rorm t		:nrc)I II	la	VIC	lori	an	GO	ver	nm	ent	3 C	nooi
BACCHU	S MA	ARSH	1 PRI	MAF	RY SC	СНО	OL						
Student Enrol	ment In	ıformati	ion – 20 ₋	26_	OFFICE	E USE	ONLY	CASE	ES21 St	udent l	D:		
The information the educational i				require	ed for en	rolment	purpos	es. This	informa	tion is co	ollected	to plan t	or and support
This form shou responsibility o enrolment proc unable to be sh	of the pe	erson co arents o	ompletir r carers	ng this	form to	consul	lt with a	II other	adults t	that nee	d to be	involve	d in the
lf required inforr principal is requi													ent, the enrolling the the enrolment.
Only one enrolm a place for your												it form, y	ou are accepting
All schools acros requirement of th Australian Educa	ne Comi	monwea	alth Gove										
STUDEN	IT D	ETA	AILS										
Surname:													
First Given Na	ame:												
Second Given	Name:	(if appl	icable)										
Preferred Firs	t Name	: (if app	licable)										
❖ Gender:	Male		Female		Self-des	cribed:							
Date of Birth:	(dd-mm	ı- <i>уууу)</i>	/	/		Stud	ent Mol	oile Nun	nber: (if	applical	ble)		
Intended start	date:												
☐Day 1, Term	n 1					Other:	(dd-mm)- <i>уууу)</i> _	/		/		
Which year ar	e you s	eeking	to enrol	this st				_				_	_
Foundation	1	1 2	 3	4	 5	 6	1 7	□8	1 9	1 0	□ 11	1 2	Ungraded
Student's F	Perma	anent	Resid	denc	е								
	t of time	at two a	addresse	s, both	are con	sidered							eek. If they spend entitled to enrol in
Commission office	ce or the	e Victoria	an Electo	ral Cor	nmission	head c	office; ch	necking v	with a re	al estate	agent;	or check	istralian Electoral ing whether there is a studio or one
No. & Street A	Address	6:											
Suburb:													

Postcode:

State:

How often does thi	s student live at this address?					
□Always	Mostly			Balan	ced (50%))
	at another address during the school th and how many days a week the stud			her details	includin	g the address,
	oadly and can include step-siblings and s rrangements, including foster care, kinsh					mily cohabitation
Does the student h	ave any siblings at this school?		Yes	□No (move to next section)		
Name			Current Year Level	Reside a		esidential address
1 2 3 4				☐Yes ☐Yes ☐Yes ☐Yes ☐Yes	□No □No □No	Sometimes Sometimes Sometimes
PARENT/C Enrolling Adul Title First Given Name	ARER DETAILS t 1	Title	olling Adu	lt 2		
Surname		Sur	name			
Gender	Male Female Self-described:	Gen	der	☐ Male		Female
Adult 1 Relationshi	in to student:] [Adı	ılt 2 Relationsh	nin to stud	ont:	
□ Parent □ Host Family □ Self (adult studen mature minor) □ Foster Parent	☐ Step Parent ☐ Relative	□ F	larent lost Family loster Parent ltep Parent	p 10 5tuu	☐ Relati	
Student lives with	Adult 1:	Stu	dent lives with	Adult 2:		
☐ Always ☐ Balanced (50%)	☐ Mostly ☐ Occasionally		lways alanced (50%)		☐ Mostl	-
No. & Street Address:		Enr No.	dress is the sar olling Adult 1 & Street dress:	me as]Yes □	No (complete below)
Suburb: State:	Postcode	Suk Sta	te:		Postco	de

