

SCHOOL ENROLMENT FORM

STUDENT DETAILS

Surname	
Legal Surname on birth certificate (if different from above)	
Previous Surname (if applicable)	
1 st Name	
2 nd and 3 rd Name	
Preferred Name	
Current Year Level	
Date of Birth	
Gender	[] Male [] Female [] Indeterminate / Intersex
Residential Address	Postcode:
Telephone	Home: _____ Mobile: _____ Student's Mobile: _____
Siblings - names of brothers and sisters attending this school	

OFFICE USE ONLY

Student's official documentation sighted (date): _____ [] Yes [] No

[] Birth certificate [] Passport [] Travel documents

Student's Residency Status [] Local [] Permanent Resident

Entry Date: _____

Publications/Internet Permission Form completed [] Yes [] No

Immunisation records provided [] Yes [] No

Have relevant careplans been issued to the parent ? [] Yes [] No Date: _____

Entered on School Information System by: _____ on (date): _____

PARENT / GUARDIAN DETAILS

Child lives with

Parent/Guardian 1 [] Parent/Guardian 2 [] Both Parents [] Neither Parent []

Shared Care [] please specify (eg 50% with each parent) _____

Parent / Guardian 1 Details		<i>This person will be the family mail marker and will be the 1st contact in an emergency</i>	
Title	First Name	Surname	
Please indicate your relationship to the student :			
Residential		Postal Address (if different from student's residential address)	
Mobile Phone			
SMS text messages will be sent to this number			
Email			
Occupation/Workplace			Work Phone
Do you mainly speak English at home? YES NO			
If No , what language do you speak at home ? (other than English) (If more than one language, indicate the one that is spoken most often)			
The Department of Education has requested this information from you (refer next page)			
What is the highest year of primary or secondary school you have completed?		What is the level of the highest qualification you have completed?	
Year 12 or equivalent <input type="checkbox"/>		Bachelor degree or above <input type="checkbox"/>	
Year 11 or equivalent <input type="checkbox"/>		Advanced diploma/Diploma <input type="checkbox"/>	
Year 10 or equivalent <input type="checkbox"/>		Certificate I to IV (including trade certificate) <input type="checkbox"/>	
Year 9 or equivalent or below <input type="checkbox"/>		No non-school qualification <input type="checkbox"/>	
(if you did not attend school, mark 'Year 9 or equivalent or below')			
What is your occupation group? (Write 1, 2, 3, 4 or 8)		Please select the appropriate parental occupation group from the list provided below. If you are not currently in paid work, but have had a job in the last 12 months please use your last occupation. If you have not been in paid work in the last 12 months, enter '8' above.	

Parent / Guardian 2 Details		<i>Please indicate whether this person also requires mail YES NO</i>	
Title	First Name	Surname	
Please indicate your relationship to the student:			
Residential Address		Postal Address (if different from residential address)	
Mobile Phone			
Please indicate whether this person requires SMS text messages YES [] NO []			
Email			
Occupation/Workplace			Work Phone
Do you mainly speak English at home? YES [] NO []			
If No , what language do you speak at home ? (other than English) (If more than one language, indicate the one that is spoken most often)			
The Department of Education has requested this information from you (refer next page)			
What is the highest year of primary or secondary school you have completed?		The Department of Education has requested this information from you. What is the level of the highest qualification you have completed?	
Year 12 or equivalent <input type="checkbox"/>		Bachelor degree or above <input type="checkbox"/>	
Year 11 or equivalent <input type="checkbox"/>		Advanced diploma/Diploma <input type="checkbox"/>	
Year 10 or equivalent <input type="checkbox"/>		Certificate I to IV (including trade certificate) <input type="checkbox"/>	
Year 9 or equivalent or below <input type="checkbox"/>		No non-school qualification <input type="checkbox"/>	
(if you did not attend school, mark 'Year 9 or equivalent or below')			
What is your occupation group? (Write 1, 2, 3, 4 or 8)		Please select the appropriate parental occupation group from the list provided below. If you are not currently in paid work, but have had a job in the last 12 months please use your last occupation. If you have not been in paid work in the last 12 months, enter '8' above.	

