



St Matthew's School

9 Glyde Street
(PO Box 456)
Narrogin, WA. 6312

Ph (08) 98539500
Email: admin@matthews.wa.edu.au
Website: www.matthews.wa.edu.au

APPLICATION FOR ENROLMENT

STUDENT INFORMATION

Student Surname: _____ Preferred Name: _____
 First Name: _____
 Address: _____ State: _____ Postcode: _____

 Birth certificate attached: Yes/No
 Date of Birth: _____ Birthplace: _____ Aboriginal/Torres Strait Islander: Yes/No
 If yes, then Group of Origin: _____
 Nationality: _____ Australian Permanent Resident: Yes/No
 Born outside Australia: _____ Number of Years in Australia: _____
 Date of arrival in Australia: _____ Visa Category Number: _____
 Country of Citizenship: _____ Language Spoken at Home: _____

Religious Denomination _____ Parish Priest: _____
 Parish: _____ Suburb: _____
 Date of Reception of Sacraments: _____ Baptism Certificate Attached Yes/No
 Baptism _____ Reconciliation _____ First Communion _____ Confirmation _____

Present School: *(if applicable)* _____ Location: _____ Year Level: _____

FAMILY INFORMATION

FEMALE PARENT OR GUARDIAN

Title: _____ Surname: _____ First Name: _____
 Address: _____ State: _____ Postcode: _____
 _____ Parish Priest: _____
 Religious Denomination: _____ Suburb: _____
 Parish: _____
 Occupation: _____ Country of Citizenship: _____
 Contact Address: _____
 Contact Numbers: _____ Email: _____

MALE PARENT OR GUARDIAN

Title: _____ Surname: _____ First Name: _____
 Address: _____ State: _____ Postcode: _____
 _____ Parish Priest: _____
 Religious Denomination: _____ Suburb: _____
 Parish: _____
 Occupation: _____ Country of Citizenship: _____
 Contact Address: _____
 Contact Numbers: _____ Email: _____

CUSTODY/ GUARDIANSHIP

Name of person(s) with legal guardianship of the student: _____

If applicable a copy of any Parenting or Restraint Order is attached. Yes/No

Any other conditions enforced at law? _____

SIBLINGS CURRENTLY ATTENDING ST MATTHEW'S SCHOOL

| Name | Year Level | Name | Year Level |
|-------|------------|-------|------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

SIBLINGS CURRENTLY ATTENDING ANOTHER SCHOOL

| Name | Year Level | School |
|-------|------------|--------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

STUDENT'S INDIVIDUAL NEEDS

The School *Education Act 1999* requires the provision of :
 "Details of any conditions of the enrollee that may call for special steps to be taken for the benefit or protection of the enrollee or other persons in the school" (16G)

To assist the school to respond to individual requirements please detail any special needs your child has in the following area(s) that may affect his/her learning, participation or welfare during school hours.

Medical/Health Care _____

Medication _____

Physical _____

Orthoses/Prosthesis _____

Psychological/Cognitive _____

Sensory (e.g. Vision/Hearing) _____

Behavioural or Safety _____

Communication _____

Allergies _____

If medication or medical/health care services are required during school hours please provide full details, name, contact number and signed authorisation by relevant practitioner.

EXERNAL SERVICE PROVISION

Does your child receive any services from an external agency, which may affect educational arrangements? Yes/No

If so please detail name of Service Provider and Contact No. _____

Does your child require special Transport arrangements to and from school? Yes/No

Does your child receive Respite care on a regular basis? Yes/No

EMERGENCY CONTACT DETAILS (OTHER THAN A PARENT/GUARDIAN)

Name: _____ Relation to Student: _____
 Address: _____
 Contact Numbers: _____
 Name: _____ Relation to Student: _____
 Address: _____
 Contact Numbers: _____

MEDICAL INFORMATION

IMMUNISATION RECORD

F – fully immunized N – not immunized I – incomplete immunization P- personal objections

Measles Mumps Rubella Diphtheria Tetanus

Hepatitis B Pertussis Polio (OPV) Immunisation Record Attached Yes/No

(Whooping Cough)

Family Doctor/Medical Clinic: _____
 Address: _____
 Contact Numbers: _____
 Dentist/Dental Clinic: _____
 Address: _____
 Contact Numbers: _____
 Medicare Number: _____ Private health Fund: _____ Blood Group _____
 (If known)

MEDICAL EMERGENCY AUTHORISATION

I authorise St Matthew's School to seek medical/dental attention, call an ambulance or to hospitalise my son/daughter when considered necessary. If an emergency occurs requiring surgery, anaesthetic, oxygen, blood transfusion, medication and I/we are unable to be contacted within a reasonable time, I/we authorise St Matthew's School to agree to medically recommended treatment by an accredited medical practitioner on my/our behalf.

