

Application for Enrolment

Arethusa College Values

Believe

At Arethusa, we will believe in our students, every day, until they can believe in themselves and believe in others.

Expect

We will raise the bar and expect of our students, until they can expect of themselves and step towards the exciting possibilities that surround them.

Celebrate

We will celebrate our students as they grow, until they can celebrate their lives and their journey and then be a part of celebrating those around them.

Please tick which Campuses you are applying for

Deception Bay Campus

Spring Hill Campus

Windsor Campus

When would you like the student to start?

Year:

Grade:

The following documents must be submitted with this application. Please contact the College if there are difficulties with this.

- Photograph of student
- Copy of student's Birth Certificate
- Copies of the student's last two school reports
- Copies of the students Naplan Results
- Visa documentation (if this student is not an Australian or New Zealand Citizen)
- Copies of any assessments or specialist reports (such as medical, speech therapy, psychologist, etc)
- Copies of any Legal orders
- Centerlink documents (if applying as an independent student)
- Professional Referral Form

Please return completed form and supporting documentation

In person to:

Arethusa Business Hub
1-83 Deception Bay Road,
Deception Bay Qld 4508

Or

Via post to:

Arethusa Business Hub
PO Box 565
Burpengary Qld 4505

Or

Scanned and emailed to:

enrolments@arethusa.qld.edu.au

PART 1: STUDENT DETAILS

Student's Legal First Name:

Middle/Other Names:

Student's Legal Surname:

Preferred Name:

Gender

Date of Birth:

Student's Phone Number:

Male

Other

Female

Students Email Address:

USI Number:

Student's Home Address:

Postcode:

Religion: *(if applicable)*

Is a Language other than English spoken at home?

No

Yes, Please specify:

Does the Student speak an Aboriginal Language?

Traditional Language

Aboriginal English

Creole

Is the Student of Aboriginal or Torres Strait Islander Origin Decent?

No

Aboriginal

Torres Strait Islander

Both Aboriginal & Torres Strait Islander

Country of Birth:

Australia

Other. Please Specify

Citizenship:

Australian Citizen

New Zealand Citizen

Other. Please Specify

Please complete section below if Student is not an Australian or New Zealand Citizen

Permanent Australian Resident

Visa Subclass

Visa Expiry Date

Temporary Visa Holder

Please ensure you submit visa documents with application

PART 1a: PREVIOUS SCHOOL DETAILS

Current School (If applicable):

Year/s enrolled:

Previous Schools (If applicable):

Year/s enrolled:

Please describe the student's current schooling situation: *(eg suspensions, expelled, school refusal, truancy, bullying, struggling at school, etc)*

Previous adjustments made in school:

Name of siblings currently or previously enrolled at Arethusa: *(If applicable)*

PART 1b: STUDENT MEDICAL DETAILS

Student's Medicare Card Number:

Cards Expiry Date:

Student's Healthcare Card Number:

Cards Expiry Date:

Student's Concession Card Number:

Cards Expiry Date:

Does the Student have Private Health Insurance? **No** **Yes, please give details**

Does the student suffer any of these medical conditions?

Anaphylaxis

Diabetes

Epilepsy

Severe Asthma

Moderate Asthma

Mild Asthma

If yes, please complete or have your doctor complete the appropriate management plan.

If yes, please include details and severity (mild, moderate or severe).

Any other known Childhood diseases, operations or major injuries?

Any Known allergies?

Any specific dietary requirements?

Please attach extra pages if there is not enough space in the boxes to list all information

Please include with your application copies of any information/reports from doctors, specialists or other professionals

Students current swimming ability

Can't swim Struggles swimming Comfortable swimmer Strong swimmer

Permission to administer paracetamol if needed? (dosage will be as per the box/bottle for the students age)

No Yes

Does the student take any regular medication? (prescribed or over the counter)

No Yes, please write details and dosage

Will the student require any medication to be taken at school? (regular or occasional)

No Yes, please write details and dosage

Has the Student received the full program of standard childhood immunisations? (up to current age)

Yes No. If no, please list the immunisation the student has received

PART 2: EDUCATION NEEDS

2a: In Class Support

Has the Student received adjustments to assist them to participate in schooling in their previous schools?

No	Yes, please specify
Emotional Regulation Support	Reading/Writing Support
Behavioural Support	Mathematics Support

Do you consider the student to have difficulties with learning?

No	Yes, please specify	
Anxiety that stops learning	Reading/writing issues	Difficulties managing time
Difficulty with verbal instruction	Memory Issues	Difficulties organising self
Difficulty with written instruction	Attention Issues	Issues working with others
Difficulty speaking with Adults	Difficulty with Mathematics	Difficulty regulating emotions

Has the Student used special Education, Learning Support or Guidance from previous education providers?