Adult 1 Job Title:	Adult 2 Job Title:			
Adult 1 Employer:	Adult 2 Employer:			
In which country was Adult 1 born?				
Australia Other (please specify):	Australia Other (please specify):			
Does Adult 1 speak a language other than English at home?	Does Adult 2 speak a language other than English at home?			
□No, English only	☐ No, English only			
☐Yes (please specify):	Yes (please specify):			
Please indicate any additional languages spoken by Adult 1:	Please indicate any additional languages spoken by Adult 2:			
Is an interpreter required?	Is an interpreter required?			
What is the highest year of primary or secondary school that Adult 1 has completed?	What is the highest year of primary or secondary school that Adult 2 has completed?			
☐ Year 12 or equivalent ☐ Year 11 or equivalent	☐ Year 12 or equivalent ☐ Year 11 or equivalent			
☐ Year 9 or equivalent or below / no schooling	Year 10 or equivalent Year 9 or equivalent or below / no schooling			
What is the level of the highest qualification that Adult 1 has completed?	What is the level of the highest qualification that Adult 2 has completed?			
☐ Bachelor degree or above ☐ Advanced diploma / Diploma	☐ Bachelor degree or above ☐ Advanced diploma / Diploma			
☐ Certificate I to IV ☐ No non-school (including trade certificate) qualification	☐ Certificate I to IV ☐ No non-school (including trade certificate) qualification			
 What is the occupation group of Adult 1? Please select the appropriate current parental occupation group from the attached list at the end of the document. 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 their last occupation to select from the attached list. If the person has not been in paid work for the last 12 months, enter 'N'. 	 What is the occupation group of Adult 2? Please select the appropriate current parental occupation group from the attached list at the end of the document. 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 their last occupation to select from the attached list. If the person has not been in paid work for the last 12 months, enter 'N'. 			
What is the main	What is the main			
language spoken between the student	language spoken between the student			
and adult at home?	and adult at home?			
Preferred language of communications:	Preferred language of communications:			
Is Adult 1 interested in being involved in school group participation activities? (e.g., School Council, excursions)	Is Adult 2 interested in being involved in school group participation activities? (e.g., School Council, excursions)			

Can we contact Adult 1 during school hours?	Yes	□No		re contact Adult 2 g school hours?	Yes	☐ No
Is Adult 1 usually home during school hours?	Yes	□No		ult 2 usually home g school hours?	☐Yes	□ No
Home Phone:				Phone:		
Work Phone:			Work	Phone:		
Mobile:			Mobile	ə:		
SMS Notifications:	Yes	□No	SMS	Notifications:	□Yes	□No
Email Address:			Email	Address:		
Email Notifications:	Yes	□No	Email	Notifications:	Yes	□No
Adult 1's preferred method of contact:	☐ Mobile	Email	metho	2's preferred od of contact:	■Mobi	le 🔲 Email
(Email shall be used for communication that cannot be sent via phone)	☐ Home Phone	☐ Work Phone	comm	shall be used for unication that cannot nt via phone)	☐ Home	e Work Phone
Specify any other special conditions or times related to contact?			specia	fy any other al conditions or related to contact?		
Please provide emergency cont emergency contacts are aware Name			led for this purp	Telephone Co		Language Spoken Write E for English
1						
2						
3						
4						
Billing Details You are not required to make pacurricular items and activities. F						nents for extra-
Send bills to: (select one)	□Adult	1 Adult 2	2 🗖	Another person / addı	ess* (com	nplete details below)
Name to be used for all bil	ling correspo	ondence:				
No. & Street or PO Box						
Suburb:						
State:			Pos	tcode:		
Billing Email:						
* Note: If you would like to send bills	to another perso	on / address, please ensur	e Additional Parer	nt/Carer details are comple	ted on page	es 13-15.
Correspondence De	tails					
Send correspondence add	ressed to: (s	select one)	ılt 1	Adult 2	h Adults	Neither