NORTH ALBANY SENIOR HIGH SCHOOL

Parental Occupation Groups

GROUP 1	GROUP 2	GROUP 3	GROUP 4
Senior management in large business organisation, government administration & defence, and qualified professionals	Other business managers, arts/media/sports persons and associate professionals	Tradesmen/women, clerks and skilled office, sales and service staff	Machine operators, hospitality staff, assistants, labourers and related workers
<p>Senior executive/manager/department head in industry, commerce, media or other large organisation</p> <p>Public service manager (section head or above), regional director, health/education/police/ fire services administrator</p> <p>Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]</p> <p>Defence Forces Commissioned Officer</p> <p>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</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing professional.</p> <p>Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]</p> <p>Air/sea transport [aircraft/ships captain/officer/pilot, flight officer, flying instructor, air traffic controller]</p>	<p>Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business.</p> <p>Specialist manager [finance/engineering/production/ personnel/industrial relations/ sales/marketing]</p> <p>Financial services manager [bank branch manager, finance/ investment/insurance broker, credit/loans officer]</p> <p>Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]</p> <p>Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/ woman, coach, trainer, sports official]</p> <p>Associate professionals generally have diploma/technical qualifications and support managers and professionals</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional.</p> <p>Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]</p> <p>Defence Forces senior Non-Commissioned Officer.</p>	<p>Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.</p> <p>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]</p> <p>Skilled office, sales and service staff</p> <p>Office [secretary, personal assistant, desktop publishing operator, switchboard operator]</p> <p>Sales [company sales representative, auctioneer, insurance agent/ assessor/loss adjuster, market researcher]</p> <p>Service [aged/disabled/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]</p>	<p>Drivers, mobile plant, production/processing machinery and other machinery operators</p> <p>Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]</p> <p>Office assistants, sales assistants and other assistants</p> <p>Office [typist, word processing/data entry/business machine operator, receptionist, office assistant]</p> <p>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]</p> <p>Assistant/aide [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]</p> <p>Labourers and related workers</p> <p>Defence Forces ranks below senior NCO not included in other groups</p> <p>Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]</p> <p>Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]</p>

These categories have been determined nationally and are designed as broad occupational groupings. All Australian states and territories use the same categories.

Please select the appropriate parental occupation group from the list above.

- If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation.
- If you have not been in paid work in the last 12 months, enter '8' instead.

EMERGENCY CONTACT DETAILS (Other than PG1 or PG2)

1	Emergency Details		Please indicate relationship to the student	
	Title	First Name	Surname	
	Preferred Contact Phone Number/s			

2	Emergency Details		Please indicate relationship to the student	
	Title	First Name	Surname	
	Preferred Contact Phone Number/s			

Please advise the school if there are any other contacts you would like recorded.

ADDITIONAL INFORMATION

Religion		First Language													
Main language (other than English) spoken at home															
Is the student of Aboriginal or Torres Strait Islander origin? Please indicate [✓]		<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">Aboriginal</td> <td style="width: 10%;">Yes []</td> <td style="width: 10%;">No []</td> <td style="width: 20%;"></td> </tr> <tr> <td>Torres Strait Islander (TSI)</td> <td>Yes []</td> <td>No []</td> <td></td> </tr> <tr> <td>Both Aboriginal and TSI</td> <td>Yes []</td> <td>No []</td> <td></td> </tr> </table>		Aboriginal	Yes []	No []		Torres Strait Islander (TSI)	Yes []	No []		Both Aboriginal and TSI	Yes []	No []	
Aboriginal	Yes []	No []													
Torres Strait Islander (TSI)	Yes []	No []													
Both Aboriginal and TSI	Yes []	No []													
Access Restriction Is this student subject to Access Restriction? Please indicate [✓] YES [] NO [] <i>If 'yes' please attach supporting documentation at time of enrolment.</i>															
Court Orders Is this student subject to any court orders in respect of their care, welfare and development? Please indicate [✓] YES [] NO [] <i>If 'yes' please specify and attach supporting documentation at time of enrolment.</i>															
Department for Child Protection and Family Services Is this student in the care of the Department for Child Protection and Family Services (CPFS)? Please indicate [✓] YES [] NO [] <i>If 'yes' please specify the name of the CPFS Case Manager, contact phone number, email and address:</i> <div style="border-bottom: 1px solid black; height: 1.2em; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-top: 5px;"></div>															

CITIZENSHIP:	Australian	Yes	No	If No Please specify
PERMANENT RESIDENT:	YES []	NO []		TEMPORARY RESIDENT: YES [] NO []
Visa Sub Class Number		Visa Sub Class Number		
Visa Expiry Date		Visa Expiry Date		
Date Entered Australia		Date Entered Australia		

Birth Certificate and Immunisation History Statement (a copy must be provided on enrolment): <i>(and/or passport or travel documents)</i>	YES [] NO []	Date sighted:
In which country was the student born? Australia Other – please specify:		

IMMUNISATION / MEDICAL DETAILS

It is an enrolment requirement that parents provide an Immunisation History Statement to the school. The Australian Childhood Immunisation Register (ACIR) records the immunisation history of children up until they turn 7 years old. If parents do not have a copy of their child's early childhood immunisation history, they can call the ACIR on 1800 653 809 or through humanservices.gov.au.

