

APPLICATION FOR ENROLMENT



Berwick: (03) 9702 6588 Officer: (03) 5943 3600 Beaconsfield: (03) 9707 3111
Postal Address: P.O Box 85, Beaconsfield 3807
Email: enrol@sfx.vic.edu.au Website: www.sfx.vic.edu.au

1. Student details

Application to enter year level	<input type="text"/>	Year	<input type="text" value="YYYY"/>	Student No. (Office Use Only)	<input type="text"/>		
Family name / surname	<input type="text"/>			Preferred Campus (subject to availability)	<input type="text"/>		
Given name(s)	<input type="text"/>			Sex: Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Preferred name	<input type="text"/>			Date of birth	<input type="text" value="DD/MM/YYYY"/>		
Send mail to (Name and address)	<input type="text"/>						
	<input type="text"/>			Post Code	<input type="text"/>		
Applicant's home telephone number	<input type="text"/>						
The applicant lives with:							
Both parents	<input type="checkbox"/>	Mother	<input type="checkbox"/>	Father	<input type="checkbox"/>	Other	<input type="text"/>
Is there any court order (pending) or agreement in relation to this applicant?							
No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	(Please attach documentation if order/agreement is in place translated into English)			
In which country was the student born?	Australia	<input type="checkbox"/>	Other (specify)	<input type="text"/>			
Do you hold a current Visa for entry to Australia?	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	If no, please provide a copy of your child's Australian Citizenship Certificate or Australian Passport		
If yes, please complete the following and attach a copy of VISA:							
Passport number	<input type="text"/>			Date of arrival in Australia	<input type="text" value="DD/MM/YYYY"/>		
Visa Number	<input type="text"/>	Visa subclass	<input type="text"/>	Visa expiry date	<input type="text" value="DD/MM/YYYY"/>		

2. Religion of Student

Religion of Student	<input type="text"/>									
Sacraments received in the Catholic tradition	Catholic Baptism*	<input type="checkbox"/>	Reconciliation	<input type="checkbox"/>	Communion	<input type="checkbox"/>	Confirmation	<input type="checkbox"/>		
* It is essential to attach a copy of the child's Baptismal and Birth Certificates										
To which Catholic Parish does the student belong (Please tick the appropriate box)										
Narre Warren	<input type="checkbox"/>	Koo Wee Rup	<input type="checkbox"/>	Berwick	<input type="checkbox"/>	Pakenham	<input type="checkbox"/>	Iona/Maryknoll	<input type="checkbox"/>	Not an active member of any Parish
Non-Catholic	<input type="checkbox"/>	Other (specify)	<input type="text"/>							

3. Academic records

School/Kindergarten currently attending	<input type="text"/>						
Year level of commencement	<input type="text"/>	Current year level	<input type="text"/>	First year of school in Australia	<input type="text"/>		
Name of previous school attended	<input type="text"/>			Victorian School Number (VSN)	<input type="text"/>		
Do you give St Francis Xavier College permission to contact current/previous School?	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>			

Office Use Only

Date Received:	Enrolment Fee Paid	YES	NO	Receipt Number
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4. Family Information

Students from your family enrolled at St Francis Xavier College	Year Level	Current Student	Previous Student	College House Group
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

5. Parent details

Parent 1 / Guardian 1 - Fee Payer

This contact information should be completed by the person responsible of school fees - normally the Mother or Father

Dr Mr Mrs Ms Miss Other Is this contact a residential parent/guardian? Yes No

Family name / surname Given names

Relationship to applicant Date of Birth Country of Birth

Residential Address Post Code

Postal Address Post Code

Home Phone Mobile

Business Fax

Email Address

(An email address must be supplied. The College frequently communicates with parents via email)

Employer Occupation

Religion Language spoken at home Year of arrival in Australia

Contact notes (Please note any details of which the College should be aware)

Parent 2 / Guardian 2

This contact information should be completed by the Mother, Father or guardian who is not the fee payer.

Dr Mr Mrs Ms Miss Other Male Female

Family name / surname Given names

Relationship to applicant Date of Birth Country of Birth

Residential Address Post Code

Postal Address Post Code

Home Phone Mobile

Business Fax

Email Address

Employer Occupation

Religion Language spoken at home Year of arrival in Australia

Contact notes

6. Emergency Contact

Please provide details of a person (other than parents) who may be contacted in case of an emergency. Please be assured that every attempt will be made to contact the parents prior to contacting this person.

Name

Relationship to Child Male Female

Home phone Business phone

Mobile phone

7. Medical Information

Usual Doctor Doctor's phone number

Does your child have a problem with any of the following? Hearing Speech Vision Mobility

Details

Does your child have any of the following health conditions? (Please tick and give details)

Allergy Asthma Blood Disorders Diabetes Epilepsy Headaches/Migraines Heart Problems Other

Details

Does your child have special needs? Emotional Psychological Physical Educational

Does your child receive funding? Has your child ever received funding?