Additional Parents/Carers

Are there additional parents/carers in the student's li	fe? ☐Yes (provide details below) ☐ No (move to next section)
Name of Adult 3:	
Name of Adult 4:	
	ons as attachments to this form on pages 13-15. If required, you ers from the school. The separate form allows for the capture of
♦ In which country was the student born?	
☐ Australia ☐ Other (please s	pecify):
If born overseas, on what date did the student arrive	in Australia? (dd-mm-yyyy)
What is the student's residency status? *	
☐ Australian citizen – holds Australian Passport	☐ Permanent Resident (provide visa details below)
☐ Australian citizen – eligible for Australian Passport	☐ Temporary Resident (provide visa details below)
☐ New Zealand citizen	
Visa Sub Class:	Visa Expiry Date: (dd-mm-yyyy)
Visa Statistical Code: (Required for some sub-classes)	
* Note: An Australian birth certificate does not guarantee Australian resi www.passports.gov.au/getting-passport-how-it-works/documents-you-n	
Does the student hold a Bridging Visa?	Yes (provide further detail below)
If Yes, what was the student's previous visa?	
If Yes, what visa has the student applied for?	
International Student ID*: (Not required for exchange st	udents)
Note: If you are unsure of your International Student ID, please contactional@education.vic.gov.au).	ct the International Education Division via phone (03 9084 8497) or email
Does the student speak English?	□Yes □No
* Does the student speak a language other than Eng	lish at home?
☐ No, English only	
☐Yes (please specify the main language spoken at hom	e):
♦ Is the student of Aboriginal or Torres Strait Islande	er origin?
□No	☐Yes, Aboriginal
☐Yes, Torres Strait Islander	☐Yes, Both Aboriginal & Torres Strait Islander
Is the student a young carer (providing support/care	for other family member/s)? * Yes No

^{*} A young carer is a young person under 25 years of age who provides, or intends to provide care, assistance, or support to a family member with a-mental illness, physical illness, disability, chronic illness, or who is aged or has an addiction.

What are the stud	lent's living	arrangements?		
Student lives wi same residence	ith parents/o	carers together at the	☐ Student lives	with each parent/carer at different times
☐ Student lives wi	ith one pare	nt/carer only	☐ State Arrange	ed Out of Home Care*
☐ Informal care ar	rrangement	#	☐ Student is inc	dependent
Homeless				
If the student has	a Case Ma	nager, please provide	their contact details below:	:
				rt ordered care arrangements include living with
		•		placements) and living in residential care units. r's Statutory Declaration, which must be completed.
If there are any court orc	ders about the	child, please provide copies	of those orders to the school with the	his form.
How will the stude	ent primaril	y travel to and from s	chool?	
☐ Walking ☐	School Bus	Train	☐Driven by parent/carer	☐Taxi / Ride Share
Bicycle	Public Bus	Tram	Self-Driven	Other:
		transport to school, journey commence:		
	es themsel	f to school, what is		
			s service or financial support to application process can be ob-	ntitled to receive travel assistance. Travel through a conveyance allowance to assist tained from the school.
with the cost of trave	el. Informatio	n on eligibility and the a	application process can be ob	through a conveyance allowance to assist stained from the school.
SCHOOL I	DETAL o enrol the	LS student at this school	application process can be ob	through a conveyance allowance to assist stained from the school.
SCHOOL I Are you seeking to	DETAI co enrol the	LS student at this schools would the student be	I full-time? Yes (move to	through a conveyance allowance to assist stained from the school.
SCHOOL I Are you seeking to	DETAI co enrol the	LS student at this school	I full-time? Yes (move to	through a conveyance allowance to assist stained from the school.
SCHOOL I Are you seeking to If No, how many descriptions.	DETAI co enrol the	LS student at this schools would the student be	I full-time? Yes (move to	through a conveyance allowance to assist stained from the school.
SCHOOL I Are you seeking to If No, how many descriptions.	DETAI To enrol the days a week	LS student at this school would the student be e seeking part-time en	I full-time? Yes (move to	through a conveyance allowance to assist stained from the school.
SCHOOL I Are you seeking to If No, how many do If No, provide reas	DETAI TO enrol the days a week son you are	LS student at this school would the student be e seeking part-time en	I full-time? Yes (move to	through a conveyance allowance to assist stained from the school.
Are you seeking to If No, provide reas	DETAI co enrol the days a week son you are	LS student at this school would the student be e seeking part-time en	I full-time?	through a conveyance allowance to assist stained from the school. In ext section No Has enrolment No
Are you seeking to If No, how many do If No, provide reas If No, provide deta Other school name	DETAI TO enrol the days a week son you are ails for othe ne:	student at this school would the student be seeking part-time en	I full-time?	through a conveyance allowance to assist stained from the school. Denote the school of the school o
Are you seeking to If No, how many do If No, provide reas If No, provide deta Other school name	DETAI TO enrol the days a week son you are ails for othe ne:	student at this school would the student be seeking part-time en	I full-time?	through a conveyance allowance to assist stained from the school. Denote the school of the school o
Are you seeking to If No, how many do If No, provide reas If No, provide deta Other school name Other school name	DETAI TO enrol the days a week son you are ails for other the:	student at this school would the student be eseeking part-time en	I full-time?	through a conveyance allowance to assist stained from the school. Denote the school in the school i
Are you seeking to If No, how many do If No, provide rease If No, provide deta Other school name Other school name Previous Education	DETAI TO enrol the days a week son you are ails for othe ne: cation —	student at this school would the student be eseeking part-time en	I full-time?	through a conveyance allowance to assist stained from the school. Denote the school.
Are you seeking to If No, how many do If No, provide rease If No, provide deta Other school name Other school name Previous Education Is the student atte Name of kinderga	DETAI TO enrol the days a week son you are ails for other are: The cation — ending a function or early cogram that is for other cogram that is for early cogram that early	student at this school would the student be eseeking part-time en er schools: Students Enrol nded kindergarten pro y childhood service: unded and approved by the	I full-time?	through a conveyance allowance to assist stained from the school. The inext section is next s
Are you seeking to If No, how many do If No, provide rease If No, provide deta Other school name Other school name Previous Education Is the student atte Name of kinderga	DETAI TO enrol the days a week son you are ails for other ails for other ails for other are: The cation — and a function of a f	student at this school would the student be eseeking part-time en er schools: Students Enrol nded kindergarten pro y childhood service: unded and approved by the programs can be found at w	Days / week:	through a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school.
Are you seeking to If No, how many do If No, provide rease If No, provide deta Other school name Other school name Previous Education Is the student atte Name of kinderga * Note: A kindergarten production of the provious details and the production of the production of the provious details and th	DETAI TO enrol the days a week son you are ails for other ails for	student at this school would the student be eseeking part-time en er schools: Students Enrol nded kindergarten pro y childhood service: unded and approved by the programs can be found at w	papplication process can be obtained application process can be obtained application process can be obtained application? Pays / week: Days / week: Days / week: Uling in Foundation for gram* in the year before Foundation for the process of th	through a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school. The inext section is a conveyance allowance to assist stained from the school.