Please attach a copy of your child's ACIR (Australian Childhood Immunisation Register) immunisation history statement
(If there is a medical emergency, parents or guardians are required to meet the cost of the ambulance)

Do you have ambulance cover? YES [] NO [] Ambulance Cover Insurance Provider: _____

Permission to call Doctor [] Permission to Administer First Aid [] Medic Alert []

Medical Practice Name: _____ Doctor: _____

Medicare Number: _____ Ref: _____ Expiry Date: _____

List any essential information that could affect your child in an emergency situation .e.g allergy to Penicillin.

INFORMED CONSENT

Your child's health care information will be shared with staff on a "need to know" basis unless otherwise stated. Do you give permission for the school to share your child's health care information YES NO []
If **NO** who do you give permission to _____

NOTE: If your child is enrolled in an alternative education program, this includes the transfer of their health care information to the principal or manager of that program. If not, and the information is to be restricted, who can be informed of your child's health care information? _____

HEALTH CONDITIONS

Below please indicate your child's conditions(s) which require the support of school staff.

Does your child have one or more health condition/s that will require support from school staff? YES [] NO []

If Yes please complete the following section below

Please indicate any disability or medical conditions [✓]

Severe Allergy/Anaphylaxis (Form 5)	YES []	NO []	If Yes please specify: _____
Minor and Moderate Allergy (Form 4)	YES []	NO []	If Yes please specify: _____
Diabetes (Form 6)	YES []	NO []	
Seizures (Form 7)	YES []	NO []	
Asthma (Form 8)	YES []	NO []	
Activities of Daily Living (Form 9)	YES []	NO []	
Other Conditions or Needs	YES []	NO []	If Yes please specify: _____

Has your child's Medical Practitioner provided a health care plan to assist the school to manage the condition? YES [] NO [] If Yes please specify : _____

ADMINISTRATION OF MEDICATION

Written authorisation must be provided for staff to administer any form of medication at school.
For Long Term Medication: complete the Medication section of the relevant Health Care Plan.
For Short Term Medication: request an Administration of medication form to complete and return to the school.

Note: All medication required must be supplied by parents/carers to the school.

Is your child presently taking medication YES NO If YES: Long Term or Short Term

Does your child need to take medication at school? YES NO

Please advise further: _____

Does your child self-administer medication? YES NO

CONSENT FOR PHOTO IDENTIFICATION ON YOUR CHILD'S HEALTH CARE PLAN

If your child has a condition where an emergency may occur, please indicate whether you give consent for staff to place your child's medical details and photo on file to provide immediate identification. This will be on a need to know basis.

I give permission for my child's medical details and photo to be on file for staff to view in an emergency. YES [] NO []

If **NO** please advise who can view your child's medical details and photo _____

If **yes** please provide the relevant health care plan/s.

MEDIC ALERT INFORMATION

Does your child have a Medic Alert Bracelet or pendant? YES [] NO []

If yes provide details:

DISABILITY INFORMATION

DOES THE STUDENT HAVE A DISABILITY YES [] NO []

If YES, please specify Disability:

Please indicate where you have documentation about your child's disability in any of the following areas. Copies of this documentation will be required for school records.

Autism Spectrum Disorder

Deaf or Hard of Hearing

Specific Speech Language Impairment

Intellectual Disability

Severe Mental Disorder

Global Developmental Delay (prior to age 6)

Vision Impairment

Physical Disability

MOVEMENT HISTORY

Previous School: _____ OR

If previously enrolled in Home Education, specify the Education District:

Hostel Student YES [] NO []

Reason for moving:

Is your child currently under suspension from a

YES [] NO []

school? If yes, name of school:

Has your child ever been excluded from a school?

YES [] NO []

If yes, name of school:

SCHOOL UNIFORM

North Albany Senior High School has a School Uniform Policy for all students attending this school.

In enrolling my child at North Albany Senior High School, I agree to support the school by ensuring that my child wears the correct school uniform at school, and when participating in school related activities.

Parent - Yes, I agree to support the school by ensuring that my child conforms to wearing the school uniform.

☐

Student - Yes, I understand the above requirement and agree to abide by it.

