SCHOOL ENROLMENT FORM

INFORMATION PRIVACY STATEMENT

The Department for Education and Child Development (DECD) is committed to respecting the confidentiality of information provided by children/students and parents, for example, information requested on child/student enrolment forms. The information in this form is required by the Education Regulations 2012. It is requested to enable DECD to:
- Undertake administration and care responsibilities including maintaining emergency contact information;
- Communicate with you about important matters;
- Provide first aid and plan for child/student health support requirements;
- Provide all information required for resource entitlements;
- Collect necessary statistical information and undertake analysis of the composition and performance of the child/student population; and
- Meet reporting requirements, including to other government authorities and funding agencies.

If organisations are contracted on behalf of DECD to undertake tasks which require access to enrolment data, the contract(s) between DECD and those organisations will include strict confidentiality and disposal provisions.

It is a Commonwealth Government requirement that all schools across Australia ask the questions marked □ on their school enrolment forms. Although some items on the enrolment form are not mandatory to complete under the national regulations, provision of this information will be beneficial to your child’s school/preschool for planning and resourcing decisions.

The information provided in Enrolment Forms is stored securely in local school and Departmental databases. Information from your enrolment form may be transferred electronically from one site to another as your child moves locations between levels of education. Any such transferred information will be updated by information provided on the current enrolment form. While your child is enrolled in a DECD site other information will be gathered relating to your child’s education and wellbeing; for example records of learning progress, absences from school, behaviour, health and social development reports, observations and assessments. The management of these data is governed by Australian, State and Departmental policies to ensure that the information is used only for the purposes stated above and is secure, private and confidential. Only unidentifiable data is reported to the Commonwealth and DECD may also provide de-identified student information for research where appropriate based on DECD operating principles and ethics guidelines. The disclosure of personal information held by Government is regulated by the Information Privacy Principles (see http://dpc.sa.gov.au/sites/default/files/pubimages/Circulars/PC012_Privacy_0.pdf). Unless required to do so by a law of the State or Commonwealth, or as permitted by the Information Privacy Principles or in accordance with the ISG (see below), the Department will not otherwise disclose the information to others without your consent.

INFORMATION SHARING STATEMENT

There will be occasions where sharing information with others outside DECD will be important to your child’s educational progress, safety or wellbeing. In these circumstances DECD follows the SA Government’s Information Sharing: Guidelines for Promoting the Safety and Wellbeing of Children, Young People and Families (ISG) www.gcyp.sa.gov.au. Under the ISG your consent for the sharing of personal information about your child will be sought and respected in all situations unless:
- It is unsafe / impossible to gain consent or consent has been refused; and
- Without information being shared, a child or children will be at increased risk of serious harm.

The aim of information sharing under the ISG is to protect and promote the safety and wellbeing of children, young people and their families. This site works with parents/caregivers and other agencies/services to achieve that aim. Parents /caregivers are strongly encouraged to share all information relevant to their child’s capacity to enjoy and benefit from education:
- By using the ‘any other information’ section of this form; and/or
- In discussion with staff at the time of enrolment; and/or
- In discussion with staff at any time in the future.

Has the person conducting the interview explained the Information Privacy Statement and Information Sharing Statement?

Parent/Guardian signature

School Enrolment Form Version 2.5 July 2014
Refer to the occupation groups listed below when completing the questions on page 3.

<table>
<thead>
<tr>
<th>Group 4</th>
<th>Group 3</th>
<th>Group 2</th>
<th>Group 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Occupations</td>
<td>Trades and advanced / intermediate clerical, sales and service staff</td>
<td>Other business managers, Arts / Media/ Sportspersons and associate Professionals</td>
<td>Senior management in large business organisation, government administration and defence, and qualified professionals</td>
</tr>
</tbody>
</table>

**Drivers**
Mobile plant, Production/Processing, Machinery, Other machinery Operators.

**Hospitality staff**
Hotel service supervisor, Receptionist, Waiter, Bar attendant, Kitchen hand, Porter, Housekeeper.

**Office assistants**
Typist, Word processing, Data entry, Business Machine Operator, Receptionist, Office assistant.

**Sales assistants**
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.

**Assistant/aide**
Trade’s assistant, School/ Teacher’s aide, Dental assistant, Veterinary nurse, Nursing assistant, Museum/gallery attendant, Usber, Home helper, Salon assistant, Animal attendant.

**Labourers and related workers**
Defence Forces
Other ranks below senior NCO not included above.

**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.

**Other worker**
Labourer, Factory hand, Storeman, Guard, cleaner, Caretaker, Laundry worker, Trolley collector, Car park Attendant, Crossing Supervisor.

