



"To strive, to seek, to find – but not to yield."

22 Barnes Street, Stawell VIC 3380
Stawell.ps@education.vic.gov.au
stawellps.vic.edu.au
(03) 5358 1255

A MESSAGE FROM THE PRINCIPAL

Dear Prospective Parents and Carers,

On behalf of the Stawell Primary School (502) staff, it is my pleasure to welcome you and thank you for considering our school as your child's educational provider. Deciding upon a school for your child's educational journey over the next seven years, is certainly an important one. Learning is an exciting, life-long endeavour, and my staff are proud to have both the opportunity and responsibility to ensure a solid foundation for your child as they begin their educational journey. We will strive to provide a positive educational experience conducive to learning.

Our school has a long and proud history in Stawell, dating back to the goldrush era. Many generations of families have attended Stawell Primary school and continue to do so. The School Values at Stawell Primary School are **Participation, Respect, Integrity, Determination and Excellence (P.R.I.D.E)**. P.R.I.D.E sets the expectations for all our school community members. We are proud of ourselves, our work, our school, and our community of Stawell. We are passionate about Stawell Primary School and the important role it plays in preparing students for their future.

It is the goal of the staff at Stawell Primary School (502) to work with you to create a rich learning environment for all students. Student success is a shared responsibility between staff, students, and parents, where education is a joint venture. We encourage the significant partnership between home and school in the learning process.

Stawell Primary School (502) aims to provide your child with a stimulating learning environment within a safe and supportive community. We feel this positions our students in the best possible place to expand their learning which extends beyond the classroom in digital and actual contact. Knowledge of each child is paramount in providing appropriate learning opportunities for individuals. Children are constantly assessed and monitored against developmental domains including social, emotional, cognitive and physical development. The timetabling of teaching enables individual and small group interactions, assessments and deep instructional teaching responding to our children's needs.

At Stawell Primary School (502) we believe wellbeing and relationships underpin the success and achievements of our students. To promote student attendance and punctuality, we foster opportunities to inspire student engagement in learning and actively encourage students to look forward to tomorrow. The expertise of individuals is celebrated and promoted through peer tutoring, peer coaching, collaboration, and performance. The opportunity to teach others promotes leadership qualities and strengthens understandings.

Once again, thank you for considering our school for your child's future education. Please do not hesitate to contact me on 5358 1255 for an appointment if you have any questions about our wonderful school or to book a school tour and to discover how you and your family can become part of the 502 tradition.

I look forward to working with you and developing a relationship that will assist in the growth of your child.

Sincerely,

Russell Marland
Principal



PRIVACY NOTICE

Information about the Enrolment Form. Please Read This Notice Before Completing The Enrolment Form.

This confidential enrolment form asks for personal information about your child as well as family members and others that provide care for your child. The main purpose for collecting this information is so that Stawell Primary School can register your child and allocate staff and resources to provide for their educational and support needs. All staff at Stawell Primary School and the Department of Education & Early Childhood Development are required by law to protect the information provided by this enrolment form.

Health information is collected so that staff at Stawell Primary School can properly care for your child. This includes information about any medical condition or disability your child may have, medication your child may rely on while at school, any known allergies and contact details of your child's doctor. Stawell Primary School depends on you to provide all relevant health information because withholding some health information may put your child's health at risk.

Stawell Primary School requires information about all parents, guardians or carers so that we can take account of family arrangements. Family Court Orders setting out any access restrictions and parenting plans should be made available to Stawell Primary School. Please tell us as soon as possible about any changes to these arrangements. Please do not hesitate to contact the Principal if you would like to discuss, in strict confidence, any matters relating to family arrangements.

Emergency Contacts

These are people that Stawell Primary School may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Stawell Primary School.

Student Background Information

This includes information about a person's country of birth, aboriginality, language spoken at home and parent occupation. This information is collected so that Stawell Primary School receives appropriate resource allocations for their students. It is also used by the Department to plan for future educational needs in Victoria. Some information is sent to Commonwealth government agencies for monitoring, planning and resource allocation. All of this information is kept strictly confidential and the Department will not otherwise disclose the information to others without your consent or as required by law.

Immunisation status

This assists Stawell Primary School in managing health risks for children. This information may also be passed to the Department of Human Services to assess immunisation rates in Victoria. Information sent to the Department of Human Services is aggregate data so no individual is identified.

Visa status

This information is required to enable Stawell Primary School to process your child's enrolment.

UPDATING YOUR CHILD'S RECORDS

Please let Stawell Primary School know if any information needs to be changed by sending updated information to the school office. Please contact us on 0353 581255 or by email stawell.ps@education.vic.gov.au to update any information. During your child's time with Stawell Primary School we will also send you copies of enrolment information held by us. Please use this opportunity to let us know of any changes.

ACCESS TO YOUR CHILD'S RECORD HELD BY SCHOOL

In most circumstances you can access your child's records. Please contact the Principal to arrange this. Sometimes access to certain information, such as information provided by someone else, may require a Freedom of Information request. We will advise you if this is required and tell you how you can do this.

If you have any concerns about the confidentiality of this information please contact the Principal. Stawell Primary School can also provide you with more detailed information about privacy policies that govern the collection and use of information requested on this form. The Stawell Primary School privacy policy is available by request through the General Office.



ENROLMENT PACK CHECKLIST 2025

Completed Forms:

- ☐ Enrolment Form
- ☐ Local Excursion Consent Form
- ☐ Food Allergies Form
- ☐ Student photograph consent Form
- ☐ Headlice screening consent Form

Additional Documentation:

- ☐ Birth Certificate
- ☐ Immunization Record



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Supporting Students with Food Allergies

Dear Parents and Guardians,

Ensuring the wellbeing of all of our students is of paramount importance to us as a school community. We recognise that an increasing number of our students have diagnosed food allergies which can have a serious impact on their health.

On occasions, our students are invited to enjoy foods at school that are not part of their prepared snack and lunch packs.

These occasions may include:

- Birthday celebrations – at times, families provide birthday cakes and/or celebratory treats for the class to share
- In-class cooking activities – teachers and students prepare and share foods as part of their class studies

To assist us in ensuring that your child's specific dietary needs are addressed in these situations, we would appreciate you completing and returning the following reply slip to us as soon as possible. **Please note that if the reply is not returned, it will be assumed that your child is not permitted to eat shared food.**

Your assistance in this matter is much appreciated.

Regards,

Russell Marland.
Principal

✂.....✂

Supporting Students with Food Allergies

Child's name:

Room number:

☐
☐

I give permission for my child to eat class treats, such as birthday cakes.

