

APPLICATION FOR ENROLMENT

St Joseph's Central School, Blayney



Student Information

To be enrolled in Year - K 1 2 3 4 5 6 7 8 9 10 *(please circle)*

Commencement Date:

Surname: Christian Names:

Address:

Phone Number: Mobile:

Date of birth: *(copy of birth certificate must be attached)*

Child's Religion: Gender: Male/Female *(please circle)*

Is your child of Aboriginal or Torres Strait Island descent?

Previous school attended:

Sacraments Received	Date	Parish
Baptism
Reconciliation
First Eucharist
Confirmation

(copies of supporting documents/certificates must be supplied)

Current Parish:

Name of other children attending any school in the Bathurst Diocese *(discounts on fees may apply)*

Name	School	Class
1
2
3
4

Child's name:

Emergency Contacts

Name	Phone number	Relationship to family
1
2

Medical Details

Doctor's Name: Phone Number:

In the case of emergency care and parents cannot be contacted, a Medicare Number needs to be provided. This information will remain confidential.

Medicare Number:

Immunisation

Before your child's enrolment is accepted, the school will need to sight their immunisation certificate. In the event that your child has not yet turned five, a partially completed immunisation certificate will need to be viewed by the school. The fully completed immunisation certificate should then be viewed by the school at the earliest possible convenience.

Immunisation Certificate sighted: Yes/No

Special Requirements

- **Medical Conditions** (allergies, asthma, diabetes, epilepsy, ADHD)
- **Legal** (including any access rights to the students or information regarding the students by a non-custodial parent)
- **Educational** (Intellectual etc.)
- **Disability** (hearing, sight, physical etc.)

Reasons why you have chosen St Joseph's as you child's school?

Bus Travel

Will your child be traveling to school by bus? Yes/No (*please circle*)

If yes, which bus:

Child's name:

Parent Information

Resident Mother/Legal Guardian

Surname: Christian Names:

Maiden Name:

Marital Status: Relationship to student:

Country of Birth: Religion:

Occupation/Place of work:

Work Phone Number: Mobile:

Resident Father/Legal Guardian

Surname: Christian Names:

Marital Status: Relationship to student:

Country of Birth: Religion:

Occupation/Place of work:

Work Phone Number: Mobile:

Non Resident Parent

Surname: Christian Names:

Relationship to student:

Address: Street:

Suburb/town:

Postcode:

Phone Number:

Religion:

Occupation/Place of work:

Details of Access: *(copies of Court documents must be attached)*

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Mailing Details

Mailing Title: *(e.g. Mr and Mrs Smith)*:

Address:

.....

Phone Number:

Agreements *(please sign)*

1. By enrolling my/our child in St Joseph's Central School I/we agree to support the participation of my/our child in the School's Religious Education Program that requires:
- learning about the teachings of the Catholic Church, and
 - being involved in school and classroom prayer, masses and other liturgies.

Parent/Guardian: Parent/Guardian:

2. In applying for enrolment of my/our child at St Joseph's Central School, I/we undertake to pay all of the school fees charged by the school. If, through personal financial difficulties, I/we are unable to pay school fees and other fees charged by the school, I/we undertake to make special arrangements with the School Principal to ensure that regular contributions towards school fees are made by me/us at a level I/we can afford.

Parent/Guardian: Parent/Guardian:

3. I/we have been informed of the school's policies in relation to the studies, sport, uniform, student conduct, discipline and the general operation of the school.

Parent/Guardian: Parent/Guardian:

4. If in time of an accident or serious illness I/we cannot be contacted, I/we hereby give permission to the School Principal to seek medical and/or dental attention, as may be required for my/our child on my/our behalf.

Parent/Guardian: Parent/Guardian:

5. From time to time your child will leave the precincts of the school for local class excursions. I hereby grant permission for my/our child to attend these local school excursions.

Parent/Guardian: Parent/Guardian:

6. Conditional Enrolment

- Not Applicable
- Applicable
- trial basis - from to
- ongoing review
- periodic review

Parent/Guardian: Parent/Guardian: