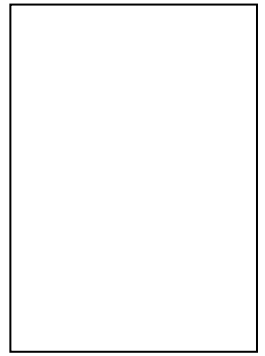




**ST EDMUND'S
COLLEGE**
CANBERRA · EST 1954

110 Canberra Avenue, Griffith ACT 2603 | 02 6239 0660
enrolments@sec.act.edu.au | sec.act.edu.au



APPLICATION FOR ENROLMENT

STUDENT INFORMATION

Calendar Year for Enrolment _____ Year Level for Enrolment _____

ACT Student ID Number _____

If you have applied at other schools, please list them in order of preference (including St Edmund's College)

1. _____ 2. _____ 3. _____

| | | | |
|--|--|---|---|
| Surname | | First Name | |
| Middle Name | | Date of Birth | |
| Country of Birth | | Date arrived in Australia (if applicable) | |
| Country of Citizenship | | Type of Resident | <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary |
| Nationality | | Full Fee Paying Overseas Student | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Ethnicity | | Visa Subclass Number | |
| Aboriginal Torres Strait Islander | Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> | Main Language | |
| Religion | | Other Languages | |
| Current School | | Number of Years at Current School | |
| Child resides with | <input type="checkbox"/> Both Parents <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Carer Other _____ | | |
| If custody is shared please provide details | | | |
| Family Court or other relevant Court Order details (if applicable) | | | |

Previous School/s other than Current School

| Name of School | Location | Enrolment Period |
|----------------|----------|------------------|
| | | |
| | | |

Sacraments

| | Baptism | Reconciliation | Eucharist | Confirmation |
|--------|---------|----------------|-----------|--------------|
| Date | | | | |
| Parish | | | | |

FAMILY INFORMATION

| | Parent/Carer 1 Residing with Student | Parent/Carer 2 Residing with Student | Parent/Carer Not residing with Student |
|--|--|--|--|
| Title (eg Mr/Miss/Mrs) | | | |
| Surname | | | |
| Firstname | | | |
| Relationship to Student | | | |
| Residential Address | | | |
| Postal Address | | | |
| Email Address | | | |
| Mobile | | | |
| Home Telephone | | | |
| Work Telephone | | | |
| Religion | | | |
| Highest Qualification Completed (Mark one box only) | <input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate 1 to IV <input type="checkbox"/> No qualification beyond school | <input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate 1 to IV <input type="checkbox"/> No qualification beyond school | <input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate 1 to IV <input type="checkbox"/> No qualification beyond school |
| School Education Information (Mark one box only) | <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> |
| Country of Birth | | | |
| Nationality | | | |
| Country of Citizenship | | | |
| Aboriginal Torres Strait Islander | Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Main Language Spoken at Home | | | |
| Old Boy of the College? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Years Attended | | | |
| OCCUPATION GROUP Group 1: Senior management in large business organisation, government administration, defence & qualified professional. Group 2: Other business managers, arts/media/sportspersons & associated professionals. Group 3: Tradesmen/women, clerks, skilled office, sales & service staff. Group 4: Machine operators, hospitality staff, assistants, labourers & related workers. Group 8: Not in paid work in the last 12 months | | | |
| Occupation Group (select from above list) | | | |
| Occupation | | | |
| Employer | | | |
| Defence Family | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Siblings (are other sons currently at St Edmund's College? If so, please provide name, house and current year level)

| Name | House | Current Year Level |
|------|-------|--------------------|
| | | |
| | | |
| | | |

Were other sons past students at St Edmund's College?

| Name | House | Years Enrolled |
|------|-------|----------------|
| | | |
| | | |

Medical Information (a separate form will be provided on enrolment for detailed medical information)

| | | | |
|---|---|---|--|
| Emergency Contact Name (other than Parent/Carer) | | Relationship to Student (eg.aunt, family friend etc) | |
| Telephone | | Mobile | |
| Is the student's immunisation up to date? | Yes <input type="checkbox"/> No <input type="checkbox"/> Date of last immunisation: _____ | | |

Learning Background

Indicate the student's talents, learning needs, achievements, interests, sports

Indicate whether the student applying for enrolment has any diagnosed disabilities and/or additional support needs: (please tick Yes or No for each of the following)

| Physical | Medical | Educational | Behavioural | Emotional | Other Special Needs |
|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| Yes <input type="checkbox"/> | Yes <input type="checkbox"/> | Yes <input type="checkbox"/> | Yes <input type="checkbox"/> | Yes <input type="checkbox"/> | Yes <input type="checkbox"/> |
| No <input type="checkbox"/> | No <input type="checkbox"/> | No <input type="checkbox"/> | No <input type="checkbox"/> | No <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered Yes to any of the above, please provide full documentation, including **Medical Plans, Behavioural Support Plans, Individual Education Plans and any Learning Adjustment History Plans.** If this application is successful, it is essential that the school be advised promptly of any changes to the needs of the student.

Are there adjustments needed to the school's environment or curriculum to support the student's disability. Yes No

Has the student been involved with a gifted or talented program?
If yes, attach details Yes No

Has the student ever been suspended from school, expelled or refused admission to another school? Yes No

Parent/Carer Declaration

I/We affirm that all the information provided in and with this application is true and accurate. I/We understand that any deliberate misrepresentation made in this Enrolment Form may result in the withdrawal or termination of the enrolment.