I give permission for my child to eat class-prepared foods.

☐
☐

I **do not** give permission for my child to eat class treats, such as birthday cakes.

I **do not** give permission for my child to eat class-prepared foods.

Signed:

Date:



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Stawell Primary School Parent Managed Headlice Screening Program CONSENT FORM

For the many families and teachers of school-aged children, head lice continue to create concerns. While it is known that head lice do not carry any infectious disease, our School Council, in conjunction with the Department of Human Services, has developed a parent-managed head lice screening program to help parents manage head lice. A group of volunteer parents at our school will conduct the program and it is fully supported by staff and School Council. All volunteer parents sign a confidentiality agreement to ensure information privacy for all children and their families, undertake training with DHS personnel and have a current Working With Children Check. Program goals include:

- Reduce the frustration and misinformation associated with head lice
- Decrease the concerns regarding head lice within the school community
- Protect families from misusing potentially harmful insecticide treatments.
- Promote regular home based screening using a conditioner and comb method.

We request that you authorise your child's inclusion in our screening program, which will operate at least twice per term and run by trained Parent Volunteers.

Our parent volunteers will use the 'Dry' checking without conditioner method.
Please note that no treatment is undertaken at the school.

If you would like to include your child/ren in our screening program, please complete the permission slip below and return it to school as soon as possible. Regular updates about our program will appear in the school newsletter. Interested parents are welcome to participate in the screening program. For further details and information please feel free to contact the school.

Thankyou
Russell Marland
Principal

✂.....✂

Stawell Primary School Parent Managed Headlice Screening Program CONSENT FORM



I give / do not give (please indicate choice) permission for my child/ren to participate in the Parent Managed Headlice Screening Program at Stawell Primary School.

Children's names: Grade:
.....
.....

Parent signature: Date: ... / ... /



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Stawell Primary School CONSENT FORM

Permission to publish Student Photographs & School Work on Stawell Primary School's Web Site, Facebook, Twitter and School Newsletter

Dear Parent/Guardian

The school has launched an updated website (www.stawellps.vic.edu.au), as well as having a Facebook page and a Twitter account for members of the school community to access. Utilising these avenues of communication makes it possible to share many of the activities and occasions that occur throughout the school year. We aim to use social media to keep our community members better informed of what our students are doing on a daily basis, with regular tweets, posts and photos of their activities.

However, we need to have your approval before we can use your child's image or work on the internet. This is consistent with seeking permission to use photos in the newsletter or have photos published in the local newspaper.

Student work or images published on the Internet can be viewed by a global audience. Under no circumstances will any personal information such as surname, home address, phone number, etc be published by the school. Only their first name will be displayed along with the photograph or work, if any credit or identification is appropriate.

Please sign the form below to give permission for Stawell Primary School to reproduce your child/children's photograph or work on our website, Facebook, Twitter account and in the Newsletter.

Should you **not** want your child's image to appear on Facebook and Twitter then this would also impact on your child's image in the school newsletter and in the Stawell Times News as this will also be online. Parents may contact the school if they have any questions regarding this.

NB This permission lasts for the duration of your child's enrolment at this school.

Student's Full Name:

YES I give permission for my child's **photograph** and/or **work** to be used on Stawell Primary School's website, Facebook, Twitter account and in the Newsletter.

NO I do not give permission for my child's **photograph** and/or **work** to be used on Stawell Primary School's website, Facebook, Twitter account and in the Newsletter.

Parent/Guardian's Signature:

Parent/Guardian's Name:

Date: ... / ... /



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LOCAL EXCURSION CONSENT FORM 2025

Dear Parents/Guardians

As an extension to our classroom curriculum, and in developing our students' knowledge and understanding of the importance of citizenship, we aim to involve our students in the local community. We aim to provide real-life community-based learning opportunities within our town.

In 2025 Stawell Primary School may take students outside of school grounds to undertake educational activities in the local area.

The purpose of this form is to obtain parent/carers consent for local excursions during 2025.

This form does NOT provide consent for excursions that go beyond the local area.

Local excursions

Local excursions are excursions to locations within walking distance of the school and do not involve 'Adventure Activities'.

Local excursions that your child may participate in throughout 2025 could include:

Walking with staff to the Library – Sloane Street, Town Hall – Main Street, Shops – Main Street, Hospital – Sloane Street, Central Park – Main Street, North Park – Lamont Street, etc.

- Physical Education lessons at Central Park – students will walk up Barnes Street and cross through at Laundromat, cross over Main Street into Central Park for sporting activities.
- Literacy lessons at Stawell Library – students will walk up Barnes Street, crossing at the roundabout continuing up Main Street, crossing through shops to Library, crossing over Sloane Street for occasional outdoor lessons.

Notification of local excursions

Stawell Primary School will NOT seek further consent from you before local excursions take place. However, we will provide advance notice to parents/carers of upcoming local excursions through the school newsletter/class notes/sms phone message.

For local excursions that occur on a recurring basis, Stawell Primary School will notify parents/carers once only prior to the commencement of the recurring event, eg; weekly sports lessons at the local swimming pool.

Please keep the school informed of any updated contact details to ensure you receive these notifications.

First aid and Medical Attention

Where necessary, school staff will administer first aid. School staff will also seek emergency medical attention for your child if it is considered reasonably necessary. Any costs associated with student injury rest with parents/carers unless the Department of Education and Training is liable in negligence (liability is not automatic).

Accident and ambulance cover

The Department of Education and Training does not provide student accident insurance or ambulance cover. Parents may wish to obtain this cover, depending on their health insurance arrangements and any other personal considerations.

PLEASE KEEP THIS SECTION OF THIS FORM AND RETURN THE NEXT PAGE WITH CONSENT INFORMATION.

Russell Marland
Principal



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LOCAL EXCURSION CONSENT FORM 2025

I have read all of the above information in relation to local excursions. I understand that:

- to ensure the school has up-to-date health and contact information about my child, I need to inform the school if this information changes
- the school will notify me prior to a local excursion(s) taking place
- I may withdraw my consent for any/all local excursions at any time prior to the day of the excursion by contacting Stawell Primary School – 03 5358 1255.

I give permission for my child _____ (full name)

in Grade _____ to attend local excursions in 2025.

Parent/carer: _____ (full name)

_____ (signature) _____ (date)

In case of emergency I can be contacted on:

_____ OR: _____

Alternative emergency contact person:

Name: _____

Relationship to student: _____

Phone number: _____

Form to Enrol in a Victorian Government School

Student Enrolment Information – 20____	OFFICE USE ONLY	CASES21 Student ID:
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The information requested in this form is required for enrolment purposes. This information is collected to plan for and support the educational needs of your child.

