Court Grammar School

APPLICATION FOR ENROLMENT

Student Information

Name:.....
First Name/s *Surname*

Address:.....Post Code:.....

Date of Birth:..... Gender: M / F Nationality:.....

Application for entry into Year.....in calendar year.....

Present School:.....Current Grade:.....

Country of Birth:..... Place of Birth:.....

Australian Permanent Resident*: Yes / No* Visa Type/Number:.....

Visa Exp. ..... Permission to view VISA documents (through VEVO): *Yes / No*

Aboriginal/Torres Strait Island descent: *Yes / No*

Students First Language:.....

YOUR PRIVACY IS IMPORTANT

The administration of Court Grammar School (CGS) collects information of a personal and sensitive nature as part of the Application process and enrolment of your child/children at the School. The collection and storage of this information is governed by the Privacy Policy set down in accordance with the Privacy Amendment (Private Sector) Act 2000 which regulates the way private sector organisations, including non-government schools and systems, handle 'personal information' of individuals. The information collected may be passed to a third party if required, but only in accordance with the requirement of the Act. The full CGS Privacy Policy is available for the general public on the School's website www.cgs.wa.edu.au

The Schools enrolment practices comply with the School Education Act 1999, the Disability Discrimination ACT 1992 and the Disability Standards for Education 2005.

Office use only:

Application Received:		Student Key:	
Interview Date:		Family Key:	
Interview Time:		House:	
Best Contact No: (Name)		All Relevant Documents:	

Scholarship: YES / NO Type:_____ AFL/W: YES / NO Category:_____

Notes:

Family Information

Mother / Guardian 1

Name:.....

Title *First name* *Surname*

Address:.....Post Code:.....

Country of Citizenship:.....Nationality:.....

Country of Birth:.....Language spoken at home:.....

Religion:.....

Contact Numbers:

Home:.....Work:.....Mobile:.....

Email: (Please print clearly).....

Occupation:.....Employer:.....

Father / Guardian 2

Name:.....

Title *First name* *Surname*

Address:.....Post Code:.....

Country of Citizenship:.....Nationality:.....

Country of Birth:.....Language spoken at home:.....

Religion:.....

Contact Details:

Home:..... Work:..... Mobile:.....

Email: (Please print clearly).....

Occupation:.....Employer:.....

Custody/Guardianship

Name of person/s with legal guardianship of the student

.....

Are there any Parenting or Family Law Court Orders in place for the student: Yes / No

A copy of any court orders needs to be provided

Please indicate who the child lives with most of the time

.....

Balanced care (split) *Please specify days/arrangement*

.....

Other

.....

.....

Alternate Parent/Guardian details

Name:.....
Title *First name* *Surname*

Address:.....Post Code:.....

Relationship to student:.....

Contact Details:

Home:..... Work:.....Mobile:.....

Email: (Please print clearly).....

Occupation:.....Employer:.....

Siblings

Name/s of siblings being enrolled or currently enrolled at Court Grammar School:

Full Name	Date Of Birth	Calendar Year of Entry	School Year of Entry

Please note: A full application must be submitted for each child

Emergency Contact Numbers (In the event primary contacts can not be reached)

1) Name:.....
Address:.....
Telephone:.....
Relationship to student:.....

2) Name:.....
Address:.....
Telephone:.....
Relationship to student:.....

Please note the following information is required by the Australian Government

What is the highest year of primary or secondary school the parents/guardians have completed?

Parent/Guardian 1
- ☐ Year 12 or equivalent
- ☐ Year 11 or equivalent
- ☐ Year 10 or equivalent
- ☐ Year 9 or equivalent or below

Parent Guardian 2
- ☐ Year 12 or equivalent
- ☐ Year 11 or equivalent
- ☐ Year 10 or equivalent
- ☐ Year 9 or equivalent or below

What is the level of the highest qualification the parents/guardians have completed?

Parent/ Guardian 1
- ☐ Bachelor degree or above
- ☐ Advanced diploma/Diploma
- ☐ Certificate I to IV (including trade certificate)
- ☐ No non-school qualification

Parent/ Guardian 2
- ☐ Bachelor degree or above
- ☐ Advanced diploma/Diploma
- ☐ Certificate I to IV (including trade certificate)
- ☐ No non-school qualification

What is the parents/ guardians occupation group?

