



255 Torrens Road,
West Croydon SA 5008
Telephone 08 8301 4800
Facsimile 08 8301 4801
dl.1802.admin@schools.sa.edu.au
www.schooloflanguages.sa.edu.au

School Use Only
Form collected and checked by: Date:
Student ID:

2022 Student Enrolment Form For R-10 Courses

**If you are an International Full Fee Paying Student please discuss this enrolment with the ISP Manager in your day school before attending any classes, and complete the International Full Fee Paying Student Enrolment form (purple) instead of this form.*

Section 1 - Student Personal Details

Family Name:

Given Names:

Preferred Name:
(if different to given name)

Date of Birth:

Sex: Male Female

Is the student of Australian Aboriginal or Torres Strait Islander origin?
(For persons of both Australian Aboriginal and Torres Strait Islander origin, tick both 'Yes' boxes.)

No Yes, Australian Aboriginal Yes, Torres Strait Islander

In which country was the student born?

Australia Other – please specify

If other, on which date did the student arrive in Australia?

Does the student speak a Language other than English at home? No, English only Yes

Main Language: Other Language(s):

What is the student's cultural background?

Name of Day School:

Year Level at Day School in 2022:

Has the enrolment been discussed with a School of Languages Enrolment Officer? Yes No N/A (Applicable only for Year 7-10 enrolments)

Is the student studying this language at their day school? Yes No If YES, a letter of approval signed by the day school Principal must accompany this form

Does the student have a sibling studying at the School of Languages? Yes No Name of sibling:

Office use Only

Subject Selection: Enrolment Officer: Date:

Teacher: Roll Class:

Section 2 - Parent 1/Guardian 1 (Enrolling Parent/Guardian)	Parent 2/Guardian 2
Mr/Mrs/Ms/Other: <input style="width: 100px;" type="text"/>	Mr/Mrs/Ms/Other: <input style="width: 100px;" type="text"/>
Family Name: <input style="width: 300px;" type="text"/>	Family Name: <input style="width: 300px;" type="text"/>
Given Names: <input style="width: 300px;" type="text"/>	Given Names: <input style="width: 300px;" type="text"/>
Sex: Male Female	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Relationship to student: <input style="width: 250px;" type="text"/>	Relationship to student: <input style="width: 250px;" type="text"/>
Work Phone Number: <input style="width: 250px;" type="text"/>	Work Phone Number: <input style="width: 250px;" type="text"/>
Mobile Phone: <input style="width: 250px;" type="text"/>	Mobile Phone: <input style="width: 250px;" type="text"/>
(Contact number for Absence SMS)	Email address: <input style="width: 300px;" type="text"/>
Email address: <input style="width: 300px;" type="text"/>	
(All school communication, including term reports will be via email or SMS)	

Section 3 – Addresses

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

Title and Name: <input style="width: 350px;" type="text"/>	Phone Number: <input style="width: 200px;" type="text"/>
Address: <input style="width: 350px;" type="text"/>	<input style="width: 200px;" type="text"/>
<input style="width: 350px;" type="text"/>	
Suburb/Town: <input style="width: 350px;" type="text"/>	Student's Mobile Phone: <input style="width: 200px;" type="text"/>
Postcode: <input style="width: 100px;" type="text"/>	<input style="width: 200px;" type="text"/>
Student's School Email Address: <input style="width: 650px;" type="text"/>	

Residential Address (If different from above)

Title and Name: <input style="width: 350px;" type="text"/>	Phone Number: <input style="width: 200px;" type="text"/>
Address: <input style="width: 350px;" type="text"/>	<input style="width: 200px;" type="text"/>
<input style="width: 350px;" type="text"/>	
Suburb/Town: <input style="width: 350px;" type="text"/>	
Postcode: <input style="width: 100px;" type="text"/>	
Email Address: <input style="width: 400px;" type="text"/>	

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

Name: <input style="width: 350px;" type="text"/>	Home Phone: <input style="width: 150px;" type="text"/>
Relationship to student: <input style="width: 350px;" type="text"/>	Mobile Phone: <input style="width: 250px;" type="text"/>
	Work Phone: <input style="width: 150px;" type="text"/> Ext: <input style="width: 50px;" type="text"/>

Section 5 - Court Orders/Children and Young People in Care

Are there any current Court-sanctioned orders relating to this student? Yes No

If yes, please attach a copy of the order for school's records

Is the student under Guardianship of the Chief Executive, DCP or in Alternative Care? Yes No

If yes, please provide further details.

Section 6 - 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 Health Care Plan, please attach a copy.

Section 7 - Negotiated Education Plan (NEP)/ Individual Education Plan (IEP)/Individual Learning Plan (ILP)

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

If Yes, please specify:

If there is an Education/Learning Plan, please attach a copy

Section 8 - Course Details

(Refer to a School of Languages Enrolment Officer, if applicable , phone 83014800)

Please complete each section and tick as appropriate.

Language enrolling in for 2022:

(Language) (Day)

Teaching Centre:

Year Level of Course:

- | | | | |
|------------|--------------------------|---------|--------------------------|
| *Reception | <input type="checkbox"/> | Year 6 | <input type="checkbox"/> |
| Year 1 | <input type="checkbox"/> | Year 7 | <input type="checkbox"/> |
| Year 2 | <input type="checkbox"/> | Year 8 | <input type="checkbox"/> |
| Year 3 | <input type="checkbox"/> | Year 9 | <input type="checkbox"/> |
| Year 4 | <input type="checkbox"/> | Year 10 | <input type="checkbox"/> |
| Year 5 | <input type="checkbox"/> | | |

* Only students who have turned 5 before 1 May are eligible to enrol.

Section 9 - Previous Language Studies

Has the student studied this Language previously? Yes No

If yes, please indicate where:

	(please tick)	(specify)
School of Languages	<input type="checkbox"/>	
Ethnic School	<input type="checkbox"/>	<input type="text"/>
Mainstream School	<input type="checkbox"/>	<input type="text"/>
Overseas	<input type="checkbox"/>	<input type="text"/>
Other	<input type="checkbox"/>	<input type="text"/>

In which year(s) ? Highest Year Level studied:

Section 10 - Subject Charges

Years R-10 \$125

Section 11 - Enrolment Declaration and Signature

To be completed by the parent/caregiver.

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 of Languages School Council in the event of my non-payment of those charges.

I have read and accept the above statements: Yes No

Name of parent/caregiver:

Date:

Section 12 – Agreements and Consents

Cyber-Safety Use Agreement and Acceptable Use of ICT Equipment and 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 conditions as set out in the Acceptable Use of ICT Equipment and Devices.

Name of student (Year 8-10 only):

Name of parent/caregiver:

Day School Contact

I/We give permission for the School of Languages to obtain relevant Health Care Plans and Negotiated Education Plans from the day school of my child

Name of parent/caregiver:

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

The Department for Education 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, Department for Education website, Scootle™, iTunes™ or other online environments).

I DO grant permission for Department for Education to create/use: Yes NO

- photographs, video or audio recordings of my child
- samples of my child's work
- my child's first name and the School of Languages name.

I DO grant permission to distribute them in the following locations: Yes NO

- printed publications (eg newsletters, promotional material)
- secure intranet websites and 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 by external media organisations for publication/broadcast. Yes No

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



Government of South Australia
Department for Education

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.