This form should be completed by parents or carers who are responsible for enrolling their child. It is the responsibility of the person completing this form to consult with all other adults that need to be involved in the enrolment process. Parents or carers can co-sign the same form or complete separate forms if personal details are unable to be shared between them.

If required information is not provided or there is a dispute between parents or carers about a child's enrolment, the enrolling principal is required to consider the student's education and wellbeing when deciding whether to defer or accept the enrolment.

Only one enrolment form should be submitted per student. By completing and submitting this enrolment form, you are accepting a place for your child at the specified school (subject to any further checks required by the school).

All schools across Australia are expected to collect the same information. Questions marked with a ♦ are asked as a requirement of the Commonwealth Government to meet data collection, funding and reporting requirements under the Australian Education Regulations 2013.

STUDENT DETAILS

Surname:			
First Given Name:			
Second Given Name: (if applicable)			
Preferred First Name: (if applicable)			
♦ Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Self-described: _____
Date of Birth: (dd-mm-yyyy)	____ / ____ / ____	Student Mobile Number: (if applicable)	

Intended start date:
<input type="checkbox"/> Day 1, Term 1 <input type="checkbox"/> Other: (dd-mm-yyyy) ____ / ____ / ____

Which year are you seeking to enrol this student?
<input type="checkbox"/> Foundation <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> Ungraded

Student's Permanent Residence

Your child's permanent residence is the address where they spend the majority of their days during the school week. If they spend an equal amount of time at two addresses, both are considered their permanent address and your child will be entitled to enrol in the designated neighbourhood school for either address.

The school may make enquiries to verify the information provided, such as checking the electoral roll at an Australian Electoral Commission office or the Victorian Electoral Commission head office; checking with a real estate agent; or checking whether there are any regulations/codes limiting the number of people living at one residence, for example if a rental property is a studio or one bedroom unit.

No. & Street Address:			
Suburb:			
State:		Postcode:	

How often does this student live at this address?
<input type="checkbox"/> Always <input type="checkbox"/> Mostly <input type="checkbox"/> Balanced (50%)
If the student lives at another address during the school week, please provide further details including the address, who they reside with and how many days a week the student lives there:

Siblings

A sibling is defined broadly and can include step-siblings and students residing together as part of a multiple family cohabitation or out-of-home-care arrangements, including foster care, kinship care, permanent care and residential care.

Does the student have any siblings at this school?	<input type="checkbox"/> Yes <input type="checkbox"/> No (move to next section)
---	---

Name	Current Year Level	Reside at same residential address as the student
1		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
2		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
3		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes
4		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes

PARENT/CARER DETAILS

Enrolling Adult 1

Title	
First Given Name	
Surname	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____

Adult 1 Relationship to student:	
<input type="checkbox"/> Parent	<input type="checkbox"/> Step Parent
<input type="checkbox"/> Host Family	<input type="checkbox"/> Relative
<input type="checkbox"/> Self (adult student / mature minor)	<input type="checkbox"/> Friend
<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Other: _____
Student lives with Adult 1:	
<input type="checkbox"/> Always	<input type="checkbox"/> Mostly
<input type="checkbox"/> Balanced (50%)	<input type="checkbox"/> Occasionally

No. & Street Address:	
Suburb:	
State:	Postcode

Enrolling Adult 2

Title	
First Given Name	
Surname	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____

Adult 2 Relationship to student:	
<input type="checkbox"/> Parent	<input type="checkbox"/> Relative
<input type="checkbox"/> Host Family	<input type="checkbox"/> Friend
<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Step Parent	
Student lives with Adult 2:	
<input type="checkbox"/> Always	<input type="checkbox"/> Mostly
<input type="checkbox"/> Balanced (50%)	<input type="checkbox"/> Occasionally

Address is the same as Enrolling Adult 1		<input type="checkbox"/> Yes <input type="checkbox"/> No (complete below)
No. & Street Address:		
Suburb:		
State:	Postcode	

Adult 1 Job Title:	
Adult 1 Employer:	

In which country was Adult 1 born?
<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify): _____

❖ Does Adult 1 speak a language other than English at home?	
<input type="checkbox"/> No, English only	
<input type="checkbox"/> Yes (please specify): _____	
Please indicate any additional languages spoken by Adult 1:	
Is an interpreter required?	<input type="checkbox"/> Yes <input type="checkbox"/> No

❖ What is the highest year of primary or secondary school that Adult 1 has completed?	
<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 / no schooling
❖ What is the level of the highest qualification that Adult 1 has completed?	
<input type="checkbox"/> Bachelor degree or above	<input type="checkbox"/> Advanced diploma / Diploma
<input type="checkbox"/> Certificate I to IV (including trade certificate)	<input type="checkbox"/> No non-school qualification
❖ What is the occupation group of Adult 1? Please select the appropriate current parental occupation group from the attached list at the end of the document.	
<ul style="list-style-type: none"> 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 their last occupation to select from the attached list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'. 	

What is the main language spoken between the student and adult at home?	
Preferred language of communications:	
Is Adult 1 interested in being involved in school group participation activities? (e.g., School Council, excursions)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Adult 2 Job Title:	
Adult 2 Employer:	

In which country was Adult 2 born?
<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify): _____

❖ Does Adult 2 speak a language other than English at home?	
<input type="checkbox"/> No, English only	
<input type="checkbox"/> Yes (please specify): _____	
Please indicate any additional languages spoken by Adult 2:	
Is an interpreter required?	<input type="checkbox"/> Yes <input type="checkbox"/> No

❖ What is the highest year of primary or secondary school that Adult 2 has completed?	
<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 / no schooling
❖ What is the level of the highest qualification that Adult 2 has completed?	
<input type="checkbox"/> Bachelor degree or above	<input type="checkbox"/> Advanced diploma / Diploma
<input type="checkbox"/> Certificate I to IV (including trade certificate)	<input type="checkbox"/> No non-school qualification
❖ What is the occupation group of Adult 2? Please select the appropriate current parental occupation group from the attached list at the end of the document.	
<ul style="list-style-type: none"> 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 their last occupation to select from the attached list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'. 	