In applying to enrol my child at the College I/we accept that he will be educated in the Catholic tradition within a Christian educational environment. I/We accept that participation in the Religious Education program and attendance at masses, retreats and other religious events is compulsory.

I/We accept that support of College staff and cooperation concerning College activities is essential.

I/We accept that we will abide by College policies and procedures as amended from time to time.

I/We accept that participation in camps is compulsory, that membership in College sporting teams takes priority over competing sporting interests and that active participation in co-curricular activities and sports days/events is regarded as an important and required part of the student's curriculum at St Edmund's College.

I/We accept that the College reserves the right to suspend or expel a student for serious or continued breaches of College rules, regulations and/or policies, including conduct which brings into disrepute the good name and reputation of the College. I/We also accept that a student is required to make available for inspection his school bag or locker if directed by the Principal, Deputy Principal or member of school staff to whom this task is delegated.

I/We accept the standards the College sets regarding grooming, uniform and personal presentation, whilst at school, travelling to and from school and whilst wearing the College uniform.

I/We give consent for the College to contact any other Catholic school which my child has previously attended for the purpose of ascertaining my/our fee paying record.

I/We accept that the College does not accept liability for damage or loss of any personal possessions of students and that insurance for students' personal possessions is my/our responsibility.

I/We accept responsibility for the payment of tuition fees and other costs (including additional legal or other costs incurred due to late payment of fees) associated with the education of my/our child as determined and amended from time to time by the College (except where exemptions/remissions have been sought and granted).

I/We accept that we are required to write to the Principal and provide notice of one full school term when withdrawing our son from the College, and that if this notice is not provided a full school term fee will be charged. Special circumstances will be considered.

I/We consent to be contacted by SMS text message/email for non-urgent matters concerning my/our child.

I/We accept and give authorisation to St Edmund's College Canberra, Edmund Rice Australia and/or its approved education partners to take and use any photograph, video footage, sound recording, schoolwork, and achievements of my child in publications, advertising, or communications in perpetuity, worldwide. This includes digital platforms such as the website, social media, broadcast, and print media.

If you wish to opt to NOT have your son included in publications, please tick the box. Please note that this does not include the College Yearbook as a matter of record

In giving consent, the parent/carers acknowledges that the material may continue to be used for a number of years, even after the student has left the College. This may include the student's name. The consent will be amended or revoked only upon a receipt of a written request from the parent/carers of the student.

I/We accept the SEC Parent Code of Conduct and will abide by it.

The latest version is available at <https://sec.act.edu.au/sec-parent-code-of-conduct/>

Parent/Carer 1

Parent/Carer 2

Name/s: _____

Signature: _____

Date: _____

Documentation Required

Please attach the following documents with your application (application will not be processed until all documents are received):

| | | | |
|--|--------------------------|--|--------------------------|
| Photocopy of Birth Certificate | <input type="checkbox"/> | Photocopy of most recent School Report | <input type="checkbox"/> |
| Photocopy of Passport/Citizenship (if born outside Australia) | <input type="checkbox"/> | Photocopy of most recent NAPLAN results | <input type="checkbox"/> |
| Photocopies of Baptism & Confirmation Certificates | <input type="checkbox"/> | Medical/Special Needs documentation (if applicable) | <input type="checkbox"/> |
| Photocopy of current Immunisation Records | <input type="checkbox"/> | Photocopy of court order or related information regarding custody of child (<i>if applicable</i>) | <input type="checkbox"/> |

Collection Notice

This Collection Notice explains in general terms how we protect the privacy of the personal information you provide when you are enrolling your child or your child is enrolled at the St Edmund's College. In reviewing this Collection Notice and providing us with your personal information, you consent to our collection, use and disclosure of that information in the manner set out below, unless you tell us otherwise.

The latest Information Collection Notice can be accessed at <https://sec.act.edu.au/information-collection-notice-students/>

OFFICE USE ONLY

Student Key: _____ Family Key: _____ Student ID: _____

Date Enrolment Form Received: _____ Enrolment Fee Received: Yes No

Principal/Delegate: _____

Accepted: Yes No Comments: _____

Date Letter of Offer Received: _____

Enrolment Process

The enrolment process at St Edmund's College is as follows:

1. Your application will be acknowledged verbally or by email.
2. Further information may be sought if required or if the application is incomplete. The Enrolment Officer will review your application and will advise if the application is to proceed to the interview stage.
3. We will invite you, along with your son/s to attend an interview with the Principal or Head of Junior School. An interview does not mean that a place will be offered. Children from both new and existing St Edmund's College families are required to attend an interview.
4. If a place is not available, your child's name will be held on a wait list unless you notify the College that you do not want to proceed with your application.

If your application for enrolment is successful, a letter of offer will be sent by email shortly after the interview. Acceptance of the offer is required within 14 days and is confirmed by signing the Enrolment Agreement documents that sets out the conditions and expectations.

If your application for enrolment is unsuccessful, you will be notified by email by our Principal or Enrolment Officer as soon as possible.

If you would like any further information please contact the Enrolment Officer on 02 6239 0660 during school hours or via email at enrolments@stedmunds.act.edu.au

Enrolment Fee

Student Name: _____

Year Level: _____ Calendar Year of Entry: _____

Please indicate your preferred method of payment:

Cash

Cheque

Credit Card

Cheques should be made payable to St Edmund's College Canberra.

Visa

MasterCard

Name on Card: _____

Card Number:

Signature: _____ Expiry Date: _____

Applications will be processed once payment has been received, please note this \$100 application fee is non-refundable.