**Tradesmen/women**
Generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.

**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.

**Skilled Office Staff**
Secretary, Personal assistant, Desktop publishing operator, Switchboard operator.

**Skilled Sales Staff**
Company sales representative, Auctioneer, Insurance agent/ Assessor/ Loss adjuster, Market researcher.

**Skilled Service Staff**

**Owner/manager**
Farm, Construction, Import/ Export, Wholesale, Manufacturing, Transport, Real estate business.

**Specialist manager**
Finance, Engineering, Production, Personnel, Industrial relations, Sales/marketing.

**Financial services manager**
Bank branch manager, Finance/ investment/ insurance, Broker, Credit/ loans officer.

**Retail sales/services manager**
Shop petrol station, Restaurant club, Hotel/ Motel, Cinema, Theatre agency.

**Commissioned Officer**
Defence Forces
Commissioned Officer.

**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.

Professional.

**Business**
Management consultant, Business analyst, Accountant, Auditor, Policy analyst, Actuary, Valuer.

**Air/sea transport**
Aircraft/ship’s Captain/ Officer/ Pilot, Flight officer, Flying instructor, Air traffic controller.

Parent’s education, qualification and occupation

The questions about each parent/guardian’s education, qualifications and employment group are asked on all school enrolment forms.

In South Australia this information is used in determining each school’s Index of Educational Disadvantage (IED), which is linked to funding levels and may be used to allocate resources to Preschool services. In the future this information may be used to determine resource allocations to Preschools.
### Biological Parent 1 or Legal Guardian 1

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
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<tbody>
<tr>
<td>Mr/Mrs/Ms/Other:</td>
<td></td>
</tr>
<tr>
<td>Family Name:</td>
<td></td>
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<tr>
<td>Given Names:</td>
<td></td>
</tr>
<tr>
<td>Sex:</td>
<td>Male</td>
</tr>
<tr>
<td>Relationship to student:</td>
<td></td>
</tr>
<tr>
<td>Employment Status:</td>
<td></td>
</tr>
<tr>
<td>Occupation:</td>
<td></td>
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</tbody>
</table>

- **What is the occupation group of parent 1 / guardian 1?**
  - Please select the appropriate parental occupation group from the list on page 2.
  - If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person’s last occupation.
  - If the person has not been in paid work in the last 12 months, enter 8 above.

| Work Location: |         |
| Work Phone Number: |         |
| P/G1 Mobile Phone: |         |

- **What is the highest year of primary or secondary school the parent 1 / guardian 1 has completed?** (For persons who never attended school, select ‘Year 9 or equivalent or below.’)
  - Year 12 or equivalent: 4
  - Year 11 or equivalent: 3
  - Year 10 or equivalent: 2
  - Year 9 or equivalent or below: 1

- **What is the level of the highest qualification the parent 1 / guardian 1 has completed?**
  - Bachelor degree or above: 7
  - Advanced diploma / Diploma: 6
  - Certificate I to IV (including trade certificate): 5
  - No non-school qualification: 8

| In which country was the parent 1 / guardian 1 born? |         |

- **Does the parent 1 / guardian 1 speak a language other than English at home?**
  - No, English only: No
  - Yes: Yes

If yes, what is the main language the parent 1 / guardian 1 speaks at home?

- **Does this Parent or Guardian require an interpreter?**
  - No: No
  - Yes: Yes

Translation required: No Yes

Language for Translation: [ ]

**What is the cultural background of Parent 1 / Guardian 1?**

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### Biological Parent 2 or Legal Guardian 2 (optional)

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
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<tbody>
<tr>
<td>Mr/Mrs/Ms/Other:</td>
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<tr>
<td>Family Name:</td>
<td></td>
</tr>
<tr>
<td>Given Names:</td>
<td></td>
</tr>
<tr>
<td>Sex:</td>
<td>Male</td>
</tr>
<tr>
<td>Relationship to student:</td>
<td></td>
</tr>
<tr>
<td>Employment Status:</td>
<td></td>
</tr>
<tr>
<td>Occupation:</td>
<td></td>
</tr>
</tbody>
</table>

- **What is the occupation group of parent 2 / guardian 2?**
  - Please select the appropriate parental occupation group from the list on page 2.
  - If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person’s last occupation.
  - If the person has not been in paid work in the last 12 months, enter 8 above.

| Work Location: |         |
| Work Phone Number: |         |
| P/G2 Mobile Phone: |         |

- **What is the highest year of primary or secondary school the parent 2 / guardian 2 has completed?** (For persons who never attended school, select ‘Year 9 or equivalent or below.’)
  - Year 12 or equivalent: 4
  - Year 11 or equivalent: 3
  - Year 10 or equivalent: 2
  - Year 9 or equivalent or below: 1

- **What is the level of the highest qualification the parent 2 / guardian 2 has completed?**
  - Bachelor degree or above: 7
  - Advanced diploma / Diploma: 6
  - Certificate I to IV (including trade certificate): 5
  - No non-school qualification: 8

| In which country was the parent 2 / guardian 2 born? |         |

- **Does the parent 2 / guardian 2 speak a language other than English at home?**
  - No, English only: No
  - Yes: Yes

If yes, what is the main language the parent 2 / guardian 2 speaks at home?