What is the main language spoken between the student and adult at home?	
Preferred language of communications:	
Is Adult 2 interested in being involved in school group participation activities? (e.g., School Council, excursions)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Can we contact Adult 1 during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is Adult 1 usually home during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Home Phone:		
Work Phone:		
Mobile:		
SMS Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Email Address:		
Email Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult 1's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	<input type="checkbox"/> Mobile <input type="checkbox"/> Home Phone	<input type="checkbox"/> Email <input type="checkbox"/> Work Phone
Specify any other special conditions or times related to contact?		

Can we contact Adult 2 during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is Adult 2 usually home during school hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Home Phone:		
Work Phone:		
Mobile:		
SMS Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Email Address:		
Email Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult 2's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	<input type="checkbox"/> Mobile <input type="checkbox"/> Home Phone	<input type="checkbox"/> Email <input type="checkbox"/> Work Phone
Specify any other special conditions or times related to contact?		

Emergency Contacts

Please provide emergency contacts in the event that the enrolling parents/carers are unavailable. Please ensure those listed as emergency contacts are aware that their information has been provided for this purpose.

Name	Relationship <i>Neighbour, Relative, Friend or Other (please specify)</i>	Telephone Contact	Language Spoken <i>Write E for English</i>
1			
2			
3			
4			

Billing Details

You are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extra-curricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees.

Send bills to: (select one)	<input type="checkbox"/> Adult 1	<input type="checkbox"/> Adult 2	Another person / address* (complete details below)
Name to be used for all billing correspondence:			
No. & Street or PO Box			
Suburb:			
State:		Postcode:	
Billing Email:			

* Note: If you would like to send bills to another person / address, please ensure Additional Parent/Carer details are completed on pages 13-15.

Correspondence Details

Send correspondence addressed to: (select one)	<input type="checkbox"/> Adult 1	<input type="checkbox"/> Adult 2	<input type="checkbox"/> Both Adults	<input type="checkbox"/> Neither
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Additional Parents/Carers

Are there additional parents/carers in the student's life? <input type="checkbox"/> Yes (provide details below) <input type="checkbox"/> No (move to next section)	
Name of Adult 3:	
Name of Adult 4:	

If yes, please complete the Adult 3 and/or Adult 4 sections as attachments to this form on pages 13-15. If required, you may request a separate form for additional parents/carers from the school. The separate form allows for the capture of four further parents/carers.

STUDENT DEMOGRAPHICS

❖ In which country was the student born?	
<input type="checkbox"/> Australia	<input type="checkbox"/> Other (please specify): _____
If born overseas, on what date did the student arrive in Australia? (dd-mm-yyyy) _____ / _____ / _____	
What is the student's residency status? *	
<input type="checkbox"/> Australian citizen – holds Australian Passport	<input type="checkbox"/> Permanent Resident (provide visa details below)
<input type="checkbox"/> Australian citizen – eligible for Australian Passport	<input type="checkbox"/> Temporary Resident (provide visa details below)
<input type="checkbox"/> New Zealand citizen	
Visa Sub Class:	Visa Expiry Date: (dd-mm-yyyy) _____ / _____ / _____
Visa Statistical Code: (Required for some sub-classes)	

* Note: An Australian birth certificate does not guarantee Australian residency or citizenship. Further information is available at www.passports.gov.au/getting-passport-how-it-works/documents-you-need/citizenship

Does the student hold a Bridging Visa?	<input type="checkbox"/> Yes (provide further detail below) <input type="checkbox"/> No
If Yes, what was the student's previous visa?	
If Yes, what visa has the student applied for?	

International Student ID*: (Not required for exchange students)

* Note: If you are unsure of your International Student ID, please contact the International Education Division via phone (03 9084 8497) or email (international@education.vic.gov.au).

Does the student speak English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
❖ Does the student speak a language other than English at home?	
<input type="checkbox"/> No, English only	
<input type="checkbox"/> Yes (please specify the main language spoken at home): _____	
❖ Is the student of Aboriginal or Torres Strait Islander origin?	
<input type="checkbox"/> No	<input type="checkbox"/> Yes, Aboriginal
<input type="checkbox"/> Yes, Torres Strait Islander	<input type="checkbox"/> Yes, Both Aboriginal & Torres Strait Islander
Is the student a young carer (providing support/care for other family member/s)? *	<input type="checkbox"/> Yes <input type="checkbox"/> No

* A young carer is a young person under 25 years of age who provides, or intends to provide care, assistance, or support to a family member with a mental illness, physical illness, disability, chronic illness, or who is aged or has an addiction.

What are the student's living arrangements?	
<input type="checkbox"/> Student lives with parents/carers together at the same residence	<input type="checkbox"/> Student lives with each parent/carer at different times
<input type="checkbox"/> Student lives with one parent/carer only	<input type="checkbox"/> State Arranged Out of Home Care*
<input type="checkbox"/> Informal care arrangement [#]	<input type="checkbox"/> Student is independent
<input type="checkbox"/> Homeless	
If the student has a Case Manager, please provide their contact details below:	

* Students who live in court ordered alternative care arrangements away from their parents. These court ordered care arrangements include living with relatives or friends (kinship care), living with non-relative families (foster care or adolescent community placements) and living in residential care units.

[#] If the student is living in an informal care arrangement, please contact the school for an Informal Carer's Statutory Declaration, which must be completed.

If there are any **court orders** about the child, please provide copies of those orders to the school with this form.

How will the student primarily travel to and from school?				
<input type="checkbox"/> Walking	<input type="checkbox"/> School Bus	<input type="checkbox"/> Train	<input type="checkbox"/> Driven by parent/carer	<input type="checkbox"/> Taxi / Ride Share
<input type="checkbox"/> Bicycle	<input type="checkbox"/> Public Bus	<input type="checkbox"/> Tram	<input type="checkbox"/> Self-Driven	<input type="checkbox"/> Other: _____
If the student catches public transport to school, what station/stop does their journey commence:				
If the student drives themselves to school, what is their Car Registration Number:				

Students residing in rural and regional Victoria or attending special schools may be entitled to receive travel assistance. Travel assistance may be in the form of access to a school bus service or financial support through a conveyance allowance to assist with the cost of travel. Information on eligibility and the application process can be obtained from the school.