No	Yes, please give details	
Individual Education Plan	In Class Support	Reading/Writing Support
Behaviour Support	Guidance Officer Support	Mathematics Support
Speech Therapy	Other, please specify	

Has your Student been professionally diagnosed with any of the following (Tick all that apply)

Hearing Impairment	Physical Impairment	Visual Impairments
Speech Language Impairment	Intellectual Disability	Social/Emotional Disorder
ASD (Autism, Asperger's, PDD-NOS)	ADD/ADHD	Dyslexia
Borderline Intellectual Difficulties	Speech/Language Difficulties	Dyspraxia
Operational Defiant Disorder	Conduct Disorder	Sensory Processing
Other, please specify:		

Year of Initial Diagnosis:

Reviewed:

Was the Student a verified student with a disability at their previous school? **Yes** **No**

If yes, what was the AIMS number, if you know it:

Please provide any supporting documents with the enrollment application.

2c: Professional Support

Has the Student been assessed or supported by any of the following specialist services? *(leave blank if does not apply to the student)*

Psychiatrist	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:
Psychologist	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:
Paediatrician	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:
General Practitioner	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:
Speech Therapist:	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:
Occupational Therapist:	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:
Optometrist:	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:
Youth Justice	Name:	Organisation:
	Phone:	Email:
Is the support current and ongoing?	Yes	No Year of last appointment:

(CYMHS) Child & Youth Mental Health Service: Name: Organisation:
 Phone: Email:
 Is the support current and ongoing? Yes No Year of last appointment:

Family Support Service: Name: Organisation:
 Phone: Email:
 Is the support current and ongoing? Yes No Year of last appointment:

Other: Name: Organisation:
 Phone: Email:
 Is the support current and ongoing? Yes No Year of last appointment:

Other: Name: Organisation:
 Phone: Email:
 Is the support current and ongoing? Yes No Year of last appointment:

I/we give permission for Arethusa College to contact the external stakeholders and specialist support teams mentioned above, for further information to support the application.

With whom does the Student normally live?

Both parents at the same address Both parents at different addresses (shared parenting arrangement)
 Mother Father Grandparents Other, please specify

Are there any current or historic legal orders relating to this student? (eg parenting orders or court documents) No Yes, current orders Yes, historic orders

If yes, copies of current orders must be included with this application. Originals will need to be sighted at interview.

Is the Student applying for enrolment as an independent student?

No Yes. Centrelink number:

If you are applying as an independent student, you will need to provide evidence of your independence (Centrelink documents)

Is there any other health, medical or background information we need to know about this student?

Is there any other information that you consider would be helpful in the nurture and education of this student?

PART 3: FAMILY DETAILS

Please list details for biological parents as well as those who have parental responsibility for the student (eg step-parents)

Parent/Carer 1 (generally the first person to contact during school hours)

First Name:

Surname:

Preferred Name:

Gender

Title(Mr, Ms, Mrs, Dr, etc)

M F

Other

Home Phone:

Mobile Phone:

Email Address/es:

Home address:

Postal address (if different from above):

Partner/Spouses Name:

Occupation:

Work Phone:

Workplace/Company Name:

Work Email:

Is a language other than English Spoken at Home?

Do you speak an Aboriginal Language?

No Yes, please specify:

Traditional Language Aboriginal English Creole

Highest level of school education completed:

Year 12 or equivalent Year 11 or equivalent Year 10 or equivalent Year 9 or equivalent

Highest level of non-school education completed:

Bachelor Degree or above Diploma Certificate I or IV None

Occupation Group: (see descriptions on pg 10)

1 2 3 4 8

Relationship to student:

Student lives with Parent/Carer 1:

Full-time Part-time Does not live with

Is there any other information we need to know about Parent/Carer 1 or their relationship to the student? (eg contact limitations, legal orders, family issues, etc)

If there are any legal matters or court orders, please ensure you submit the paperwork with the enrolment form.

Parent/Carer 2

First Name:

Surname:

Preferred Name:

Gender

Title(Mr, Ms, Mrs, Dr, etc)

M F

Other

Home Phone:

Mobile Phone:

Email Address/es:

Home address:

Postal address (if different from above):

Partner/Spouses Name:

Occupation:

Work Phone:

Workplace/Company Name:

Work Email:

Is a language other than English Spoken at Home?

Do you speak an Aboriginal Language?

No Yes, please specify:

Traditional Language Aboriginal English Creole

Highest level of school education completed:

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Occupation Group: (see descriptions on pg 10)

1 2 3 4 8

Relationship to student:

Student lives with Parent/Carer:

Full-time Part-time Does not live with

Is there any other information we need to know about Parent/Carer 1 or their relationship to the student? (eg contact limitations, legal orders, family issues, etc)

If there are any legal matters or court orders, please ensure you submit the paperwork with the enrolment form.

