

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:	

2024 Adult Enrolment Form							
Will you be 21 years of age or over on 1 January 2024?				YES		NO	
Will yo	ou be 18 years of age o	r over on 1 Janua	ry 2024?	YES		NO	
Is this	Is this subject required for completion of your SACE?					NO	
Have y	ou been out of school	for 6 months or	more?	YES		NO	
Adult E **If you are an In	of age or over and do not additional following of the provision Policy). The provision Policy). The provisional Full Fee Paying of the Ideasses, and complete the Ideasses.	Exemptions apply to Student please discu	adults enrolling into Ausl	an and Aust e ISP Manag	ralian Lang er in your	guages. day schoo	ol before
Section 1 - Student Personal Details							
Family Name:							
Given Names:							
Preferred Name: (if different to given	name)						
Date of Birth:			Government regulations The Department for identifying sex and gend	Education	recognises	the sen	sitivities of
Gender: N	Male F	emale	committed to inclusion, environment for all studinformation about this	, and all dents. If yo	schools u wish to	provide a provide	n inclusive additional
(For persons of both A origin, tick both 'Yes' I	No	_	attach this to the form inclusively and according to Yes,	. The scho requests ma	ol will re	espond co	
In which country we Australia	ere you born? Other – please specify						
If other, on which d	ate did you arrive in Aust	ralia?					
Do you speak a Lang	guage other than English	at home? No,	English only	Yes			
Main Language:		Oth	er Language(s):				
What is your cultura	al background?						
Do you study any ot	ther secondary school sul	ojects other than th	nis language course?	Yes	No [
If yes, name of Day	School:						
•	your enrolment with a So t the School of Languages		Enrolment Officer?	Υ	es 🗌	No	
Office use Only	, , ,			_			
Subject Selection:		Enrolment Officer			Date:		
Teacher:		Schools Online:	SACE Coord:	Rol	Class:		
SPP:		Date:					
WWCC Screening Nr:		Issue Date:					

Section 2 - Address				
Mailing Address				
Title and Name:	Home Phone Number:			
Address:				
	Work Phone Number:			
Suburb/Town:				
Postcode:	Mobile Phone Number:			
Email Address: (All school communication, including term reports, will be via email or SMS)	(Contact number for Absence SMS)			
Section 3 - Emergency Conta	<u>, </u>			
Name: Home Phone:				
Mobile Phone: Relationship to student:				
Work Phone:	Ext:			
Section 4 - Medical Condition	ns			
Do you 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 5 – Individual Learning	Plans			
Do you have a recognised learning difficulty which we should be aware of?	Yes No			
If Yes, please specify: If there is an Individual Learning Plan, please attach a copy.				
Section 6 - Course Details				
(Refer to a School of Languages Enrolment Officer,	phone 8301 4800)			
Please complete each section and tick as appropriate Language enrolling in for 2024:				
(Language)	(Day)			
Year Level of Course: Stage One (Year 11) Stage Two (Year 12)				
Length of Course: Whole year Semester One	Semester Two			
Teaching Centre:				
Continuers* Background Speakers Vietname * Enrolm	ts enrolling in Beginners Chinese, French, German, Italian, Japanese, Korean and Spanish courses inuers Chinese, Indonesian, Japanese, Korean and ese are required to complete an eligibility form. ent is subject to eligibility. ty forms are available from the School of Languages. Not applicable			
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Section 7 - Previous Language Studies					
Has the student studied this Language previously? Yes No					
If yes, please indicate where:					
(please tick) (specify)					
School of Languages					
Community Language School					
Mainstream School					
Other					
In which year(s)? Highest Year Level studied:					
Section 8 - Subject Charges					
Adult students: The following annual charges apply: • For adult students enrolled in another school: \$180 • For all other adult students: \$400					
Invoicing : For adult students enrolled in a government school who are studying a language as part of a full subject load, the day school will be invoiced. All other adult students will be invoiced directly by the School of Languages.					
Section 9 – Working with Children Check (WWCC)					
It is a requirement of the Government of South Australia that adult re-entry students over the age of 18 will undertake a child-related employment screening check. Enrolment in government schools is subject to the outcome of this screening process.					
Criminal History Declaration:					
Have you ever been found guilty of a criminal offence? Yes No					
Have you ever been investigated for allegations of a sexual nature? Yes No					
Have you already undertaken a WWCC screening?					
If yes, please attach a copy of the results of the WWCC screening process and complete the following:					
WWCC number: Issue date:					
If no, please apply online for a WWCC at screening.sa.gov.au					
Confirmation of your enrolment is pending the school's receipt of your WWCC clearance. Your enrolment will be terminated if it is determined (by Department for Education) that you present an unacceptable risk to children and young people on the site. Furthermore, the Principal of the school can require you to undergo an additional criminal history screening at any time. Continued enrolment is conditional on giving consent to such a screening. Signature: Date:					
5.5aca. c.					

Section 10 - Invoicing Declaration Please complete EITHER Column A OR B Column A - School Declaration Column B - Student Declaration Please complete Column A if the student is enrolled at Please complete Column B for all other adult students another school. **Subject Charge Subject Charge** The **SCHOOL** will be invoiced: \$180 The **STUDENT** will be invoiced: \$400 **School Declaration Student Declaration** I have read and understood the School of Languages To be completed by the Principal (or nominee) of the enrolment information. student's day School. I agree to pay the charge as defined by the School of I verify that this student is studying the language as part Languages Governing Council to undertake the course of their SACE in 2024. of instruction, and that this charge is legally I have read and understood the School of Languages recoverable as a debt to the School of Languages enrolment information. Governing Council in the event of my non-payment of I agree that my school is responsible for the payment of those charges. all charges. No I have read and accept the above statements Yes Name: Name: Position: Date: Date:

Section 11 – Agreements and Consents

Bring Your Own Device (BYOD)/Cyber Safety/Use of Information and Communication Technologies (ICT)

I have read and understood the Cyber-safety Use Agreement and I am aware of the importance of a cyber-safe learning environment.

I have read and agree to the conditions as set out in the Acceptable Use of ICT Equipment and Devices.

Name of Student:

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

The Department for Education develops teaching, learning and promotional materials and publishes them in print and digitally (eg on websites). These are often published on websites (eg school website, Department for Education website, Scootle™, iTunes™ or other online environments).

(Please tick DO or DO NOT for each.)

I **DO / DO NOT** grant permission for the Department for Education to create/use: **DO**

DO DO NOT

- photographs, video or audio recordings of me
- samples of my work
- a written comment by me

I **DO / DO NOT** grant permission to distribute them in the following locations:

DO DO NOT

- 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 / DO NOT** also grant permission to be photographed/recorded by external media organisations for publication/broadcast. **DO DO NOT**

Name of Student:



Please note: The permissions will continue until you revoke permission in writing to the principal of the school.