SCHOOL DETAILS

Are you seeking to enrol the student at this school full-time? <input type="checkbox"/> Yes (move to next section) <input type="checkbox"/> No				
If No, how many days a week would the student be attending this school?				
If No, provide reason you are seeking part-time enrolment:				
If No, provide details for other schools:				
Other school name:		Days / week:	Has enrolment been accepted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other school name:		Days / week:	Has enrolment been accepted?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous Education – Students Enrolling in Foundation for the First Time

Is the student attending a funded kindergarten program* in the year before Foundation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of kindergarten or early childhood service:	

* Note: A kindergarten program that is funded and approved by the Victorian Government, has a play-based learning program, and is delivered by a qualified teacher. Funded kindergarten programs can be found at www.education.vic.gov.au/findaservice

Previous Education – Other

Has the student previously been enrolled at another school?	<input type="checkbox"/> Yes, in Victoria – Government School	<input type="checkbox"/> Yes, in Victoria – Catholic or Independent School
	<input type="checkbox"/> Yes, interstate	<input type="checkbox"/> Yes, overseas <input type="checkbox"/> No (move to next section)

If Yes, name of last school attended:	
If Yes, location of last school attended: (suburb/town/state/country)	
If Yes, date of attendance: (dd-mm-yyyy)	_____ / _____ / _____ to _____ / _____ / _____
If Yes, year levels of previous education:	

If the student studied overseas, what age did the student first start school?	
What was the language of the student's previous education?	

Period of interruption to education: (months/years)		Is the student repeating a year level?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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STUDENT MEDICAL DETAILS

Schools require the health information requested in this section to plan for and support the health and wellbeing needs of students.

Please note: If there is a situation or incident which requires first aid to be administered to your child, school staff will administer first aid that is reasonably necessary and appropriate to their level of training. School staff will also seek emergency medical attention for your child if it is considered reasonably necessary. Any costs associated with student injury rest with parents/carers unless the Department of Education is liable in negligence (liability is not automatic). In the event that your child needs medical attention, school staff will contact you as soon as practically possible.

Medical Conditions

Does the student have an allergy? If yes, please provide the school with an ASCIA Action Plan for Allergies (available at: www.allergy.org.au/hp/ascia-plans-action-and-treatment#r2a)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Is the student at risk of anaphylaxis? If yes, please provide the school with an ASCIA Action Plan for Anaphylaxis (available at: www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Does the student have asthma?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Has a current Asthma Action Plan been provided to School? If No, please provide an Asthma Action Plan to the School (available at: www.asthma.org.au/treatment-diagnosis/asthma-action-plan/)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Does the student have any other medical condition or other relevant medical assessment that the school needs to know about? If Yes, please ask the school for the appropriate <u>medical advice form</u> , to be completed by the treating medical practitioner and returned to school.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes to <u>any of the above</u>, please specify:		

Medication

Does the student take medication?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Is the medication required during school hours? If Yes, please ask the school for a <u>Medication Authority Form</u> , to be completed by the treating medical practitioner and returned to school	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--	------------------------------	-----------------------------

Name of medications taken:

Doctor's Name:			
Medical Centre:			
Street Address:			
Suburb:		Postcode:	
State:		Telephone Number:	

The Department of Education recognises that adjustments may be required for students with additional needs, including students with disability, so that they can participate at school. School personnel and parents or carers work together to identify the adjustments that may be needed to meet the student's learning and support needs.

Does the student have additional needs and require support for learning?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--	------------------------------	-----------------------------

Does the student have additional needs in any of the following areas?	Hearing:	<input type="checkbox"/> Yes (please specify): _____
	Vision:	<input type="checkbox"/> Yes (please specify): _____
	Speech/Language:	<input type="checkbox"/> Yes (please specify): _____
	Physical:	<input type="checkbox"/> Yes (please specify): _____
	Cognitive/Learning:	<input type="checkbox"/> Yes (please specify): _____
	Social/Emotional:	<input type="checkbox"/> Yes (please specify): _____

Has the student had a disability assessment before?	<input type="checkbox"/> No <input type="checkbox"/> Yes (<i>specify outcome</i>): _____
Has the student received individualised disability funding before?	<input type="checkbox"/> No <input type="checkbox"/> Yes (<i>please specify</i>): _____
Has any previous education provider prepared a documented plan to support the student's additional learning needs?	<input type="checkbox"/> No <input type="checkbox"/> Yes (<i>provide details</i>): _____

Please indicate any adjustments that may assist the student to participate at school:

Allied Health Support

Has the student previously accessed support from an allied health professional?		
Occupational therapy: <input type="checkbox"/> Yes <input type="checkbox"/> No Name and contact details: 	Exercise physiology <input type="checkbox"/> Yes <input type="checkbox"/> No Name and contact details: 	Speech pathology <input type="checkbox"/> Yes <input type="checkbox"/> No Name and contact details:
Physiotherapy <input type="checkbox"/> Yes <input type="checkbox"/> No Name and contact details: 	Behaviour support <input type="checkbox"/> Yes <input type="checkbox"/> No Name and contact details: 	Other <input type="checkbox"/> Yes <input type="checkbox"/> No Name and contact details:

STUDENT SAFETY, ACCESS AND SPECIAL CIRCUMSTANCES

Student Risk

The Department of Education has a responsibility to assess and manage risk of harm to its staff and students. By providing information about your child, you will help facilitate their transition to school and ensure their safety. This may involve preparing a behaviour management plan or other appropriate strategies to meet the particular needs of the student.

To your knowledge, is there anything in the student's history or circumstances (including medical history not already provided) which might pose a risk of any type to this student, other students, or staff at this school?
<input type="checkbox"/> Yes <input type="checkbox"/> No (move to the next section)
If Yes, please provide further detail:

Court Orders and Other Care Arrangements (previously referred to as an Access Alert)

Is there an intervention order, parenting order or any other court order impacting the student?
<input type="checkbox"/> Yes <input type="checkbox"/> No (move to the next section)

If Yes, then complete the following questions and **present a current copy of the document to the school.**

Court Order or other access document type:	<input type="checkbox"/> Family Law Order / Parenting Order	<input type="checkbox"/> Parenting Plan / Agreement	<input type="checkbox"/> Intervention Order
	<input type="checkbox"/> Child Protection Order	<input type="checkbox"/> DFFH Authorisation	<input type="checkbox"/> Other: _____
Please provide further details of the Court Order or other access documents, and any other safety concerns:			
End Date (if applicable): (dd-mm-yyyy)			

Activity Restrictions and Considerations

Are there any activities (organised by the school and/or third parties) that the student cannot participate in?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(move to the next section)</i>
If Yes, please provide further detail: (e.g. sport, excursions)	
<div></div>	

Privacy Statement

The personal and health information collected in this form, and any attachments, is required for enrolment at all Victorian Government Schools. The information is collected to ensure accurate enrolment, and to plan for and support the educational needs of students. The information will be managed securely and accessed only by staff, on a need-to-know basis, and in accordance with the Department of Education Schools' Privacy Policy which applies to all government schools (available at: www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx) or where mandated or allowed by law.