Additional or Emergency Contact for this Student

First Name:

Surname:

Preferred Name:

Gender:

Title(Mr,Ms,Mrs,Dr, etc)

M F

Other

Home Phone:

Mobile Phone:

Work Phone:

Address:

Email Address/es (if this person would like to receive school newsletters etc)

Relationship to student:

Student lives with Carer:

Full-time

Part-time

Does not live with

PART 4: EXTERNAL STAKEHOLDERS (GUARDIAN)

Please complete if an external organisation (eg. Child Safety) holds **guardianships** of this student. Leave blank if it does not apply for this student

Name of Organisation:

Phone:

Address:

Email:

Primary contact in relation to this student:

Job title in relation to this student:

Contact number/s:

Email Address/es:

Additional Organisation Contacts: (Name, phone, job title, etc.)

Who can sign forms and documents in relationship to this student? (eg permission forms, etc)

PART 5: DECLARATION

- I/we apply to have the student named in this application enrolled at Arethusa College.
- I/we understand that this application is made without any implication that an offer of enrolment at Arethusa College will be made.
- I/we understand that under normal circumstances Arethusa College requires any prospective student to attend an interview with the Principal (or Principal's representative) before an offer of enrolment can be made.
- I/we understand that to accept an offer of enrolment at Arethusa College we must accept the school's Terms & Conditions of Enrolment.
- I/we understand that this application may not be processed until all required documents have been provided.
- I/we declare that the information we have supplied on this form is complete, true and correct, and understand that inaccurate, incomplete or misleading information may jeopardise enrolment.
- I/we give permission for external stakeholders to be contacted to support the students application

Parent/Carer 1 Signature:

Date:

Parent/Carer 2 Signature:

Date:

Or

I wish to apply for an enrolment as an **Independent Student** and will be responsible for signing all college form and payment of all accounts.

Student Signature:

Date:

Or

Signed for on behalf of the organisation that holds **legal guardianship** for this student

Name:

Signature:

Position:

Date:

Is the application fully complete?

Please complete the checklist to ensure that the following documents are attached to the application before submitting

Photograph of student (headshot)
Copy of students last two school reports
Copies of any assessments or specialist report
Visa documentation (of not an Auz or NZ Citizen)
Professional Referral Form

Copt of students Birth Certificate
Copies of students Naplan Results
Copies of any Legal orders
Copies of Centrelink documents
(if independent student)

Please return completed form and supporting documentation

In person to:

Arethusa Business Hub
1-83 Deception Bay Road,
Deception Bay Qld 4508

Or

Via post to:

Arethusa Business Hub
PO Box 565
Burpengary Qld 4505

Or

Scanned and emailed to:

enrolments@arethusa.qld.edu.au

PARENT/CARER OCCUPATION GROUPS	
<p>Group 1</p> <p>Senior management in large business organisation, government administration and defence, and qualified professionals</p>	<p>Senior executive/manager/department head in industry, commerce, media or other large organisation.</p> <p>Public service manager (Section head or above), regional director, health/education/police/fire services administrator</p> <p>Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]</p> <p>Defence Forces Commissioned Office</p> <p>Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing professional</p> <p>Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]</p> <p>Air/sea transport [aircraft/ship's captain/pilot, flight officer, flying instructor, air traffic controller]</p>
<p>Group 2</p> <p>Other business manager, arts/media/sports persons and associate professionals</p>	<p>Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business</p> <p>Specialist manager [finance/engineering/production/personnel/industrial relations/sales/marketing]</p> <p>Financial services manager [bank branch manager, finance/investment/insurance broker, credit/loans officer]</p> <p>Retail sales/service manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]</p> <p>Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official]</p> <p>Associate professionals generally have diploma/technical qualifications and support managers and professionals.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional</p> <p>Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]</p>
<p>Group 3</p> <p>Tradesmen/women, clerks and skilled office, sales and service staff</p>	<p>Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. <i>All tradesmen/women are included in this group.</i></p> <p>Clerks [bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk]</p> <p>Skilled office, sales and service staff.</p> <p>Office [secretary, personal assistant, desktop publishing operator, switchboard operator]</p> <p>Sales [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]</p> <p>Service [aged/disabled/refuge /child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]</p>
<p>Group 4</p> <p>Machine operators, hospitality staff, assistants, labourers and related workers</p>	<p>Drivers, mobile plant, production/processing machinery and other machinery operators.</p> <p>Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]</p> <p>Office assistants, sales assistants and other assistants.</p> <p>Office [typist, word processing/data entry/business machine operator, receptionist, office assistant]</p> <p>Sales [sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker]</p> <p>Assistant/aide [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]</p> <p>Labourers and related workers</p> <p>Defence Forces ranks below senior NCO not included above</p> <p>Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]</p> <p>Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]</p>
<p>Group 8</p>	<p>Not in paid work for the last 12 months.</p>