Signature of Parent(s) / Guardian (s): _____ Date: _____
FEMALE PARENT OR GUARDIAN

Signature of Parent(s) / Guardian (s): _____ Date: _____
MALE PARENT OR GUARDIAN

DISCLOSURE

Do you agree that the information supplied on the *Student Information* and *Family Information* sections can be provided to the relevant Parish Priest Yes/No

AGREEMENT

I/we understand and accept that the completion of this application/enrolment form does not guarantee an enrolment interview. Successful applicants will be determined in accordance with the school's enrolment criteria.

I/we understand and accept that attendance at an interview does not guarantee an enrolment offer being made.

I/we understand that enrolment of a student in one Catholic school does not guarantee the enrolment of that student in any other Catholic school.

I/we have completed this application form fully and to the best of my/our knowledge. Further I/we acknowledge and accept that if it can be demonstrated that I/we have withheld information relevant to the application/enrolment process, especially in relation to this student's individual needs, medical conditions, health care requirements and/or Parenting Orders, then the enrolment may be refused or terminated on this ground.

I/we have read and fully understand and agree that enrolment in a Catholic School means that we and our child will participate fully in all required aspects of the educational program of the school, including the Religious Education program of the school.

I/we have read and fully understand and agree to the terms and conditions set out in the school fee collection policy.

I/we agree to abide by the policies and directions of the school and the Catholic Education Commission of Western Australia as they are enacted from time to time.

Signature of Parent(s) / Guardian (s): _____
FEMALE PARENT OR GUARDIAN

Date: _____

Signature of Parent(s) / Guardian (s): _____
MALE PARENT OR GUARDIAN

Date: _____

The following must accompany the Application for Enrolment Form.

Originals of these documents should be presented at the enrolment interview:

- Your child's Birth Certificate
- Baptism Certificate (*if applicable*)
- Up-to-date Immunisation History Statement (*this is available through you MyGov account or Medicare*)
- Passport and Visa (*if applicable*); and
- Custodial Court Orders



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Data Collection Form

This information is being collected to enable nationally comparable reporting of students' outcomes against the *National Goals for Schooling in the Twenty-First Century*. This information is collected in accordance with the school's Privacy Policy.

Note: If you need help with this form please contact St Matthew's 9853 9500.

Name of student:

| | | |
|----------------------|----------------------|----------------------------|
| First name | Last name | Date of Birth (dd/mm/yyyy) |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Home address of student:

| | | |
|-----------------------|----------------------|----------------------|
| (No. and street name) | Suburb | Postcode |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

1 What is the student's sex?

- Male
 Female

2 Is the student of Aboriginal or Torres Strait Islander origin?

- (office use only)*
- | | | |
|---|--------------------------|---|
| No | <input type="checkbox"/> | 4 |
| Yes, Aboriginal | <input type="checkbox"/> | 1 |
| Yes, Torres Strait Islander | <input type="checkbox"/> | 2 |
| Yes, both Aboriginal and Torres Strait Islander | <input type="checkbox"/> | 3 |

3 In which country was the student born?

- (office use only)*
- | | | |
|--------------------------|--------------------------|------|
| Australia | <input type="checkbox"/> | 1101 |
| England | <input type="checkbox"/> | 2102 |
| India | <input type="checkbox"/> | 7103 |
| Indonesia | <input type="checkbox"/> | 5202 |
| Ireland | <input type="checkbox"/> | 2201 |
| Italy | <input type="checkbox"/> | 3104 |
| Malaysia | <input type="checkbox"/> | 5203 |
| New Zealand | <input type="checkbox"/> | 1201 |
| Philippines | <input type="checkbox"/> | 5204 |
| Singapore | <input type="checkbox"/> | 5205 |
| South Africa | <input type="checkbox"/> | 9225 |
| United States of America | <input type="checkbox"/> | 8104 |
| Vietnam | <input type="checkbox"/> | 5105 |
| Other – please specify | <input type="text"/> | |