Please also refer to the Victorian Government School Privacy Collection Notice for details on handling of personal and health information in schools: www.education.vic.gov.au/Pages/Schools'-Privacy-Collection-Notice.aspx

DECLARATION

Thank you for completing this Student Enrolment form. The information provided is required to enable staff to properly enrol your child at our school as such it is important that it is accurate and up to date.

I/We confirm that:

- **I am/We are the person/people named as completing this form.**
- **The information in this form is true and correct.**
- **I/We agree to authorise this form by electronic means with an electronic signature.**

Signature of Enrolling Adult: _____ Date: ____ / ____ / ____

Signature of Enrolling Adult (if applicable): _____ Date: ____ / ____ / ____

Please select the category that best describes who has signed and completed this form. This will assist the school with the enrolment process.

- ☐ Both parents/carers have completed and signed this form.
- ☐ Parents/carers are completing separate forms (schools can provide additional forms on request).
- ☐ One parent has completed and signed this form on behalf of both parents. Contact details for the other parent have been provided in the form for the school's use as required.
- ☐ One parent has completed and signed this form and the contact details for the other parent are unknown to the enrolling parent/carer and not provided.
- ☐ There is only one parent/carer with legal responsibility for the child and that person has completed and signed this form.
- ☐ Other, please specify: (for instance, where the contact details for the other parent are known but it is not appropriate or safe to contact them) _____

If there are any court orders about the child, please provide copies of those orders to the school with this form.

WHO CAN SIGN THIS FORM?

- **A person with parental responsibility:** a parent of a child under 18 years of age, subject to relevant court orders (including parenting orders made under the *Family Law Act 1975* and protection orders made under the *Children, Youth and Families Act 2005* by the Children's Court, or other person granted parental responsibility under a relevant court order).
- **A carer formally authorised by Child Protection to enrol the student:** the Department of Families, Fairness and Housing (DFFH) can issue a written authorisation to the carer of a child in out of home care to make decisions about the child. In some circumstances this will include specific authorisation to enrol the child at school.
- **Informal carer:** an Informal Carer is a relative or other responsible adult with whom the child lives, and who has day to day care of the child. The informal carer should provide an Informal Carer Statutory Declaration to confirm their status as an informal carer. A copy of this statutory declaration can be obtained from www.education.vic.gov.au/PAL/informal-carer-statutory-declaration-template.pdf
- **Students living independently:** If the student is an adult or a mature minor for the purpose of enrolment and they live independently. These students will need to be considered in accordance with the www.education.vic.gov.au/pal/decision-making-responsibilities-students/policy policy.
- **Adult Students:** a student 18 years of age or older is considered an adult and can sign their own consent form.

ATTACHMENT 1 – PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. Please indicate your current occupation – not your qualification. This information is used for determining funding allocations to schools.

Group A: 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 B: 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, proofreader, 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 C: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a 4-year Trade Certificate, usually by apprenticeship. All tradespeople 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 / childcare worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

Group D: 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, kitchen hand, 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)

ATTACHMENT 2 – ADDITIONAL PARENT/CARER DETAILS

Enrolling Adult 3

Title		
First Given Name		
Surname		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____	

Adult 3 Relationship to student:	
<input type="checkbox"/> Parent	<input type="checkbox"/> Relative
<input type="checkbox"/> Host Family	<input type="checkbox"/> Friend
<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Step Parent	
Student lives with Adult 3:	
<input type="checkbox"/> Always	<input type="checkbox"/> Mostly
<input type="checkbox"/> Balanced (50%)	<input type="checkbox"/> Occasionally

No. & Street Address:		
Suburb:		
State:		Postcode

Adult 3 Job Title:	
Adult 3 Employer:	

In which country was Adult 3 born?	
<input type="checkbox"/> Australia	<input type="checkbox"/> Other (please specify): _____

❖ Does Adult 3 speak a language other than English at home?	
<input type="checkbox"/> No, English only	
<input type="checkbox"/> Yes (please specify): _____	
Please indicate any additional languages spoken by Adult 3:	
Is an interpreter required?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Enrolling Adult 4

Title		
First Given Name		
Surname		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____	

Adult 4 Relationship to student:	
<input type="checkbox"/> Parent	<input type="checkbox"/> Relative
<input type="checkbox"/> Host Family	<input type="checkbox"/> Friend
<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Step Parent	
Student lives with Adult 4:	
<input type="checkbox"/> Always	<input type="checkbox"/> Mostly
<input type="checkbox"/> Balanced (50%)	<input type="checkbox"/> Occasionally

Address is the same as Enrolling Adult 3	<input type="checkbox"/> Yes <input type="checkbox"/> No (complete below)
No. & Street Address:	
Suburb:	
State:	Postcode

Adult 4 Job Title:	
Adult 4 Employer:	

In which country was Adult 4 born?	
<input type="checkbox"/> Australia	<input type="checkbox"/> Other (please specify): _____

❖ Does Adult 4 speak a language other than English at home?	
<input type="checkbox"/> No, English only	
<input type="checkbox"/> Yes (please specify): _____	
Please indicate any additional languages spoken by Adult 4:	
Is an interpreter required?	<input type="checkbox"/> Yes <input type="checkbox"/> No

❖ What is the highest year of primary or secondary school that Adult 3 has completed?	
<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 / no schooling
❖ What is the level of the highest qualification that Adult 3 has completed?	
<input type="checkbox"/> Bachelor degree or above	<input type="checkbox"/> Advanced diploma / Diploma
<input type="checkbox"/> Certificate I to IV (including trade certificate)	<input type="checkbox"/> No non-school qualification
❖ What is the occupation group of Adult 3? Please select the appropriate current parental occupation group from the attached list at the end of the document.	
<ul style="list-style-type: none"> 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 their last occupation to select from the attached list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'. 	

❖ What is the highest year of primary or secondary school that Adult 4 has completed?	
<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 / no schooling
❖ What is the level of the highest qualification that Adult 4 has completed?	
<input type="checkbox"/> Bachelor degree or above	<input type="checkbox"/> Advanced diploma / Diploma
<input type="checkbox"/> Certificate I to IV (including trade certificate)	<input type="checkbox"/> No non-school qualification
❖ What is the occupation group of Adult 4? Please select the appropriate current parental occupation group from the attached list at the end of the document.	
<ul style="list-style-type: none"> 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 their last occupation to select from the attached list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'. 	