If Yes, name of last school attended:					
If Yes, location of last school attended: (suburb/town/state/country)					
If Yes, date of attendance: (dd-mm-yyyy,)///////	to	_//		
If Yes, year levels of previous education	n:				
If the student studied overseas, what a start school?	ge did the student first				
What was the language of the student's	previous education?				
Period of interruption to education:		Is the student re	neating _		
(months/years)		a year level?	L	Yes	□No
STUDENT MEDICAL D	ETAILS				
Schools require the health information requirestudents	ested in this section to plan f	or and support the	health and we	ellbeing need	ls of
students. <u>Please note:</u> If there is a situation or inciden					
first aid that is reasonably necessary and apattention for your child if it is considered rea	sonably necessary. Any cos	ts associated with s	student injury	rest with par	ents/carers
unless the Department of Education is liable attention, school staff will contact you as so		t automatic). In the	event that you	ur child need	s medical
Medical Conditions					
Does the student have an allergy? If yes, please provide the school with an A	SCIA Action Plan for Allergi	os (available at:	Yes	□No	
www.allergy.org.au/hp/ascia-plans-action-		35 (avaliable at.	L 162	□ INO	
Is the student at risk of anaphylaxis? If yes, please provide the school with an A	SCIA Action Plan for Anaph	vlavis (available	□Yes	□No	
at: www.allergy.org.au/hp/anaphylaxis/asc		,			
Does the student have asthma?	⊒Yes	□No)		
Has a current Asthma Action Plan been provide an Asthma Action Plan to the Sch		o, please □Ye	es	□No	
www.asthma.org.au/treatment-diagnosis/a	sthma-action-plan/)				
Does the student have any other medic school needs to know about? If Yes, ple be completed by the treating medical prac	ease ask the school for the a	ppropriate medical			□No
If Yes to any of the above, please speci		OI.			
Medication					
Does the student take medication?			□Yes	□No	
Is the medication required during school If Yes, please ask the school for a Medica		mnleted by the	☐Yes	□No	
treating medical practitioner and returned		Implotod 25 a.c		L	
Name of medications taken:					