- **Does this Parent or Guardian require an interpreter?**
  - No: No
  - Yes: Yes

Translation required: No Yes

Language for Translation: [ ]

**What is the cultural background of Parent 2 / Guardian 2?**
**Student Personal Details**

**Family Name:**

**Given Names:**

**Preferred Name:**

**Date of Birth:**

Has proof of Birth been provided?  No [ ] Yes [ ]

**Sex**

Male [ ]  Female [ ]

How far does the student live from the School?

Has this student been approved for School Card Assistance at his/her previous school?  No [ ] Yes [ ]

**Is the student of Australian Aboriginal or Torres Strait Islander origin?**

(For persons of both Australian Aboriginal or Torres Strait Islander origin, tick both ‘Yes’ boxes.)

No [ ] Yes, Australian Aboriginal [ ] Yes, Torres Strait Islander [ ]

What is the student’s previous school?

If overseas, nominate country. If interstate, nominate state.

If no previous school, nominate preschool, kindergarten, etc.

**In which country was the student born?**

Australia [ ]  Other – please specify

For a student born Overseas with a date of Arrival in Australia on or after 1/1/2006, a “Visa subclass” must be entered. Refer to Visa in passport or visa grant letter for e-visas. Some temporary residents are required to pay fees and must have a letter of offer/confirmation from International Education Services. Refer Overseas Student Factsheet: [http://ssonet.sa.edu.au](http://ssonet.sa.edu.au) – Select Administration, Data/Info Services, School Information, Factsheets.

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

**Visa Sub-class:**

**Refugee:** Permission to Flag?  No [ ] Yes [ ]

**Religion:** (Optional)

What is the student’s cultural background?

Does the site need to be aware of any cultural and/or religious requirements? Please advise:

**Does the student speak a language other than English at home?**

No, English only [ ] Yes [ ]

If Yes, what languages (including English) does the student speak at home?

Main language [ ] Other language/s [ ]

Does the student attend an after hours Ethnic School?  No [ ] Yes [ ]

If Yes, which school? [ ] Which language is studied?

Is this student under the Guardianship of the Minister for Families and Communities (GoM) or in Alternative Care?  No [ ] Yes [ ]

If Yes, further details must be obtained from the confidential Families SA-DECD Information Sharing Form as supplied to the school principal by the child/student’s Families SA caseworker. This form will provide the necessary information for data input.

Does this student receive AUSTUDY?  No [ ] Yes [ ]

Does this student receive ABSTUDY?  No [ ] Yes [ ]
## Family Details

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Phone Number:</td>
<td></td>
</tr>
<tr>
<td>Silent?</td>
<td>No ❑ Yes ❑</td>
</tr>
<tr>
<td>Family Mobile Phone:</td>
<td></td>
</tr>
<tr>
<td>Family Email Address:</td>
<td></td>
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</tbody>
</table>

## Student Address Details (Please provide proof of Residence)

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

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Title:</td>
<td></td>
</tr>
<tr>
<td>Address Line 1:</td>
<td></td>
</tr>
<tr>
<td>Address Line 2:</td>
<td></td>
</tr>
<tr>
<td>Suburb/Town:</td>
<td></td>
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<tr>
<td>Postcode:</td>
<td></td>
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<tr>
<td>Country:</td>
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<td>(If not Australia)</td>
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<td>Hundred: *</td>
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<tr>
<td>Section: *</td>
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<td>RAPID No:</td>
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<td>(If applicable)</td>
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<td>UHF:</td>
<td>MHz</td>
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<tr>
<th>Field</th>
<th>Information</th>
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</thead>
<tbody>
<tr>
<td>Student Mobile Phone:</td>
<td></td>
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<tr>
<td>Student’s Email Address:</td>
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</table>

### Residential Address
(If different from Mailing Address)

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
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</thead>
<tbody>
<tr>
<td>Mailing Title:</td>
<td></td>
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<tr>
<td>Address Line 1:</td>
<td></td>
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<tr>
<td>Address Line 2:</td>
<td></td>
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<tr>
<td>Suburb/Town:</td>
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<td>Postcode:</td>
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<td>UHF:</td>
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<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Mobile Phone:</td>
<td></td>
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<tr>
<td>Student’s Email Address:</td>
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</tbody>
</table>

If you have other addresses which need to be documented (B – Billing, H – Holiday, S – SACE Mail, T – Term) please note in any other information/comments page 8.