What is the main language spoken between the student and adult at home?	
Preferred language of communications:	
Is Adult 3 interested in being involved in school group participation activities? (e.g., School Council, excursions)	<input type="checkbox"/> Yes <input type="checkbox"/> No

What is the main language spoken between the student and adult at home?	
Preferred language of communications:	
Is Adult 4 interested in being involved in school group participation activities? (e.g., School Council, excursions)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Can we contact Adult 3 during school hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Adult 3 usually home during school hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone:	
Work Phone:	
Mobile:	
SMS Notifications:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email Address:	
Email Notifications:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Adult 3's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	<input type="checkbox"/> Mobile <input type="checkbox"/> Email <input type="checkbox"/> Home Phone <input type="checkbox"/> Work Phone
Specify any other special conditions or times related to contact?	

Can we contact Adult 4 during school hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Adult 4 usually home during school hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone:	
Work Phone:	
Mobile:	
SMS Notifications:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email Address:	
Email Notifications:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Adult 4's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	<input type="checkbox"/> Mobile <input type="checkbox"/> Email <input type="checkbox"/> Home Phone <input type="checkbox"/> Work Phone
Specify any other special conditions or times related to contact?	

Billing Details

You are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extra-curricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees.

Send bills to: <i>(select one)</i>	<input type="checkbox"/> Adult 3	<input type="checkbox"/> Adult 4	<input type="checkbox"/> Another person / address* <i>(complete details below)</i>
Name to be used for all billing correspondence:			
No. & Street or PO Box			
Suburb:			
State:		Postcode:	
Billing Email:			

* Note: If you would like to send bills to another person / address, please ensure Additional Parent/Carer details are completed on pages 16-17.

Correspondence Details

Send correspondence addressed to: <i>(select one)</i>	<input type="checkbox"/> Adult 3	<input type="checkbox"/> Adult 4	<input type="checkbox"/> Both Adults	<input type="checkbox"/> Neither
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ATTACHMENT 3 - TRAVEL ASSISTANCE AND PROGRAMS

Conveyance Allowance Program

The Conveyance Allowance Program supports eligible families attending mainstream schools in rural and regional Victoria, and special schools (state-wide) with financial assistance towards the cost of transporting students to and from school.

Is the student applying for the Conveyance Allowance Program?

☐ Yes

☐ No (*proceed to next question*)

Your school can provide the applicable application form and advice on the different types of conveyance available. For further information, including the conveyance allowance policy and application forms, refer to the Department's Policy and Advisory Library (PAL) here: www.education.vic.gov.au/pal/conveyance-allowance/policy

School Bus Program

The School Bus Program assists families in rural and regional Victoria by transporting students to school where they do not have access to public transport. The program supports travel to students nearest government and non-government school. Travel by bus to special schools is provided through the Students with Disabilities Transport Program (see below). Travel to a school that is not the nearest will pay a fare to travel. Your school can provide the relevant application form.

Is the student applying for the School Bus Program?

☐ Yes (see text below)

☐ No (*proceed to next question*)

Your school can provide the relevant application form and advice on travel type (free travel, pre-school, fare payer etc.) For further information, including the School Bus Program policy refer to the Department's PAL here: www.education.vic.gov.au/pal/school-bus-program/policy

Students with Disabilities Transport Program

The Students with Disabilities Transport Program assists families throughout Victoria by transporting students to their nearest appropriate government special school. The program supports travel for students within Designated Transport Areas. Families should also consider the conveyance allowances that may provide increased or alternative travel options to support school travel.

Is the student applying to travel on a school bus or other travel assistance?

☐ Yes (read below text)

☐ No

Your school can provide the relevant application form and advice on travel suitability. For further information, including the Students with Disabilities Transport Program policy, refer to the Department's PAL here: www.education.vic.gov.au/pal/transport-students-disabilities/policy

First date of travel?

☐ Next school year

☐ Alternate date: (dd-mm-yyyy) ____ / ____ / ____

Type of travel assistance requested?

☐ Access to School Bus

☐ Conveyance Allowance

If applicable, specify the student's mode of assisted mobility.

☐ Wheelchair

☐ Walker

Comments relevant to travel:

OFFICE USE ONLY				
Child's Name sighted:		<input type="checkbox"/> Yes <input type="checkbox"/> No		Enrolment Date:
Year level:	Home Group:	Timetabling Group:	House:	Campus:
Student Email Address:				
Australian residency confirmed:		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sighted / provided		
Date of birth confirmed:		<input type="checkbox"/> Yes – Birth certificate	<input type="checkbox"/> Yes – Doctor certificate	<input type="checkbox"/> Yes - Other <input type="checkbox"/> Not sighted / provided
Does the student have a Disability ID number?		<input type="checkbox"/> Yes (please specify): _____ <input type="checkbox"/> No		
Does the student have a Victorian Student Number (VSN)?				
<input type="checkbox"/> Yes, please specify: _____ <input type="checkbox"/> Yes, but the VSN is unknown <input type="checkbox"/> No, the student has never been issued a VSN				
For Foundation students, has a Transition Learning and Development Statement been provided?		<input type="checkbox"/> Yes, via Insight Assessment Platform <input type="checkbox"/> Yes, direct from teacher/parent/carers <input type="checkbox"/> No <input type="checkbox"/> Pending		
Immunisation Certificate received:		<input type="checkbox"/> Yes – Up to date <input type="checkbox"/> Yes – Not up to date <input type="checkbox"/> Not sighted / provided		
Are there any Notice/s on the Immunisation History Statement:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Does the student have asthma, allergies or anaphylaxis?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Does the student need to take medication during school hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
*Have the required medical forms been provided to the school?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A – no medical conditions		
*Note: Additional forms including student medical advice and condition forms can be found here: Medical Advice Forms				
Can the student Individual Education Plan include travel training?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Is the student attending their nearest school?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Does the student reside in Designated Transport Area (if attending special school)?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Can the student be accommodated on an existing route (if applicable)?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Pick-up Point:		Map Ref:	Time AM:	
Set Down Point:		Map Ref:	Time PM:	
Current Court Order or other access document placed on student file? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet to be provided to the school)				

FINANCIAL ASSISTANCE INFORMATION FOR PARENTS

Every Victorian child should have access to the world of learning opportunities that exist beyond the classroom. The Camps, Sports and Excursions Fund helps ensure that no student will miss out on the opportunity to join their classmates for important, educational and fun activities. It is part of making Victoria the Education State and the Government's commitment to breaking the link between a student's background and their outcomes.

