 

Application for Enrolment in a Western Australian Public School (Primary)

**You must complete a separate enrolment application for each student. You need to complete an enrolment application form if:**

* You are enrolling a child in Kindergarten for the following year.
* You are enrolling a child in Pre-primary for the following year.
* You are enrolling a child in Year 7 at a new school for the following year.
* You are enrolling a child transferring from another school in any year level.

Submitting an application for enrolment does not guarantee you will receive a place at the school. The school will notify you in writing of the outcome of your application.

If you are unable to complete this application form, please contact the school for help. For more information please visit the Department of Education [website](https://www.education.wa.edu.au/enrolling-in-school).

**School name Cloverdale Education Support Centre**

PERSONAL DETAILS (Please complete all details below)

SCHOOL NAME



**Child’s surname**

**Legal surname** (if different)

**Given names**

**Date of birth** (dd/mm/yy)

**/**

**/**

**Gender**

Male

Female Not Specified

**Parent Surname**

**Parent First Name**

**Title**

Mr

Mrs

Ms Other

**Residential Address**

(must be completed)

Postcode

**Postal Address** (if different from residential address)

Postcode

**Telephone (Home)**

**Telephone (Work)**

(If convenient)

**Mobile Phone No.**

**Email**

PERSONAL DETAILS (Continued)

Year Level enrolling in Start date: Beginning of school year \_\_\_\_\_\_\_\_ YES NO

If no, indicate start date **/ /**

If applicable, year level your child is currently enrolled in (e.g. Year 6)

If applicable, name of school at which your child is currently or was last enrolled

Are there any Family Court Orders regarding the day to day or long term care, welfare and development of your child?

YES NO

Does your child have an Australian Immunisation Register (AIR) Immunisation History Statement?

YES NO

If your application is accepted, you will be asked to provide an Australian Immunisation Register (AIR) Immunisation History Statement that is **not more than two months old**.

**Will there be any brothers or sisters attending this school?** YES NO Name/s and year levels

**Is your child currently under suspension from a school?** YES NO If yes, name of school

**Is your child a temporary resident?** YES NO If yes, please indicate:

Date entered Australia if born overseas. **/ /**

Visa Sub Class No. Visa expiry date **/ /**

Does your child have health or medical condition, disability or additional needs? YES NO

This information will assist the school principal in planning to provide the best educational program for your child. Please provide details:

# DECLARATION

The information and statements provided in this application for enrolment are true and accurate in relation to: Name of person enrolling child

**Title** Mr Mrs Ms Other

Relationship to child

(Independent minors and those aged 18 years or older may apply on their own behalf)

Telephone (Home) Telephone (Work)

Mobile Phone No.

Signature Date / /

If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct

Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.

# **DOCUMENTS TO BE PROVIDED**

The school will advise you of any additional documentation required.

Checklist: Check the box to indicate documents you can provide to support this application.

1. Birth Certificate or extract or other identity documents - immunization records not any more than 2 months old
2. Copies of Family Court or any other court orders (if applicable)
3. Proof of address
4. Information relating to suspensions
5. Information relating to health or medical condition, disability or additional needs (if applicable)
6. If your child is not a permanent resident of Australia, you must provide evidence of current visa subclass and previous visa subclass (if applicable, such as if current visa is a bridging visa)

Please provide any other relevant information.



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| OFFICE USE ONLY |
| **Documents provided:** |  |  |  |  |
| 1. Birth Certificate or extract or other identity documents – immunization records
2. Copies of Family Court or any other court orders
3. Proof of address
4. Information relating to suspensions
5. Information relating to health or medical condition, disability or additional needs
 |  | YES YES YES YES YES | NO NO NO NO NO |  |
| **Date application received** / / **Year Level** |  |  |  |  |
| **Principal’s approval** Application for Enrolment approved  YES | NO |  |  |  |
| **Name** |  |  |  |  |
| **Signature of principal/delegate** |  |  | **Date** | / / |