Enrolment Application

Student Family Name:	
Student First Name:	
Level Applying For:	
Commencing in Year:	

Marian College

A Community growing in Faith & Love • Serving Others • Striving to Achieve • Thinking for the Future

	OFFICE USE ONLY
Family Code:	
Student Code:	
Year Level of Entry:	
Year of Entry:	
Homeroom:	
VSN:	
Novell ID No:	
Date Received:	
Enrolment Fee Paid:	
Interview Time:	
Commencement Date	:
Passport/Visa No:	

PERSONAL DETAILS OF STUDENTS				
Family Name:	Given Name:			
Preferred Name:	Victorian Student Number:			
Application for Year 7 8 9 10 11	12 in 20			
Residential Address:	Telephone:			
Suburb:	Postcode:			
Date of Birth:				
Is your child an Aboriginal or a Torres Strait Islander?				
If born overseas please indicate date of entry into Australia: Name of first school in Australia:				
Main language spoken at home:	•			
Do you have refugee status? Yes Type:				
Has your daughter attended an English Language School/Cent				
Yes (please supply photocopy of School Report)	□No			
Name of English Language School/Centre:	Data of Envalments			
Address: Religion:	Date of Enrolment: Parish:			
Date of Baptism: Date of First Eucharist:	Date of Confirmation:			
Parish: Parish:	Parish:			
Present School:	Year Level:			
How many years enrolled at present school: Output Do you give permission for the previous school to forward any relevant documentation about your daughter to Marian College? Yes No				
Information for the mailing of reports & general correspondence (if different from above)				
Name:				
Address: Telephone:				
Student's place of residence (Please indicate with whom the student lives with):				
☐ Mother ☐ Grandparent/s ☐ A	unt			
	Incle			
☐ Guardian ☐ Sister ☐ 1	8 - no guardian			
FOR STUDENTS ENROLLING IN VCE: Previous VCE Enrolment				
N.B. Students with previous VCE enrolment should attach a copy of their VCAA Statement of Results.				

PARENTAL/GUARDIAN INFORMATION				
FATHER/GUARDIAN		MOTHER/GUARDI	AN	
Family Name:		Family Name:		
Given Name:		Given Name:		
Address:		Address:		
Suburb:		Suburb:		
Postcode:		Postcode:		
Home Phone:		Home Phone:		
Mobile Phone:		Mobile Phone:		
Business Phone:		Business Phone:		
Email:		Email:		
Religion:	Religion:			
Main Language Spoken at home:		Main Language Spoken at home:		
Country of Birth:		Country of Birth:		
Date of entry into Australia:		Date of entry into Australia:		
Name of Employer:		Name of Employer:		
Business Address:		Business Address:		
Occupation:		Occupation:		
If Guardian, please state relationship to student:		If Guardian, please state relationship to student:		
Please provide an email address for	the electronic delivery	of the College Newsle	tter, the <i>Marian N</i>	lews:
SUPPLEMENTARY ENROLMENT INFORMATION FOR NATIONAL REPORTING				
			Father/Guardian	Mother/Guardian
Highest level of primary or secondary school completed (Please tick)	Year 12 or equivalent Year 11 or equivalent Year 10 or equivalent			

Year 9 or equivalent or below

Bachelor degree or above

Advance diploma/Diploma

No non-school qualification

Certificate I to IV (including trade certificate)

Highest qualification

completed

(Please tick)

SPECIAL PROGRAM OR ASSISTANCE				
Please tick if the following have been part of your daughter's school education: □ English as a Second Language Program □ Integration □ New Arrivals Program □ Special Needs Program				
Are there any other issues about your daughter's learning and care that should be taken into account in our planning for her enrolment? If yes, please specify: Output Description:				
Has your daughter any special needs? Yes No If yes, please identify:				
Does your daughter receive a disability allowance from Centrelink?				
Please indicate if any of the following (or other) areas may affect your child's schooling: Exceptional abilities Speech or language disabilities Problems in home life Social Interaction please comment:				
MEDICAL INFORMATION				
Has your daughter been diagnosed with Anaphylaxis?				
Has your daughter any health/medical conditions of which the school should be aware?				
□ Eye sight □ Hearing loss □ Speech □ Physical Disability □ Diabetics □ Asthma □ Allergies □ Other				
please specify:				
Is your daughter receiving regular treatment/medication?				
Doctor's Name: Phone No:				
Address:				
Medicare No:				
Medical Insurance Name: Card No:				
Does your family have Ambulance Cover?				
In the event of an accident or illness, I/we authorise the person in charge to consent, where it is impractical to communicate with me, to my daughter receiving such medical or surgical treatment as may be deemed necessary.				
Signature of Father/Guardian: Date: Date: Date:				

