

Brisbane Catholic Education is bound by the *Privacy Act* (1988), and has adopted the ten (10) National Privacy Principles. A privacy statement detailing Brisbane Catholic Education's practices and procedures for the use and management of the personal, sensitive and health information it collects and records can be accessed on our website www.christthekingdbay.qld.edu.au or the Brisbane Catholic Education website – www.bne.catholic.edu.au. Alternatively a hard copy of the statement may be provided on request.

Information required

If we do not obtain the personal, sensitive or health information referred to above, we may not be able to enrol or continue to enrol your son/daughter.

By completing and submitting this application for enrolment form you have confirmed your understanding of and agreement with the above.

APPLICATION FOR ENROLMENT

FAMILY DETAILS

	PARENT/ GUARDIAN (a) Residing with Child	PARENT/ GUARDIAN (b) Residing with Child <i>Indicate if same as (a)</i>	PARENT Not Residing with Child
Title (eg Mr/Mrs)			
Surname			
Other Name/s			
Preferred Name			
Relationship to Child			
Home Address			
Date moved to address			
Address for Correspondence			Is Correspondence Required? <input type="checkbox"/>
Home Phone No.			
Mobile Phone			
Fax No.			
Daytime Contact No (+ Extension)			
Email Address			
Religion			
Parish			
Work Place			
Occupation Group <i>(Please select the appropriate parental occupation group from Appendix 1)</i>			
Occupation			
School Education Information <i>(Mark one box only)</i>	<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 <i>(includes never attended)</i>	<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 <i>(includes never attended)</i>	<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 <i>(includes never attended)</i>
Highest Qualification Completed <i>(Mark one box only)</i>	<input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV <i>(including trade certificate)</i> <input type="checkbox"/> No qualification beyond school	<input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV <i>(including trade certificate)</i> <input type="checkbox"/> No qualification beyond school	<input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV <i>(including trade certificate)</i> <input type="checkbox"/> No qualification beyond school
Birth Country			
Country of Citizenship			
Aboriginal heritage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Torres Strait Islander heritage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Main Language Spoken at Home (eg, Italian, Kriol, Vietnamese, French, Aboriginal English)	<i>Is this an Aboriginal language?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Torres Strait Islander Language?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Is this an Aboriginal language?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Torres Strait Islander Language?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Is this an Aboriginal language?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Torres Strait Islander Language?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
Other Language/s Spoken at Home <i>(eg Vietnamese)</i>			
English Speaking? <i>(Yes/No)</i> - If No, need Interpreter? <i>(Yes/No)</i>			

STUDENT DETAILS

Surname			
Other Name/s		Preferred Name	
Date of Birth <i>(Documentary evidence required)</i>		Gender	
This child's position in the family - Sibling Order <i>(eg eldest of 3)</i>			
Religion: (Please tick one only)		Parish	
Roman Catholic	<input type="checkbox"/>	Birth Country	
Anglican	<input type="checkbox"/>	Country of Citizenship	
Uniting	<input type="checkbox"/>	*If birth country not Australia please indicate: <ul style="list-style-type: none"> • Arrival date in Australia: • Type of Resident: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary • Overseas Student: <input type="checkbox"/> Yes <input type="checkbox"/> No • Visa Subclass number: 	
Lutheran	<input type="checkbox"/>		
Apostolic	<input type="checkbox"/>		
Presbyterian	<input type="checkbox"/>		
Church of Christ	<input type="checkbox"/>		
Methodist	<input type="checkbox"/>		
Baptist	<input type="checkbox"/>	Aboriginal Heritage: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Greek Orthodox	<input type="checkbox"/>	Torres Strait Islander Heritage: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Russian Orthodox	<input type="checkbox"/>		
Other Christian	<input type="checkbox"/>	Main Language Spoken at Home:	
Islamic	<input type="checkbox"/>	<i>Is this an Aboriginal or Torres Strait Islander Language?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Hindu	<input type="checkbox"/>		
Buddhist	<input type="checkbox"/>		
Aboriginal Traditional	<input type="checkbox"/>	First Language Spoken:	
Jewish	<input type="checkbox"/>		
Other Non-Christian	<input type="checkbox"/>	Other Language Spoken:	
No Religion	<input type="checkbox"/>		
Not Known	<input type="checkbox"/>		

