

Application for Enrolment



NAZARETH
COLLEGE

Student Details:

Victorian Student Number (VSN):

Surname:

Gender:

Given Names:

Current School:

Current Year Level:

Date of Birth:

Country of Birth:

Australian Citizen: Yes ☐ No ☐

or

Permanent Resident Status: Yes ☐ No ☐

Please enclose a photocopy of the student's birth certificate. If the applicant was born outside Australia please nominate residential status and enclose proof of Australian Citizenship/Permanent Residence Status.

Religion: Student was baptised in the Parish of:

Proposed entry to Nazareth at Year Level: Year of entry: 20

Name/s of other children currently attending or past pupils of Nazareth (if applicable):

No. of children in family: Student's place in family: Language spoken at home:

Please tick any of the following (or other) areas that may affect your child's schooling.

exceptional abilities ☐ special needs – language/literacy/numeracy ☐ behavioural ☐

medical condition ☐ Please provide details:

other ☐ Please provide details:

Does your child receive any type of special assistance at his/her current school?

Do you intend to apply for entry into the Laurel Accelerated Learning Program? (Years 7 - 9) Yes ☐ No ☐

Has your child received extra support in literacy or numeracy? Yes ☐ No ☐

Do you give Nazareth staff permission to contact your child's current school regarding relevant information. Yes ☐ No ☐

It is Parents' responsibility to supply the College with all information relevant to your child's specific learning requirements. Failure to do so may affect your child's enrolment.



PARENT / GUARDIAN DETAILS:

Family Parish of Residence: _____

Student lives with: (Tick one) Both Parents ☐ Mother ☐ Father ☐ Or Guardian ☐

Parent/Guardian 1 Information:

Relationship to Child: _____

Surname: _____ First Name: _____

Address: _____

Telephone: Home: _____ Work: _____ Mobile: _____

Email: _____

Religion: _____ Country of Birth: _____

Parent/Guardian 2 Information:

Relationship to Child: _____

Surname: _____ First Name: _____

Address: _____

Telephone: Home: _____ Work: _____ Mobile: _____

Email: _____

Religion: _____ Country of Birth: _____

I have read and understood the College's 'Standard Collection Notice' and consent to the collection, use and disclosure of personal and health information by the College for the purposes outlined in that document.

I declare that, where I provide personal or health information to the College about any other individual, I am authorised to provide that information, the information has been collected in accordance with applicable privacy legislation and the individual has been, or will be, made aware of the College's identity and how to collect it and of the other matters of which an individual is required to be made aware when such information is collected about them.

Signatures of

Parents (Guardian/s): _____

(Parent/Guardian 1)

Date: _____

(Parent/Guardian 2)

Date: _____

Please return the application with

☐ A non refundable application fee of \$50.00

☐ A copy of the student's latest school report

☐ A copy of the student's birth certificate for Australian born students

☐ A copy of the student's most recent NAPLAN results

☐ A copy of the student's citizenship papers or passport visa documents for students born overseas

☐ A copy of the student's baptismal certificate

Office Use Only:

Received: _____ Family No. _____ Student No. _____ Amount paid: _____