



Name of Student:

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

Group 4 Other Occupations	Group 3 Trades and advanced / intermediate clerical, sales and service staff	Group 2 Other business managers, Arts / Media/ Sportpersons and associate Professionals	Group 1 Senior management in large business organisation, government administration and defence, and qualified professionals
Drivers Mobile plant, Production/ Processing, Machinery, Other machinery Operators.	Tradesmen/women Generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.	Owner/manager Farm, Construction, Import/ Export, Wholesale, Manufacturing, Transport, Real estate business.	Senior executive/ manager/ department head in industry, commerce, media or other large organisation.
Hospitality staff Hotel service supervisor, Receptionist, Waiter, Bar attendant, Kitchen hand, Porter, Housekeeper.	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.	Specialist manager Finance, Engineering, Production, Personnel, Industrial relations, Sales/marketing.	Public service manager (Section head or above), Regional Director, Health/ Education/ Police/ Fire services, Administrator.
Office assistants Typist, Word processing, Data entry, Business Machine Operator, Receptionist, Office assistant.	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.	Financial services manager Bank branch manager, Finance/ investment/ insurance, Broker, Credit/ loans officer.	Other administrator School Principal, Faculty head/Dean, Library/Museum/Gallery director, Research facility director.
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.	Skilled Office Staff Secretary, Personal assistant, Desktop publishing operator, Switchboard operator.	Retail sales/services manager Shop petrol station, Restaurant club, Hotel/ Motel, Cinema, Theatre agency.	Defence Forces Commissioned Officer.
Assistant/aide Trade's assistant, School/ Teacher's aide, Dental assistant, Veterinary nurse, Nursing assistant, Museum/gallery attendant, Usher, Home helper, Salon assistant, Animal attendant.	Skilled Sales Staff Company sales representative, Auctioneer, Insurance agent/ Assessor/ Loss adjuster, Market researcher.	Arts/media/sports Musician, Actor, Dancer, Painter, Potter, Sculptor, Journalist, Author, Media presenter/photographer, Designer, Illustrator, Prof reader sportsman/woman, Coach trainer, Sports official.	Professionals Generally have degree or higher qualifications and experience in applying this knowledge to: <ul style="list-style-type: none">▪ Design, develop or operate complex systems;▪ Identify, treat and advise on problems;▪ And teach others.
Labourers and related workers	Skilled Service Staff 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.	Associate professionals Generally have diploma/ Technical qualifications, Support managers and professionals.	Health, Education, Law, Social Welfare, Engineering, Science, Computing, Professional.
Defence Forces Other ranks below senior NCO not included above.		Health, Education, Law, Social Welfare, Engineering, Science, Computing Technician/ Associate professional.	Business Management consultant, Business analyst, Accountant, Auditor, Policy analyst, Actuary, Valuer.
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.		Business/administration Recruitment/ Employment/ Industrial relations/ Training officer. Marketing/ Advertising specialist, Market research analyst, Technical sales representative, Retail buyer, Office/project manager.	Air/sea transport Aircraft/ship's Captain/ Officer/ Pilot, Flight officer, Flying instructor, Air traffic controller.
Other worker Labourer, Factory hand, Storeman, Guard, cleaner, Caretaker, Laundry worker, Trolley collector, Car park Attendant, Crossing Supervisor.		Defence Forces Senior Non-Commissioned officer.	
Parent's education, qualification and occupation			
<p>The questions about each parent/guardian's education, qualifications and employment group are asked on all school enrolment forms.</p> <p>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.</p>			

Biological Parent 1 or Legal Guardian 1

Mr/Mrs/Ms/Other:

Family Name:

Given Names:

Sex: Male Female

Relationship to student:

Employment Status:

Occupation:

* 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 | <input type="checkbox"/> | 4 |
| Year 11 or equivalent | <input type="checkbox"/> | 3 |
| Year 10 or equivalent | <input type="checkbox"/> | 2 |
| Year 9 or equivalent or below | <input type="checkbox"/> | 1 |

* What is the level of the highest qualification the parent 1 / guardian 1 has completed?

