

Section 2 - Parent 1/Guardian 1 (in Australia) (Enrolling Parent/Guardian)	Parent 2/Guardian 2 (in Australia)
Mr/Mrs/Ms/Other: <input type="text"/>	Mr/Mrs/Ms/Other: <input type="text"/>
Family Name: <input type="text"/>	Family Name: <input type="text"/>
Given Names: <input type="text"/>	Given Names: <input type="text"/>
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Relationship to student: <input type="text"/>	Relationship to student: <input type="text"/>
Work Phone Number: <input type="text"/>	Work Phone Number: <input type="text"/>
Mobile Phone: <input type="text"/>	Mobile Phone: <input type="text"/>
(Contact number for Absence SMS)	Email address: <input type="text"/>
Email address: <input type="text"/>	
(The majority of school communication will be via email or SMS)	

Section 3 - Addresses

Mailing Address (Of Parent/Guardian with whom student lives)

Title and Name: <input type="text"/>	Phone Number: <input type="text"/>
Address: <input type="text"/>	<input type="text"/>
<input type="text"/>	
Suburb/Town: <input type="text"/>	Student's Mobile Phone: <input type="text"/>
Postcode: <input type="text"/>	<input type="text"/>
Student's School Email Address: <input type="text"/>	

Residential Address (If different from above)

Title and Name: <input type="text"/>	Phone Number: <input type="text"/>
Address: <input type="text"/>	<input type="text"/>
<input type="text"/>	
Suburb/Town: <input type="text"/>	
Postcode: <input type="text"/>	

If other addresses (B – Billing, H – Holiday) include them here: _____

Section 4 - Emergency Contact if Parent or Guardian cannot be contacted

Name: <input type="text"/>	Home Phone: <input type="text"/>
Relationship to student: <input type="text"/>	Mobile Phone: <input type="text"/>
	Work Phone: <input type="text"/> Ext: <input type="text"/>

Section 5 – Family Court Orders/GOM

Are there any current Court-sanctioned residency, parental responsibility or Contact orders relating to this student?
If yes, please attach a copy of the order. Yes No

Are there any current Guardianship of the Minister (GOM) orders relating to this student?
If yes, please attach a copy of the order. Yes No

Section 6 - Relevant Medical Conditions

Does the student have a diagnosed medical condition which we should be aware of? Yes No

If Yes, please specify:

If there is a Medical Plan, please attach a copy.

Section 7 - Relevant Negotiated Education Plan

Does the student have a diagnosed learning difficulty which we should be aware of? Yes No

If Yes, please specify:

If there is a Negotiated Education Plan, please attach a copy.

Section 8 - Course Details (Refer to a School of Languages Enrolment Officer, phone 8301 4800)

Complete each section and tick as appropriate.

Language enrolling in for 2017:

(Language)

(Day)

Teaching Centre:

Year Level of Course:

Year 11

Year 12

Course Type: (tick one box from one section only)

SACE:

Beginners*

Continuers*

Background Speakers

Australian Languages

Language & Culture

International Baccalaureate:

Ab Initio

Language B

** Students enrolling in Beginners Arabic, Chinese, French, German, Indonesian, Italian, Japanese, Korean and Spanish courses and Continuers Chinese, Japanese and Vietnamese are required to complete an eligibility form. Enrolment is subject to eligibility.*

Eligibility forms are available from the School of Languages.

Eligibility form submitted with Enrolment form:

Yes

No

Not applicable

Section 9 - Previous Language Studies

Has the student studied this Language previously? Yes No

If yes, please indicate where:

School of Languages (please tick)

(specify)

Ethnic School

Mainstream School

Overseas

Other

In which year(s) ?

Highest Year Level studied:

Section 10 – Endorsement of Student's Day School

This day School/College endorses the enrolment of this student in the School of Languages for the language and level indicated.

For Full Fee Paying Overseas Students – endorsement must be provided by the school's ISP Manager.

Name:

Position:

Date:

Section 11 – Subject Charge and Declaration

Please complete EITHER Column A OR B

Column A – School Declaration Please complete Column A if the student is: A Full Fee Paying Overseas (FFPO) student , studying the language as a part of their subject load (free line)	Column B – Parent Caregiver Declaration Please complete Column B if the student is: <ul style="list-style-type: none"> A local student, whether or not they are studying the language as a part of their subject load. A Full Fee Paying Overseas student studying the language in addition to a full subject load (no free line)
Subject Charge	Subject Charge
The SCHOOL will be invoiced: Full Fee Paying Overseas student (SACE) - \$1,200 Full Fee Paying Overseas student (IB) - \$1,500	The STUDENT/PARENT will be invoiced: SACE student - \$120 IB student - \$1,500 Full Fee Paying Overseas student (SACE) - \$1,200 Full Fee Paying Overseas student (IB) - \$1,500
School Declaration	Parent/Caregiver Declaration
To be completed by the Principal (or nominee) of the student's day School. I verify that this FFPO student is studying the language as part of a subject load in 2017 (the student has a free line at their school). I have read and understood the School of Languages enrolment information. I agree that my school is responsible for the payment of all charges. Name: <input style="width: 100%;" type="text"/> Position: <input style="width: 100%;" type="text"/> Date: <input style="width: 100%;" type="text"/>	To be completed by: (please tick one only) <input type="checkbox"/> the parent/caregiver if the student is under the age of 18 <input type="checkbox"/> the student if they are under the age of 18 and living independently <input type="checkbox"/> the student if they are over the age of 18 I have read and understood the School of Languages enrolment information. I agree to pay the charge as defined by the School of Languages School Council to undertake the course of instruction, and that this charge is legally recoverable as a debt to the School Council in the event of my non-payment of those charges. I have read and accept the above statements: Yes <input type="checkbox"/> No <input type="checkbox"/> Name: <input style="width: 100%;" type="text"/> Date: <input style="width: 100%;" type="text"/>

Section 12 – Agreements and Consents

Cyber-Safety Use Agreement and Acceptable Use of ICT Equipment / Devices

I/We have read and understood the Cyber-safety Use Agreement and I am/we are aware of the importance of a cyber-safe learning environment. I/We have read and agree to the Acceptable Use of ICT Equipment /Devices.

Name of student:

Name of parent/caregiver:*

**Not applicable for students living independently or students over 18*

Permission to use image, video, voice, and/or creative work of students and children

The Department for Education and Child Development (DECD) develops teaching, learning and promotional materials and publishes them in print and digitally (eg on websites). Students also publish their own materials on websites (eg school website, DECD website, Scootle™, iTunes™ or other online environments).

I DO grant permission for DECD to create/use: Yes No
 • photographs, video or audio recordings of my child; or samples of my child's work; or my child's first name

I DO grant permission to distribute them in the following locations: Yes No
 • printed publications (eg newsletters, promotional material); or secure intranet websites; or publicly accessible websites, including social media accounts

Any material placed on publicly accessible websites under a CC-BY-NC licence will be available to download and use. This licence is perpetual (forever), irrevocable, free, worldwide, non-exclusive and allows for the replication, distribution, display, performance and remixing of copyrighted work for non-commercial purposes, provided that the author is credited.

I DO also grant permission for my child to be photographed/recorded and the child's full name to be used:
 by external media organisations for publication/broadcast
 for school photographs, both individually and in a group
 in the publication of the annual student information books

Please enter your name to confirm the above declaration: (parent/caregiver/student over 18)

Please note: These agreements will remain in force as long as you / your child is enrolled at this school. If it becomes necessary to add/amend any information or rule, you will be advised in writing. If you wish to change any of the consents please advise the school in writing.