- 5 (a) What is the **highest** year of primary or secondary school the parents/guardians have completed?
(For persons who have never attended school, mark 'Year 9 or equivalent or below.')

| | Mark one box only in each column | | office use only |
|-------------------------------|---|---|-----------------|
| | Parent 1 / Guardian 1 / Carer 1 (Female) | Parent 2 / Guardian 2 / Carer 2 (Male) | |
| Year 12 or equivalent | <input type="checkbox"/> | <input type="checkbox"/> | 4 |
| Year 11 or equivalent | <input type="checkbox"/> | <input type="checkbox"/> | 3 |
| Year 10 or equivalent | <input type="checkbox"/> | <input type="checkbox"/> | 2 |
| Year 9 or equivalent or below | <input type="checkbox"/> | <input type="checkbox"/> | 1 |

- 5 (b) What is the level of the **highest** qualification the parents/guardians have completed?

| | Mark one box only in each column | | office use only |
|---|---|---|-----------------|
| | Parent 1 / Guardian 1 / Carer 1 (Female) | Parent 2 / Guardian 2 / Carer 2 (Male) | |
| Bachelor degree or above | <input type="checkbox"/> | <input type="checkbox"/> | 7 |
| Advanced diploma/Diploma | <input type="checkbox"/> | <input type="checkbox"/> | 6 |
| Certificate I to IV (including trade certificate) | <input type="checkbox"/> | <input type="checkbox"/> | 5 |
| No non-school qualification | <input type="checkbox"/> | <input type="checkbox"/> | 8 |

- 6 (a) What is the occupation group of Parent 1/Guardian 1/Carer 1 (Female)?

- 6 (b) What is the occupation group of the Parent 2/Guardian 2/Carer 2? (Male)

Please select the appropriate parental occupation group from the list on page 4-5.

- 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 above.

Thank you for your time.
Please return this form to the school.

Group 3: Tradespeople and advanced/intermediate clerical, office, sales, carer and service staff

Tradespeople generally have completed a 4-year trade certificate, usually by apprenticeship. All tradespeople are included in this group. (metal fitters and machinists, motor mechanics, structural steel/welding trades workers, carpenters and joiners, plumbers, painters, electricians, chefs/cooks, hairdressers)

Advanced/intermediate clerical, office, sales, carer and service staff

- **Recording clerk** (bookkeeper, bank/post office clerk, statistical/actuarial clerk, account/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/inventory clerk, purchasing/supply logistics/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk)
- **Inquiry/admissions clerk** (customer inquiry/complaints/service clerk, hospital admissions clerk)
- **Office** (secretary, personal assistant, desktop publishing operator, switchboard operator)
- **Sales** (sales representative (goods and service), auctioneer, insurance agent/assessor/loss adjuster, market researcher, real estate sales agent)
- **Carer** (aged/disability/refugee/child care/welfare support worker, nanny, nursing support)
- **Service** (parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor/supervisor, inspectors and regulatory officers)

Group 4: Machine operators, sales/office/service/hospitality staff, assistants, labourers and related workers

Machine operators

- **Driver or mobile plant operators** (car/taxi/bus/coach/tram/truck/train driver, driving instructor, courier/deliverer, forklift driver, garbage collector, bulldozer/loader/grader/excavator/earthmoving plant operators, farm/horticulture/forestry machinery operators)
- **Production/processing machine operator** (engineering, chemical, petrol, gas, water sewerage, cement, plastics, rubber, textile, footwear, wood/paper/glass/clay/stone/concrete production/processing machine operators)
- **Other machine operator** (photographic developer/printer, industrial spray painter, boiler/air conditioning/refrigeration plant operators, railway signals/points, crane/hoist/lift/bulk materials handling machinery operators, driller, miner)

Sales office, hospitality staff and other assistants

- **Sales** (sales assistant, motor vehicle/caravan/parts salesperson, sales representatives, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker/filler)
- **Office** (typist, word processing/data entry/business/keyboard/machine operator, receptionist, office assistant, general clerk)
- **Hospitality staff** (hotel service supervisor, receptionist, waiter, bar attendant, barista, kitchen-hand, porter, housekeeper, fast food cooks)
- **Assistant/aide** (trades assistant, school/teacher's/education aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant)

Defence Forces ranks below senior NCO

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, store person, guard, commercial cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor, security office)