



Enrolment Application

CHECKLIST

To enable your child's enrolment to Samford Valley Steiner School proceeds smoothly, please ensure you have:

- Paid the application fee (\$200 non-refundable)
- Attached a copy of your child's birth certificate
- Attached a copy of Visa status
- Attached a copy of your child's two (2) most recent school reports (*not relevant if you child is not old enough to attend school*)
- Attached a copy of learning needs assessments/reports (*e.g. psychological assessment, specialist report, learning support program, behaviour management plan etc.*)
- Signed the Declaration pages of the Enrolment Application form.

A separate enrolment form is required for each student / child in the family. Application fee is subject to change. Please ring the office to confirm the cost at time of lodgement. Applications are placed on a waiting list from date of fee payment.

STUDENT'S DETAILS

| | | | |
|---|--|---|--|
| Surname | | Given Names | |
| Preferred name | | | |
| Date of Birth | | Sex | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other |
| Australian Citizen | <input type="checkbox"/> Yes <input type="checkbox"/> No | Holder of a permanent resident visa? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If not a citizen, please specify country of citizenship | | | |
| Date of arrival in Australia? | | Visa type and expiry date | |
| Proposed Year of Entry | | <input type="checkbox"/> Pippi <input type="checkbox"/> Pre-Prep or Class | |
| Present School/Kindergarten | | | |
| Name/s of siblings at SVSS | | | |

PARENT/GUARDIAN 1 DETAILS

| | | | |
|--|--|------------------------|--|
| Surname | | Given Name | |
| Relationship to child covered by this application | | | |
| <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Other | | | |
| Does the child live this parent /guardian? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address | | Postcode | |
| Home Phone | | Mobile | |
| Work Phone | | | |
| Email | | | |
| Occupation | | Employer/Business Name | |

PARENT/GUARDIAN 2 DETAILS

| | | | |
|--|--|------------------------|--|
| Surname | | Given Name | |
| Relationship to child covered by this application | | | |
| <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Other | | | |
| Does the child live this parent /guardian? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address | | Postcode | |
| Home Phone | | Mobile | |
| Work Phone | | | |
| Email | | | |
| Occupation | | Employer/Business Name | |

COURT ORDERS RELATING TO THE CHILD

If the child is not living with both parents, as named on their birth certificate, at one address, please complete the section below (*Copies of parenting court order/Child protection order/Parent agreement must be provided to the school at enrolment and must be replaced whenever changes are made*)

| | |
|---|--|
| Are there any current court orders/other orders in place? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are there any other special circumstances we need to be aware of in regards to your child's living arrangements/guardianship? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Please provide details or attach a separate sheet if needed.</i> | |

HEALTH/MEDICAL INFORMATION

Please specify any medical problems the School should be aware of, include any daily medication to be taken by student

- Anaphylaxis Yes No _____ (please detail)
- Specific Diet Requirement Yes No _____ (please detail)
- Heart Problems Yes No _____ (please detail)
- Respiratory problems (e.g. Asthma) Yes No _____ (please detail)
- Allergies
(regarding medication or urgent medical care) Yes No _____ (please detail)
- Back, bone or joint problems Yes No _____ (please detail)
- Coeliac Disease Yes No
- Downs Syndrome Yes No
- Epilepsy Yes No _____ (please detail)
- Diabetes Yes No _____ (please detail)
- HIV, Hepatitis A, B C etc Yes No _____ (please detail)
- Recent Illness Yes No _____ (please detail)
- Drug reactions Yes No _____ (please detail)
- ADD/ADHD etc Yes No _____ (please detail)
- Affective Disorder/Anxiety Disorder Yes No _____ (please detail)
- Other information Yes No _____ (please detail)

| | |
|---|---|
| Does your child need a 'Medical Alert' status | <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please provide details</i> |
| Is your child taking any medication on a long-term basis? | <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please provide details</i> |

LEARNING SUPPORT NEEDS

As part of Samford Valley Steiner School's (SVSS) student support process, the school needs to ensure that it is able to meet the needs of any child; this may include learning support and behaviour support. Please ensure full disclosure of learning/social/emotional needs is made available to the school and attach all relevant supporting documentation.

| | | | |
|---|--|-------|--|
| Does the student have any physical, cognitive, sensory or social/emotional disability or challenge? | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please provide details</i> | | | |
| Has the student had learning support from a previous school or independent provider or required classroom-based adjustments to be able to access the full curriculum offered? | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please provide details</i> | | | |
| Has the student ever received support from others? E.g. psychologist, occupational therapist, speech therapist | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please provide details</i> | | | |
| Teacher References from Last School Attended: | | | |
| Name of Teacher | | | |
| Phone | | Email | |

DATA COLLECTION FORM (MYCEECDYA)

Ministerial Council on Education, Employment, Training and Youth Affairs. Information required for assessment and reporting purposes.