(Note: 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.)	**Mother/ Guardian 1**	**Father/ Guardian 2**
Senior management, government administration and defence and qualified professionals Group (1)		
Other business managers, art/media/sportsperson and associated professionals (2)		
Tradesmen/women, clerks and skilled office, sales and service staff (3)		
Machine operators, hospitality staff, assistants, labourers and related workers (4)		
Not been in paid work for the last 12 months (8)		

Student individual needs

Photographic

I agree to the videoing or photographing of my child during school activities for use by Court Grammar School in educating students and promoting the School. I also agree to the publication of images or samples of work in ways including, but not limited to, web sites or intranet web sites of Court Grammar School, school newsletters (print and online), magazines and local newspapers, subject to the conditions set out above. I will notify the School if I decide to change this consent.

☐ Yes ☐ No

Transport

Will your student require the use of a CGS bus service? (Bus routes are available from our website)

☐ Baldivis ☐ Oakford ☐ Warnbro

School Social Worker

☐ Permission to meet with School Social Worker

Medical information

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.

Medicare Details

Number:..... Exp. Date:.....Position on card:.....

Private Health

Private Health Insurance: Yes / No Name of provider:.....

Policy Number:.....

Panadol

Permission to administer Panadol: Yes / *No*
(please note you will also be contacted if Panadol is to be administered)

Ambulance

Ambulance Cover: Yes / No
If there is a medical emergency parents/responsible persons are expected to meet the cost of ambulance conveyance.

Doctor

Doctor's Name:.....

Medical Centre Address:.....

Phone Number:.....

Do you give permission to call the Doctor named above in case of an emergency Yes / No

Medical

Does your child have a medical condition? Please tick all of the boxes that apply.

☐ Allergies
☐ Anaphylaxis
☐ Asthma
☐ Other
☐ Coeliac
☐ Diabetes
☐ Unspecified

☐ Eczema
☐ Heart disorder
☐ Scoliosis
☐ Dyslexia
☐

If you have ticked any of the boxes above please provide further information.

.....

Does your child need to take any prescribed medicines at school? *Yes / No*

If yes, please specify: .....

Do any of these medical conditions require a Medical Action Plan? (If yes please attach a copy of this plan)

☐ Yes ☐ No

Please provide copies of any documentation which exists in relation the medical condition/s listed. These will help us provide appropriate care for your child.

Disability

Does your child have a known disability (intellectual, physical, autism spectrum disorder, hearing, vision, emotional behaviour disorder, speech and language impairment)?
Please tick all of the boxes that apply.

☐ Physical
☐ Speech
☐ Sensory – Vision
☐ Behaviour/Safety
☐ Sensory – Hearing
☐ Communication
☐ Psychological/Cognitive Needs or concerns

Nature of disability .....

Diagnosed by (name of specialist).....

Date of diagnosis .....

Additional information

.....

.....

Is your child toilet independent? Yes / No

If no, please explain: .....

Do you consent to us sharing this information with the Association of Independent Schools of Western Australia (AISWA) and the Nationally Consistent Collection of Data (NCCD) for funding purposes ?

☐ YES ☐ NO

Please provide copies of any documentation which exists in relation the disability condition listed above. These reports are required for planning and to access funding.

Please keep us up to date with copies of reports as your circumstances change.

Financial Details

Please supply details of person/s or organisation responsible for paying fees

1) Name:..... Relationship to student:.....
   Responsible for what % of fees:.....
   Billing email address:.....
   Post Code:.....
   Mobile phone:.....Home phone:.....

2) Name:..... Relationship to student:.....
   Responsible for what % of fees:.....
   Billing email address:.....
   Post Code:.....
   Mobile phone:.....Home phone:.....

Please read and initial the terms and conditions and submit this application to the school either in person, via email or fax with the application fee of $55.00

Post: Locked Bag 1 Mundijong, WA 6123

Email: school@cgs.wa.edu.au Fax: 9525 9130

TERMS AND CONDITIONS		
		Initial
1.	I/We have read and fully understand the publication entitled "Fees and Charges Information".	
2.	I/We accept admission of the student to Court Grammar School (Inc.) and agree to pay fees and charges in respect of the student as set out in the document: "Fees and Charges Information" published annually by the School.	
3.	I/We agree to be solely and jointly responsible for the payment of all fees and charges with all signatories to this application for admission.	
4.	I/We agree to be bound by these Conditions of Admission which form part of my/our agreement with Court Grammar School (Inc.) in respect of the student.	
5.	I/We agree to be bound by resolutions made by the Board of Court Grammar School (Inc.) in regard to the conduct of the School and to fully support the objectives and programmes of the School and its Christian ethos.	
6.	I/We agree to be bound by the School Policies and Practices, as determined by the Principal.	
7.	I/We agree that the Principal will be **given a full school term's notice in writing** prior to the withdrawal of a student from the School. In default of such notice a quarter of the annual tuition fee will be payable in lieu of notice.	
8.	I/We understand that any personal property brought on to the School premises may be searched, at the request of the Principal.	
9.	I/We acknowledge that the School may at any time upon notice to me/us terminate the enrolment.	
10.	I/We have answered all the questions in this Application for Enrolment Form truthfully and to the best of my/our knowledge and accept that failure to answer any question or the provision of false information may jeopardise the enrolment of my/our child.	