## Has proof of Residence Documentation been provided?  
Yes ❑ No ❑
Emergency Contacts if Parent or Guardian cannot be contacted or unable to collect student.
Note: Includes permission to provide overnight care.

Priority 1. Name: [Field] Home Phone: [Field] Silent [☐]
   Mobile Phone: [Field]
   Relationship: [Field]
   Work Phone: [Field] Ext: [Field]

Priority 2. Name: [Field] Home Phone: [Field] Silent [☐]
   Mobile Phone: [Field]
   Relationship: [Field]
   Work Phone: [Field] Ext: [Field]

Priority 3. Name: [Field] Home Phone: [Field] Silent [☐]
   Mobile Phone: [Field]
   Relationship: [Field]
   Work Phone: [Field] Ext: [Field]

Priority 4. Name: [Field] Home Phone: [Field] Silent [☐]
   Mobile Phone: [Field]
   Relationship: [Field]
   Work Phone: [Field] Ext: [Field]

Transport to School

Usual mode of transport: [Field]
Bus Pass No: [Field]
School Bus Route AM1: Stop: [Field] Time: [ ]:
School Bus Route AM2: Stop: [Field] Time: [ ]:
School Bus Route PM1 Stop: [Field] Time: [ ]:
School Bus Route PM2 Stop: [Field] Time: [ ]:
Conveyance Allowance: [Field] (Approval Number) Allowance Expiry Date: [Field]
Vehicle Reg. No: [Field] Driver if other student: [Field]

Medical Conditions

Does your child have a diagnosed medical condition which might need first aid? No [☐] Yes [☐]
If Yes, please tick relevant conditions:
   Acquired Brain Injury [☐] Severe Allergy Anaphylaxis [☐] Asthma [☐] Heart Condition [☐] Cystic Fibrosis [☐] Continence [☐]
   Cerebral Palsy [☐] Diabetes [☐] Gastrostomy [☐] Joint Conditions [☐] Mild Allergy [☐] Medication [☐]
   Oral Eating and Drinking [☐] Oncology [☐] Seizures [☐] Transfer and Positioning [☐] Visually Impaired [☐] Other [☐]
   Other (specify) ____________________________________________________________________________________________________

Does your child need extra routine health support? No [☐] Yes [☐]
(e.g. support with medication management, continence care, psychological issues)
If Yes, the school will need a health care plan from the treating doctor/health professional.
Is plan attached? No [☐] Yes [☐]
Court Orders

Are there any current Court-sanctioned orders relating to this student?  

No ☐  Yes ☐

* If Yes, please attach a copy of the order for the school’s records.

On what date was the Full Court order issued? 

Details:

Other Parent/Guardian/Carer not residing at same address as student

Mr/Mrs/Ms/Other: 

Family Name: 

Given Names: 

Sex: Male ☐  Female ☐

Relationship to student: 

Mailing Title: 

Address Line 1: 

Address Line 2: 

Address Line 3: 

Suburb/Town: 

Postcode: 

Country: 

Email Address: 

Brothers and Sisters

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Sex</th>
<th>Date of Birth</th>
<th>Attends this School?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>No ☐  Yes ☐</td>
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<td>No ☐  Yes ☐</td>
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<td>No ☐  Yes ☐</td>
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<tr>
<td></td>
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<td></td>
<td>No ☐  Yes ☐</td>
</tr>
</tbody>
</table>
Other Schools Attended

Has your child previously attended a Department for Education and Child Development kindy/school?  No ☐  Yes ☐

If Yes, please specify the last Department for Education and Child Development kindy/school attended:

List the two most recent schools attended. If unsure of dates, please estimate.

<table>
<thead>
<tr>
<th>Kindy/School</th>
<th>From</th>
<th>To</th>
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<tbody>
<tr>
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</tbody>
</table>

Any other information/comments

Parent/Guardian Signatures

by signing this form you certify that all information given is true and accurate

Signature of Biological Parent 1 / Legal Guardian 1: ____________________________
Date: ____________

Signature of Biological Parent 2 / Legal Guardian 2: ____________________________
Date: ____________

Enrolment Interviewer: ____________________________

Data Entry Person: ____________________________