PREVIOUS SCHOOL/S

Year	Class	Date from	Date to	School	Place

TRANSPORT

	Transport Type	Distance
To School		Home to school
From School		Home to nearest State school
Qld Transport Conveyance Allowance Code	A B C D E	Home to nearest Catholic school

SACRAMENTS

<i>(Documentary evidence required)</i>	Date	Church	Place
Baptism			
Penance			
Confirmation			
Eucharist			

IMMUNIZATIONS

Type of Immunization <i>(documentary evidence required)</i>	Date/s

SIBLINGS (Other Family Members)

Name	School/Work	Gender	Birthdate	Year completes/completed school

SPECIALIST ASSESSMENTS

	Yes/No	Name of Centre	Date of First Visit	Is your child attending now?
Audiology Clinic				
Child Guidance				
Occupational Therapist				
Psychiatrist				
Specialist Clinic				
Speech Pathologist				
State Guidance				
Other:				

MEDICAL HISTORY

	Yes/No	Details of medication/treatment
Pre/Postnatal Concerns		
Birth Concerns		
Vision Concerns		
Hearing Concerns		
Head Injury		
Convulsions		
Allergies		
Asthma		
Other: <i>(Please specify)</i>		

List any medication which your child is taking regularly

List any medical alerts, diseases, surgery or disorders, or recurring illnesses

OTHER INFORMATION

Indicate any other physical, social/emotional, or intellectual conditions which may affect learning, school activities or which may require additional or emergency attention at school.

Indicate legal or educational matters of which the school should be aware (*eg. custody orders/parental agreements, repeating a year level, etc.*)

Indicate any other information which may assist with this enrolment application.

I/We have fully and accurately disclosed any information required by the school for its consideration in determining the enrolment of my child.

Date: _____ Parent/Guardian Signature: _____

Date: _____ Parent/Guardian Signature: _____

EMERGENCY INFORMATION

	Emergency Contact 1	Emergency Contact 2
Name		
Telephone No		
Relationship		
	Student's Doctor	Student's Dentist
Name		
Address		
Telephone		

Emergency Hospital: _____ **Telephone No:** _____

ACCOUNTING DETAILS *(Please indicate the method by which accounts will be paid)*

<input type="checkbox"/> Direct Deposit	<i>(An information sheet giving the relevant school details will be forward</i>
<input type="checkbox"/> Credit Card	<i>you for completion)</i>
<input type="checkbox"/> Mail:	
<i>Billing address:</i>	<i>Name:</i> _____
	<i>Address:</i> _____

PARENT/GUARDIANS COMMITMENT

1. In enrolling my child/children at Christ the King School I/We agree to fully support the policies of the school.
2. I/We understand that Christ the King School is an Independent Catholic School and only partly subsidised by the State and Federal Government so it is necessary to charge SCHOOL FEES and LEVIES. Accounts for the amount due are sent out each month and should be paid by the due date. I agree to meet these accounts, on the understanding that should I experience difficulty in paying the fees, I can request a total or partial remission by approaching the Principal privately.
3. //We have fully and accurately disclosed any information required by the school for its consideration in determining the enrolment of my child.

Date: _____ Parent/Guardian Signature: _____

Date: _____ Parent/Guardian Signature: _____

APPENDIX 1 – 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 [aircraft/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 service 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/refugee/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, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]
Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]

If the person is not currently working

If the person is not currently in **paid** work but has had a job in the last 12 months or has 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, enter '8' in the box.