- | | | |
|---|--------------------------|---|
| Bachelor degree or above | <input type="checkbox"/> | 7 |
| Advanced diploma / Diploma | <input type="checkbox"/> | 6 |
| Certificate I to IV (including trade certificate) | <input type="checkbox"/> | 5 |
| No non-school qualification | <input type="checkbox"/> | 8 |

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

If not born in Australia, what was the date the parent 1/ guardian 1 arrived in Australia?

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

Translation required: No Yes

Language for Translation:

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

Biological Parent 2 or Legal Guardian 2 (optional)

Mr/Mrs/Ms/Other:

Family Name:

Given Names:

Sex: Male Female

Relationship to student:

Employment Status:

Occupation:

* 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 | <input type="checkbox"/> | 4 |
| Year 11 or equivalent | <input type="checkbox"/> | 3 |
| Year 10 or equivalent | <input type="checkbox"/> | 2 |
| Year 9 or equivalent or below | <input type="checkbox"/> | 1 |

* What is the level of the highest qualification the parent 2 / guardian 2 has completed?

- | | | |
|---|--------------------------|---|
| Bachelor degree or above | <input type="checkbox"/> | 7 |
| Advanced diploma / Diploma | <input type="checkbox"/> | 6 |
| Certificate I to IV (including trade certificate) | <input type="checkbox"/> | 5 |
| No non-school qualification | <input type="checkbox"/> | 8 |

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

If not born in Australia, what was the date the parent 2 / guardian 2 arrived in Australia?

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

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>. Select Administration, Data/Info Services, School Information, Factsheets.

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

Visa Sub-class: _____

Religion: (Optional) _____

Refugee: Permission to Flag? No Yes

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

Family Phone Number: _____ Silent? No Yes

Family Mobile Phone: _____

Family Email Address: _____

Student Address Details (Please provide proof of Residence)

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

Mailing Title: _____

Address Line 1: _____

Address Line 2: _____

Suburb/Town: _____

Postcode: _____ Student Mobile Phone: _____

Country: _____
(If not Australia)

Hundred: * _____ Section: * _____

RAPID No: _____ (If applicable) UHF: _____ MHz

Student's Email Address: _____

Residential Address (If different from Mailing Address)

Mailing Title: _____

Address Line 1: _____

Address Line 2: _____

Suburb/Town: _____

Postcode: _____ Student Mobile Phone: _____

Country: _____
(If not Australia)

Hundred: * _____ Section: * _____

RAPID No: _____ (If applicable) UHF: _____ MHz

Student's Email Address: _____

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:

Home Phone: _____ Silent

Mobile Phone: _____

Relationship:

Work Phone: _____ Ext: _____

Priority

2. Name:

Home Phone: _____ Silent

Mobile Phone: _____

Work Phone: _____ Ext: _____

Priority

3. Name:

Home Phone: _____ Silent

Mobile Phone: _____

Work Phone: _____ Ext: _____

Priority

4. Name:

Home Phone: _____ Silent

Mobile Phone: _____

Work Phone: _____ Ext: _____

Transport to School

Usual mode of transport:

Bus Pass No: _____

School Bus Route AM1:

Stop: _____ Time: _____

School Bus Route AM2:

Stop: _____ Time: _____

School Bus Route PM1:

Stop: _____ Time: _____

School Bus Route PM2:

Stop: _____ Time: _____

Conveyance Allowance:

(Approval Number)

Allowance Expiry Date: _____

Vehicle Reg. No:

Driver if other student:

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		Sex:	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Family Name:		Phone Number:	Silent <input type="checkbox"/>	
Given Names:		<input type="text"/> / <input type="text"/> / <input type="text"/>		
Relationship to student		IDD	Area	
Mailing Title:		Mobile Phone: <input type="text"/>		
Address Line 1:				
Address Line 2:				
Address Line 3:				
Suburb/Town:				
Postcode:				
Country:				
Email Address:				

Brothers and Sisters

Full Name	Sex	Date of Birth	Attends this School?
	Male <input type="checkbox"/> Female <input type="checkbox"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
	Male <input type="checkbox"/> Female <input type="checkbox"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
	Male <input type="checkbox"/> Female <input type="checkbox"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
	Male <input type="checkbox"/> Female <input type="checkbox"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes

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:

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

Kindy/ School	From	To

From		

To		

Any other information/comments

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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:

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Signature of Biological Parent 2 / Legal Guardian 2:

Date:

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Enrolment Interviewer:

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Data Entry Person:

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