Mother/Parent 1/Guardian Signature:.....Date:.....

Father/Parent 2/Guardian Signature:.....Date:.....

The Court Grammar School's enrolments officer with process your application and be in contact regarding the next step in the enrolment process. The submission of this application does not guarantee a place a Serpentine Jarrahdale Grammar School.

STUDENT DOCUMENT CHECK LIST
The following documents must accompany this application

- ☐ Birth Certificate
- ☐ Visa Information (if applicable)
- ☐ Immunisation History Statement (If born in Australia, please obtain from Australian Childhood Immunisation Register either online or at nearest Medicare office)
- ☐ Latest School Reports
- ☐ All Naplan Reports
- ☐ Medical and/or Disability specialist reports
- ☐ Medical Action plan (if applicable)

COURT GRAMMAR SCHOOL ENROLMENT AGREEMENT

NOTE: It is essential both parents/guardians and students read the following agreements prior to submitting this application for consideration. THEY ARE ONLY TO BE SIGNED AT THE ENROLMENT INTERVIEW.

PERIOD OF VALIDITY

This agreement is valid from the date of commencement of attendance at the School to the date of formal graduation, withdrawal or dismissal from the School.

STAFF UNDERTAKING

(i) The Principal undertakes, on behalf of the School staff, to provide good quality teaching and pastoral care to each student.

(ii) Given the goodwill, good behaviour and co-operation of the student, the Principal further guarantees that the School staff will work, within the resource limitations of the School, to enable each student to reach their highest possible level of achievement in all courses undertaken.

Signature (Principal):..... Date :.....

STUDENT UNDERTAKING

I shall try to do my part in building a caring school family particularly with the Respect ethos I shall :

(i) act with respect towards School staff and students;
(ii) try to achieve my personal best in my studies;
(iii) behave in public in such a way as to uphold the good name of the School;
(iv) strive to develop appropriate Work Attitudes and Habits;
(v) observe the School Classroom and Travel Codes of Behaviour;
(vi) make myself available to represent the School in sporting and cultural activities and to attend training sessions/rehearsals;
(vii) observe the uniform, hair and jewellery standards of the School; and
(viii) comply with all School regulations (Student Handbook).

I shall refrain from the following actions at School, at School functions and while travelling to and from such venues :

(i) the possession or use of illicit drugs;
(ii) the possession or use of alcohol, tobacco, or unauthorised prescription drugs;
(iii) the possession or use of a weapon or implement that may inflict harm;
(iv) bullying, fighting or verbal intimidation;
(v) vandalism or theft;
(vi) offensive language or possession of offensive literature;
(vii) disruption of lessons through inappropriate behaviour; and
(viii) unauthorised absence from class or school.

I ..... understand that I must follow the School rules and regulations. If I do not do so, the Principal may suspend or end my enrolment at the School without notice.

Signature (Student): ..... Date :.....

PARENTS/ GUARDIANS UNDERTAKING

I/We undertake :

(i) to support all School regulations and policies as set out in the Student's Undertaking and in the Student Handbook;
(ii) to accept the Principal's ruling in relation to my son/daughter breach of the Enrolment Agreement to pay one terms fees in lieu of notice of withdrawal of a student;
(iii) to pay the School fees within fourteen days of receiving your account, except where a special arrangement has been made with the School. In the event of outstanding fees having to be collected, I understand that I would be liable for any legal costs and commissions incurred.
(iv) agree and support the values of the CGS Code of Ethical Conduct and Conduct Statements.

Signature (Mother/Guardian 1) ..... Date :.....

Signature (Father/Guardian 2) ..... Date :.....

FOR OFFICE USE ONLY

ENROLMENTS

- ☐ Birth Certificate
- ☐ Visa Information
- ☐ Immunisation History
- ☐ Latest School Reports
- ☐ Naplan Reports
- ☐ Medical and/or Disability specialist reports
- ☐ Medical Action plan (if applicable)
- ☐ **SENT TO NCCD MANAGER**

DATE:_____

NCCD MANAGER

- ☐ Latest School Reports
- ☐ Naplan Reports
- ☐ Medical and/or Disability specialist reports
- ☐ Medical Action plan (if applicable)
- ☐ Medical and/or Disability specialist reports
- ☐ **SENT TO ENROLMENTS**

DATE:_____