



OFFICE USE ONLY	
Year:	Date received: ____ / ____ / ____
Local Intake Area:	YES <input type="checkbox"/> NO <input type="checkbox"/>
Birth certificate / other	YES <input type="checkbox"/> NO <input type="checkbox"/>
Visa / Passport sighted	YES <input type="checkbox"/> NO <input type="checkbox"/>
Family Court Order:	YES <input type="checkbox"/> NO <input type="checkbox"/>
AIR Statement:	YES <input type="checkbox"/> NO <input type="checkbox"/>
Third Party Consent:	YES <input type="checkbox"/> NO <input type="checkbox"/>
Current Siblings: _____	
<input type="checkbox"/> ACCEPTED <input type="checkbox"/> NOT ACCEPTED	

APPLICATION FOR ENROLMENT FORM

PERSONAL DETAILS (PLEASE PRINT ALL DETAILS BELOW)

Child's legal surname	Child's given names	Date of birth ____ / ____ / ____	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex
Surname of parent/guardian	Given names	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other: _____	
Residential Address (must be completed)			Postcode
Postal Address (if different from residential address):			Postcode
Home Phone	Mobile Phone		
Work Phone	Email		

Are there any siblings currently attending Waddington Primary School? ☐ YES ☐ NO
If YES, provide the name/s and year levels below:

Name of the school your child is currently enrolled at _____

Year level enrolling in _____ Indicate start Date ____ / ____ / ____

Are there any Family Court Orders regarding the day to day or long-term care, welfare and development of the child? ☐ YES ☐ NO

If yes, please provide supporting documentation with this application

Immunisation

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 2 months old.

PLEASE COMPLETE THE REVERSE SIDE

Is your child a permanent resident of Australia?

☐ YES

☐ NO

If YES, please note that being born in Australia does not automatically make a child an Australian citizen. The child is a temporary resident if neither parent was an Australian citizen or a permanent resident of Australia when the child was born. These children hold the same temporary visa subclass as their parents.

If NO, please indicate date entered Australia: ____ / ____ / ____ Visa Sub Class No.: ____

Visa expiry date ____ / ____ / ____

If your child is not a permanent resident of Australia please provide copies of their current visa documentation (including the original visa if they are on a bridging visa) with this application

Does your child have a health or medical condition, disability or additional needs?

☐ YES

☐ NO

This information will assist the school principal with considering whether any specific or additional resources are required and available to assist the school with providing the best educational program for your child.

Please indicate whether:

☐ Physical

☐ Intellectual

☐ Other health/medical condition/s

Please outline nature of disability or medical condition/s.

DECLARATION

The information and statements provided in this application for enrolment are true and accurate

Name of the person enrolling child:

☐ Mr ☐ Mrs ☐ Ms
☐ Miss
☐ Other: ____

Relationship to child:

Signature of parent/guardian  _____ Date _____

NOTE: Children may be enrolled in kindergarten at one school only, either public or private.

NOTE: If statements made in this application later prove to be false or misleading, a decision on this application may be reversed. Information supplied may need to be checked by the school.

SUPPORTING DOCUMENTATION TO BE PROVIDED WHEN SUBMITTING THIS APPLICATION

Please place X in the boxes to indicate each document attached to this application form.

1. Birth Certificate or extract or other identity documents.....☐
(Principals will refer to guidance 3.5.1 of the Enrolment Procedures where evidence is not provided).
2. Proof of address- Utility bill / Driver's licence / Statutory Declaration form (Dual Occupancy).....☐
3. Copies of Family Court or any other court orders (if applicable)☐
4. Information relating to suspensions or exclusions (if applicable).....☐
5. Information relating to medical or health condition, disability or additional needs (if applicable)☐
6. Current visa documents with subclass and previous visa subclass if on bridging visa (if applicable).....☐

Once the application has been accepted, you will be required to complete an Enrolment Form and submit it to the school. If your Application for Enrolment is not accepted, you will be advised in writing within three weeks of the advertised closing date for applications.

Application for Enrolment approved:  _____ (Signature of Principal) ____ / ____ / ____ (date)