EMERGENCY CONTACT OTHER THAN PARENTS				
Please give the name and telephone number of two people, other than the parent/s or guardian, who will act as a contact, should your daughter become ill at school and we are UNABLE to contact you:				
Name of contact person:				
Relationship to student:				
Home Phone:	Business Phone:		Mobile Phone:	
Name of contact person:				
Relationship to student:				
Home Phone:	Business Phone:		Mobile Phone:	
FAMILY INFORMATION				
Position of Daughter in Family? (eg. F	irst)			
Do you have other daughter's enrolle		Yes [□No	
Name of Brother/s and Sister/s	Date of Birth	Preschoo	ol/School/College	
ACCOUNT INFORMATION:				
	to now full tuition food f	for the duration (of my/our daughter's adjustion at Marian	
College. If my/our financial situation s			of my/our daughter's education at Marian counts Department.	
Mother's Signature:			Date:	
Father's Signature:	-		Date:	
Guardian's Signature:			Date:	
Person/s responsible for the receiving	g school fee statements	S:		
Name:				
Home Phone:	Business Phone:		Mobile Phone:	
Address:				
Signature:			Date:	
If English is not your primary language, and you need assistance in dealing with any school issues, please indicate a contact person we can speak to:				
Name:				
Home Phone:	Business Phone:		Mobile Phone:	
Address:				
Signature:			Date:	
Do you have a Centrelink Healthcare Card				
Does your daughter receive: You	th Allowance: 🗌 Yes	□ No o	r Abstudy: 🗆 Yes 🗆 No	

PUBLICATION OF STUDENT WORK AND PHOTOGRAPHS			
At certain times throughout the year, our students may have the opportunity to be photographed for our school publications, such as the school's newsletter, magazine, prospectus, brochures, displays, or website, or to promote the school in local newspapers.			
Please sign below indicating your permission for Marian College to publish your daughters work or photograph as indicated above.			
Parent/Guardian Signature: Date:			
The Catholic Education Office Melbourne (CEOM) and the Catholic Education Commission of Victoria Ltd (CECV) may also require student photographs in print and online promotional and educational materials.			
Please sign below indicating your permission for the CEOM & CECV to publish your daughters work or photograph as indicated above.			
Parent/Guardian Signature: Date:			
EXPECTATIONS OF MARIAN COLLEGE			
Upon enrolment at Marian College I/we agree to abide by the reasonable expectations of the College: • We will actively support the ideals and values of the College as expressed in the College Mission Statement. • We will fully support the Religious Education Program as offered by the College. • We will support participation of my/our daughter in activities considered by the College as a necessary part of the curriculum and the completion of all set work. • We will support the College's student behaviour expectations. • We will adhere and support the College's uniform expectations. • We will encourage our/my daughter to participate in co-curricular activities offered by the College. • We will agree to ensure that my/our daughter attends the College regularly and punctually. • We will support the College discipline policy. • We will agree to the payment of the school fees and levies as set by the Marian College Stewardship Council. • We will agree to the payment of any change of address or telephone numbers. • We will agree to the payment of a non-refundable Enrolment Fee once my/our daughter is accepted by the College. Signature of Father/Guardian: Date: Signature of Mother/Guardian: Date:			
HOW DID YOU FIND OUT ABOUT MARIAN COLLEGE?			
Marian College Website			
CHECKLIST: Please tick boxes once you have completed the following:			
Attached a photocopy of: Passport or Visa if born overseas Secondary School Reports (previous 2 years) School Report if attended an English Language Centre Completed & signed relevant questions regarding: Email Address for Receiving Marian News Permission to publish daughters photo			

196 Glengala Road, Sunshine West

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Marian College

196 Glengala Road, Sunshine West 3020

Phone 9363 1711 Fax: 9363 2386 www.mariansw.catholic.edu.au

STANDARD COLLECTION NOTICE

- The School collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil's enrolment at the School. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the School to provide schooling to the pupil and to enable them to take part in all the activities of the School.
- 2. Some of the information we collect is to satisfy the School's legal obligations, particularly to enable the School to discharge its duty of care.
- 3. Laws governing or relating to the operation of a school require certain information to be collected and disclosed. These include relevant Education Acts, and Public Health and Child Protection laws.
- Health information about pupils is sensitive information within the terms of the Australian Privacy
 Principles under the Privacy Act. We may ask you to provide medical reports about pupils from time to
 time.
- 5. The School from time to time discloses personal and sensitive information to others for administrative and educational purposes, including to facilitate the transfer of a pupil to another school. This includes to other schools, government departments, Catholic Education Office, the Catholic Education Commission, the School's local diocese and the parish, Schools within other Dioceses/other Dioceses, medical practitioners, and people providing services to the School, including specialist visiting teachers, sports coaches, volunteers and counsellors.
- 6. Personal information collected from pupils is regularly disclosed to their parents or guardians.
- 7. The School may store personal information in the 'cloud' which may mean that it resides on servers which are situated outside Australia.
- 8. The School's Privacy Policy sets out how parents or pupils may seek access to personal information collected about them. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the School's duty of care to the pupil, or where pupils have provided information in confidence.
- 9. The School Privacy Policy also sets out how you may complain about a breach of privacy and how the School will deal with such a complaint.
- 10. As you may know the School from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the School's fundraising activities solely for that purpose. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
- 11. On occasions information such as academic and sporting achievements, pupil activities and similar news is published in School newsletters and magazines and on our website. Photographs of pupil activities such as sporting events, school camps and school excursions may be taken for publication in School newsletters and magazines and on our website. The School will obtain separate permissions from the pupils' parent or guardian prior to publication if we would like to include photographs or other identifying material in promotional material for the school or otherwise make it available to the public such as on the internet.
- 12. We may include pupils' and pupils' parents' contact details in a class list and School directory.
- 13. If you provide the School with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the School and why, that they can access that information if they wish and that the School does not usually disclose this information to third parties.

Marian College , Sunshine West Standard Collection Notice July 2014