CAMPS, SPORTS & EXCURSIONS FUND (CSEF)

School camps provide children with inspiring experiences in the great outdoors. Excursions encourage a deeper understanding of how the world works while sports teach teamwork, discipline and leadership. All are a part of a healthy curriculum.

CSEF is provided by the Victorian Government to assist eligible families to cover the costs of school trips, camps and sporting activities.

If you hold a valid means-tested concession card or are a temporary foster parent, you may be eligible for CSEF. A special consideration category also exists for asylum seeker and refugee families. The allowance is paid to the school to use towards expenses relating to camps, excursions or sporting activities for the benefit of your child.

The annual CSEF amount per student is:

- \$150 for primary school students
- \$250 for secondary school students

MORE INFORMATION

For more information about CSEF visit:

<https://www.education.vic.gov.au/about/programs/Pages/csef.aspx>

HOW TO APPLY

New applicants should contact the school office to obtain a CSEF application form or download from the website below.

If you applied for CSEF at your child's school last year, you do not need to complete an application form this year unless there has been a change in your family circumstances.

You only need to complete an application form if any of the following changes have occurred:

- **new student enrolments;** your child has started or changed schools this year.
- **changed family circumstances;** such as a change of custody, change of name, concession card number, or new siblings commencing this year.

Check with the school office if you are unsure.



Camps, Sports and Excursions Fund APPLICATION Form

School Name

School REF ID

Parent/legal guardian details

Surname

First name

Address

Town/suburb State Postcode

Contact number

Centrelink pensioner concession **OR** Health care card number (CRN)

 - - - **OR**
☐ Foster parent* **OR** ☐ Veterans affairs pensioner (Gold Card)**

*Foster Parents must provide a copy of the temporary care order letter from the Victorian Department of Families, Fairness and Housing (DFFH).

**Applicants must provide a copy of the Veteran Affairs Gold card.

Student details

Child's surname	Child's first name	Student ID	Date of birth (dd/mm/yyyy)	Year level

I authorise the Victorian Department of Education (DE) to use Centrelink Confirmation eServices to perform an enquiry about my Centrelink customer details and concession card status to enable the business to determine if I qualify for a concession, rebate or service. I also authorise the Victorian Department of Families, Fairness and Housing (DFFH) to provide the results of any enquiry to DE regarding temporary care orders.

I understand that:

- DFFH or Centrelink will use information I have provided to DE to confirm my eligibility for the Camps, Sports and Excursions Fund and will disclose to DE personal information including my name, address, payment and concession card type and status.
- This consent, once signed, remains valid while my child is enrolled at a registered Victorian school unless I withdraw it by contacting the school.
- I can obtain proof of my circumstances/details from DFFH and provide it to my child's school so that my eligibility for the Camps, Sports and Excursions Fund can be determined.
- If I withdraw my consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the Camps, Sports and Excursions Fund provided by DE.
- Information regarding my eligibility for the Camps, Sports and Excursions Fund may be disclosed to DFFH and/or State Schools Relief for the purpose of evaluating concession card services or confirming eligibility for assistance.

You can request access to the personal information that we hold about you, and to request that any errors be corrected, by contacting your child's school.

Signature of applicant

Date / /

Camps, Sports and Excursions fund eligibility

Below are the criteria used to determine a student's eligibility for the Camps, Sports and Excursions Fund (CSEF).

Criteria 1 – Eligibility

To be eligible* for the fund, a mature minor of sixteen years of age or over, a parent or legal guardian of a student attending a registered Government or non-government Victorian primary or secondary school must:

- on the first day of Term one, or;
 - on the first day of Term two.
- a) Be an eligible beneficiary within the meaning of the State Concessions Act 2004, that is, be a holder of Veterans Affairs Gold Card or be an eligible Centrelink Health Care Card (HCC) or Pensioner Concession Card (PCC) holder, OR
 - b) Be a temporary foster parent, and;
 - c) Submit an application to the school by the due date.

* A special consideration eligibility category also exists. For more information, see: [Camps, Sports and Excursions Fund \(CSEF\): Eligibility | education.vic.gov.au](https://education.vic.gov.au/camps-sports-and-excursions-fund-csef-eligibility)

Mature minors or parents who receive a Carer Allowance on behalf of a child, or any other benefit or allowance not income tested by Centrelink, are not eligible for the CSEF unless they also comply with one of (a) or (b) above.

Criteria 2 - Be of school age and attend school in Victoria

School is compulsory for all Victorian children aged between six and seventeen years of age inclusive.

For the purposes of CSEF, students may be eligible for assistance if they attend a Victorian registered primary or secondary school. Typically, these students are aged between five and eighteen years inclusive.

CSEF is not payable to students attending pre-school, kindergarten, home schooling, or TAFE.

Eligibility Date

For concession card holders, CSEF eligibility will be subject to the parent/legal guardian's concession card being successfully validated with Centrelink on **29 January 2024 and/or 15 April 2024**.

Payment amounts

CSEF payment amount

The CSEF is an annual payment to the school to be used towards camps, sports and/or excursion expenses for the benefit of the eligible student.

- Primary school student rate: \$150.00 per year.
- Secondary school student rate: \$250.00 per year.

The CSEF is paid directly the school and will be allocated by the school towards camps, sports and/or excursion costs for your child.

For ungraded students, the rate payable is determined by the student's date of birth. For more information, see: [Camps, Sports and Excursions Fund \(CSEF\): Payment amounts | education.vic.gov.au](https://education.vic.gov.au/camps-sports-and-excursions-fund-csef-payment-amounts)

Foundation and Year 7 government school students who are CSEF recipients are also eligible for a uniform voucher. Schools are required to make applications on behalf of parents, so please register your interest at the school.

How to complete the application form

NOTE: ALL SECTIONS MUST BE COMPLETED BY PARENT/LEGAL GUARDIAN

1. Complete the PARENT/LEGAL GUARDIAN DETAILS section.
Make sure that the Surname, First Name, and Customer Reference Number (CRN) details match those on your concession card. You will also need to provide your concession card to the school.
If you are claiming as a Foster Parent or a Veteran Affairs Pensioner, you will need to provide a copy of documentation confirming your status as a temporary Foster Parent or provide your Veterans Affairs Pensioner Gold card to the school.
2. Complete the STUDENT/S DETAILS section for students at this school.
3. Sign and date the form and return it to the school office as soon as possible. The CSEF program for 2024 closes at the end of term two 2024.

CSEF payments cannot be claimed retrospectively for prior years.

Queries relating to CSEF eligibility and payments should be directed to the school.