Privacy: We collect personal information about students at the School, their parents and people who care for them. The primary purpose of collecting the information is to enable us to use the information for all actions connected with educating our students. The privacy policy may be viewed on our website.

| Student Details | |
|--|---|
| Is your child of Aboriginal or Torres Strait Islander origin? <i>(For persons of both Aboriginal and Torres Strait Islander origin, tick both 'Yes' responses.)</i> | No <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> |
| Does the student speak a language other than English at home? <i>(If more than one language, indicate the one that is spoken most often.)</i> | No, English only <input type="checkbox"/> Yes Other <input type="checkbox"/> Please specify |

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

(For persons who have never attended school, mark 'Year 9 or equivalent or below'.)

| | Parent /Guardian 1 | Parent/Guardian 2 |
|-------------------------------|--------------------------|--------------------------|
| Year 12 or equivalent | <input type="checkbox"/> | <input type="checkbox"/> |
| Year 11 or equivalent | <input type="checkbox"/> | <input type="checkbox"/> |
| Year 10 or equivalent | <input type="checkbox"/> | <input type="checkbox"/> |
| Year 9 or equivalent or below | <input type="checkbox"/> | <input type="checkbox"/> |

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

(Mark one box only in each column)

| | Parent /Guardian 1 | Parent/Guardian 2 |
|-----------------------------|--------------------------|--------------------------|
| Bachelor degree or above | <input type="checkbox"/> | <input type="checkbox"/> |
| Advanced diploma/diploma | <input type="checkbox"/> | <input type="checkbox"/> |
| Certificate I – IV | <input type="checkbox"/> | <input type="checkbox"/> |
| No non-school qualification | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|--|--|
| Does the Parent/Guardian 1 speak a language other than English at home? <i>(If more than one language, indicate the one that is spoken most often.)</i> | No, English only <input type="checkbox"/> Yes Other <input type="checkbox"/> Please specify |
| Does the Parent/Guardian 2 speak a language other than English at home? <i>(If more than one language, indicate the one that is spoken most often.)</i> | No, English only <input type="checkbox"/> Yes Other <input type="checkbox"/> Please specify |

Please select the appropriate parental occupation group from the list (next page)

- 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.
- If the person has not been in paid work in the last 12 months, enter '8' below

What is the occupation group of the Parent/Guardian 1?

What is the occupation group of the Parent/Guardian 2?

LIST OF PARENTAL OCCUPATION GROUPS

Group 1: Senior management in large business organisation, government administration and defence, and qualified professionals

- Senior executive/manager/department head in industry, commerce, media or other large 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 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 professional
- 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]

Group 2: Other business managers, arts/media/sportspersons 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

Group 3: 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, betting 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 researcher]
- 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]

Group 4: 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, kitchenhand, 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/teacher's 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]

FINANCIAL RESPONSIBILITY

| | | | |
|--|--|-----------------------|--|
| Name of person/s financially responsible for student's / child's education | | | |
| Name | | Relationship to child | |
| Address | | | |
| Phone | | Occupation | |
| | | | |
| Name | | Relationship to child | |
| Address | | | |
| Phone | | Occupation | |

DECLARATION (This section MUST be filled in)

| | | | |
|---|--|------|--|
| I / We hereby apply to have the above-named student / child placed on the enrolment waiting list. Should he / she be accepted, following an interview, I / we undertake to support the rules and regulations of the school, and to be responsible for the payment of fees. I will update the school with any changes to postal / email addresses. | | | |
| Parent /Guardian 1 Name | | | |
| Signature | | Date | |
| Parent /Guardian 2 Name | | | |
| Signature | | Date | |

FOR YOUR INFORMATION

Have you been on a guided tour of the school?

As part of the application process, we request that you attend at least one guided tour of the school.

Please call the office on (07) 3430 9600 to register for the next scheduled tour. Tour dates are listed on our website.

FOR OUR INFORMATION

Please tell us how you heard of Samford Valley Steiner School.

- Word of Mouth
 Website
 Newsletter
 Social Media
 Other

THANK YOU FOR YOUR APPLICATION.

PLEASE ENSURE THAT A NON-REFUNDABLE FEE OF AUS \$200 ACCOMPANIES THIS FORM.

THE FEE CAN BE PAID DIRECTLY INTO THE SCHOOL'S BANK ACCOUNT: National Australia Bank

BSB: 084 209

Account Number: 538 620 260

Reference: [ENROL FEE - STUDENT'S NAME]

A RECEIPT WILL BE ISSUED WHEN FEE IS RECEIVED.