*It is essential to planning that you inform the College of ANY special needs your child may require.
Failure to supply this information on the initial application may result in a successful enrolment being jeopardised.*

Does your child's health condition ever become an emergency? No Yes

If yes, please describe the signs and symptoms and emergency treatment recommended by your doctor

Does your child have regular medication for his/her health problem? No Yes

If yes, please give details

Date of last Tetanus Booster Immunisation Medicare Number

If you are a member of a Health Fund please give fund name Membership number

Is anaesthetic allowed? No Yes Unsure Do you have Ambulance cover? No Yes

Do you hold a Healthcare Card? No Yes Healthcare Card number

8. Further Information

Further comments (Please explain any further information of which the College should be aware)

Reason for transferring to St Francis Xavier College (Applicable for those enrolling in Years 8-12 only)

9. Supplementary Information

This is a collection of Nationally Consistent Definitions of student background characteristic information for National Reporting by the Government. This is information is to be combined with student outcome data for the various national tests, aggregated and used for national reporting purposes. **Information given here will not affect the outcome of your child's application.**

For more information on the National Goals, visit <http://www.mceetya.edu.au>

Does the student speak a language other than English at home? (If more than one language is spoken, indicate the language is spoken most often)

No, English only Yes, Other - please specify

Is the student of Aboriginal or Torres Strait Islander origin?

No Yes, Aboriginal Yes, Torres Strait Islander

Does the Mother/guardian or Father/guardian speak a language other than English at home?

(If more than one language, indicate the language that is spoken most often)

Mother / Parent 1 / Guardian 1

Father / Parent 2 / Guardian 2

No, English Only

Yes, other - please specify

What is the highest year of schooling the parents/guardians have completed?

*Tick only one box in each column.
(For persons who have never attended school, mark Year 9 or equivalent or below)*

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?

Tick only one box in each column.

Bachelor degree or above

Advanced diploma/diploma

Certificate I to IV
(Including trade certificate)

No non-school qualifications

What is the occupation of the parents/guardians?

If person is not currently in paid work but has had a job in the last 12 months, please use the person's last occupation. If the person has not been in paid work in the last 12 months, enter 'N'.

Occupation Group Letter
Please select the appropriate Group letter from over page.

Occupation Group

Please select the appropriate group from the following list. If you are not currently in paid work but have had a job in the last 12 months, or have retired in the last 12 months, please use your last occupation to select from the list. If you have not been in paid work for the last 12 months, enter 'N' into the Group box on the previous page.

LIST OF PARENTAL OCCUPATIONS:

OCCUPATION 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 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 a 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 professionals*
- *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]

OCCUPATION GROUP B

Other business manager, arts/media/sports persons 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, proof reader, 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

OCCUPATION GROUP C

Tradesmen/women, clerks and skilled office, sales and service staff

Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.

Clerks [bookkeeper, bank / PO clerk, statistical / actuarial clerk, accounting / claims / audit clerk, payroll clerk, recording / registry / filing 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 research]
- *Service* [aged / disabled / refuge / child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer / supervisor]

OCCUPATION 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 / teachers 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]

10. Conditions of Enrolment

Each enrolment application must be accompanied by a non-refundable Enrolment Fee of \$100.00. Students are accepted into the College in the following order: Catholics from Feeder Schools, Catholics from other schools, Catholic siblings, non-Catholic siblings, non-Catholic students, out of zone students. A Statement of Account for term fees will be issued at the beginning of the year and arrangements for the method of payment must be made with the College. Fee enquiries should be directed to the Business Manager or College Accountant.

Note: *A Baptismal Certificate and Birth Certificate **MUST** be included with this enrolment for it to be processed.

Payment Options	<input type="checkbox"/> Cash	<input type="checkbox"/> Cheque (Payable to St Francis Xavier College)	<input type="checkbox"/> Credit Card (see below)
Credit Card information	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	<input type="checkbox"/> Amex
Credit Card number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Card Holder	<input type="text"/>		Expiry Date <input type="text"/>

11. Please return the following documents

- Completed and signed Enrolment Application form (this form)
- Application fee of \$100 (non-refundable)
- Copy of birth certificate or passport with birth date (translated to English)
- Copy of Baptismal Certificate (if child has been baptised)
- Copy of Australian visa (overseas students, if already received)
- Copy of Australian Citizenship Certificate or Australian Passport (if applicable)
- Copy of most recent school report (translated to English)
- Copy of most recent NAPLAN test report
- Copy of specialists' reports (if any)

12. Declaration statement

Medical Declaration

In the event of an emergency, I/we authorise the Principal and/or College Staff to arrange, where it is in impracticable to communicate with me/us, for my son/daughter to receive such medical and/or surgical treatment that may be deemed necessary. I/we authorise the College to contact a doctor and to call an Ambulance. **I/we authorise the College to access the school counsellor if necessary.**

General Declaration

I/we understand the conditions above and note that the school regulations regarding conduct, uniform, dress and participation in College activities including camps, excursions, etc., must be observed and strongly supported by parents. **I/we have read and understand the information on the Privacy Statement as described in the Prospectus.**

Signed	<input type="text"/>	<input type="text"/>
	(Parent or Guardian's signature)	(Parent or Guardian's name in full)
Signed	<input type="text"/>	<input type="text"/>
	(Parent or Guardian's signature)	(Parent or Guardian's name in full)
Date	<input type="text"/>	<input type="text"/>