STUDENT TRAVEL PERMIT – SMARTRIDER CARD WITH PHOTO

The Public Transport Authority (PTA) advises parents that students will require a student Smartrider card with student's photo to access concession travel on TransPerth bus, rail and ferry services, and TransWA country rail services. In order to issue the card in the first instance the PTA requires that parents/guardians give their permission to schools to provide student details and photo to the PTA, for the purpose of registering the student for concession travel. The card is linked to student printing accounts, can be used for borrowing from the library and resource lending at no cost to the parent. There is a \$5.00 fee from Smartrider to replace the card if lost or damaged.

- ☐ **Yes** I give consent for my child's details to be released to the PTA for the purpose of issuing a Smart Rider card.
No I do not give consent.

UNIQUE STUDENT IDENTIFIER (USI) CONSENT

It is an Australian government requirement for all students undertaking nationally recognised training to obtain a Unique Student Identifier (USI). All Vocational Education and Training (VET) training courses, including those delivered at high schools, will require a USI in order for students to enrol. The USI stays with the student for life and allows them access to their qualifications and training records at any time in the future.

- Yes** I consent to North Albany Senior High School creating a Unique Student Identifier (USI) for my child.
No I do not give consent.

SCHOOL MOBILE PHONE & SMALL ELECTRONIC DEVICES

North Albany Senior High School has a mobile phone & small electronic device policy for all students attending this school which is outlined in the **Parent Guide** provided with this enrolment pack, or accessed from our website at www.nashs.wa.edu.au. The use of mobile phones and electronic devices at NASHS will be banned from the first bell to the last bell of the day. This includes break times. In enrolling my child at North Albany SHS, I agree to support the school by ensuring that my child follows the school mobile phone & small electronic devices policy.

Yes, I have read the school mobile phone & small electronic devices policy.

My child needs to use his/her mobile phone or small electronic device due to a health condition, as part of a school approved documented health care plan approved by the school nurse.

STUDENT ACCESS TO TECHNOLOGY, INTERNET AND THIRD PARTY SERVICE PROVIDERS OF ONLINE APPLICATIONS AT NORTH ALBANY SHS

All government schools in WA are required to have an **Acceptable Usage Agreement**. An **Acceptable Usage Agreement** covers person-to-person, email communication, use of material accessed through the Internet and network, and the publication of new materials on the Internet and online services. All parents/guardians and students are required to read the **Acceptable Usage Agreement before** students are provided with access to the NASHS computer network. A copy of the **Acceptable Usage Agreement** is in the appendix of the **Parent Guide** provided with this enrolment pack, or accessed from our website at www.nashs.wa.edu.au.

At NASHS we encourage and promote our network as a safe and secure place for students to work and learn. Students are reminded when logging on to computers about responsible use of email, the Internet and the requirement to abide by copyright law.

The use of online educational resources and cloud based storage are used by teachers across Western Australia to improve student learning outcomes. Our school and teachers make decisions about the best technology to meet the needs of our students. From time to time this may include the need to utilise third party application provider/s. Prior to your child having access to the online network at NASHS you are required to complete an online consent form for Third Party Services. Please indicate below an option you would like to choose.

Please email me the electronic online consent form to complete.

Please mail me a paper copy to complete

No I do not give consent. (By not completing the form or not consenting your child will not be granted internet access Beyond the school websites).

MEDIA CONSENT

Children's images and/or their work are often published to recognise excellence or effort and may appear in newsletters, school website, school social media, newspapers, on the internet, or on film or video. While we don't often include student names, sometimes we do. No contact details are ever provided. Work/images captured by the school will be kept for no longer than is necessary for the purposes outlined above and will be stored and disposed of securely.

Parent I agree to the videoing or photographing of my child and my child's work during school activities for use by the school and the Department of Education in the ways stated in the "Permission to Publish Students Images and Work for School Purposes" document enclosed in this enrolment package.

Student I agree to the videoing or photographing of me and my work during school activities for use by the school and the Department of Education in the ways stated in the "Permission to Publish Students Images and Work for School Purposes" document enclosed in this enrolment package.

No I do not give consent

School Code: Permission to Publish (UDI: F)

VIEWING CONSENT

Children often watch videos / DVDs / television documentaries as part of their learning. Almost always these are 'G' rated and don't require consent. Occasionally a program has a 'PG' rating for which we need parental permission. For anything with a higher rating than 'PG' – you will be advised by the teacher.

Yes I consent to my child viewing items with a 'PG' rating if deemed suitable by the teacher and school administration.

No I do not give consent.

OTHER INFORMATION

Please provide details here of any other information you would like noted

PARENT/GUARDIAN DECLARATION

I declare that the information provided on this form is true

Name of person enrolling student		Signature	
Student Signature		Date	

Please return this form to northalbany.shs@education.wa.edu.au