Student Doctor

Doctor's Name:							
Medical Centre:							
Street Address:							
Suburb:				Postcode:			
State:				Telephone Num	nber:		
ADDITIONAL LEARNING AND SUPPORT NEEDS The Department of Education recognises that adjustments may be required for students with additional needs, including tudents with disability, so that they can participate at school. School personnel and parents or carers work together to identify ne adjustments that may be needed to meet the student's learning and support needs.							
Does the student have	additional n	eeds and rec	quire support	t for learning?	Yes	□No	
Does the student have additional needs in any of the following areas? Has the student had a cassessment before?	Hearing: Vision: Speech/La. Physical: Cognitive/L	Learning: otional: □No	☐Yes (pleased) ☐Yes (pleased) ☐Yes (pleased) ☐Yes (pleased) ☐Yes (pleased)	ase specify): ase specify): ase specify): ase specify):			
Has the student receive individualised disability before?		□No					
Has any previous educa provider prepared a do- plan to support the stud- additional learning need	cumented dent's	□No □Yes (prov	No Yes (provide details):				
Please indicate any adj	ustments th	at may assis	st the studen	t to participate at	school:		

Allied Health Support

Has the student previo	ously accessed	d support from an allied h	ealth profession	al?			
Occupational therapy:		Exercise physiology		Speech patho	logy		
☐Yes ☐ No	О	☐Yes ☐N	lo	∐Yes	□No		
Name and contact deta	ails:	Name and contact details	s:	Name and con	ntact details:		
Physiotherapy		Behaviour support		Other			
□Yes □ No	О	□Yes □N	lo	□Yes	□No		
Name and contact deta	ails:	Name and contact details	s:	Name and con	ntact details:		
STUDENT SAFETY, ACCESS AND SPECIAL CIRCUMSTANCES Student Risk The Department of Education has a responsibility to assess and manage risk of harm to its staff and students. By providing information about your child, you will help facilitate their transition to school and ensure their safety. This may involve preparing a behaviour management plan or other appropriate strategies to meet the particular needs of the student.							
To your knowledge, is	there anythin	g in the student's history	or circumstance	s (including me	edical history not		
☐Yes	n might pose	a risk of any type to this	No (move to				
If Yes, please provide t	further detail:				,		
Court Orders and	Other Car	e Arrangements <i>(p</i>	reviously re	ferred to as	an Access Alert)		
Is there an intervention	n order, paren	ting order or any other co	ourt order impact	ing the student	?		
☐Yes			☐ No (move to	the next section))		
If Yes, then complete the	following quest	tions and present a curren	t copy of the doo	cument to the s	chool.		
Court Order or other	☐ Family La	w Order / Parenting Order	☐Parenting Pla	an / Agreement	☐Intervention Order		
access document type:	☐Child Prot	ection Order	☐DFFH Author	isation	☐Other:		
Please provide further	details of the	Court Order or other acc	ess documents,	and any other s	afety concerns:		
End Date (if applicable):	: (dd-mm-yyyy))					

Activity Restrictions and Considerations

Are there any activities (organised by the school and/or third	parties) that the student cannot participate in?
□Yes	☐ No (move to the next section)
If Yes, please provide further detail: (e.g. sport, excursions)	

Privacy Statement

The personal and health information collected in this form, and any attachments, is required for enrolment at all Victorian Government Schools. The information is collected to ensure accurate enrolment, and to plan for and support the educational needs of students. The information will be managed securely and accessed only by staff, on a need-to-know basis, and in accordance with the Department of Education Schools' Privacy Policy which applies to all government schools (available at: www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx) or where mandated or allowed by law.

Please also refer to the Victorian Government School Privacy Collection Notice for details on handling of personal and health information in schools: www.education.vic.gov.au/Pages/Schools-Privacy-Collection-Notice.aspx

DECLARATION

Thank you for completing this Student Enrolment form. The information provided is required to enable staff to properly enrol your child at our school as such it is important that it is accurate and up to date.

I/We confirm that:

- I am/We are the person/people named as completing this form.
- The information in this form is true and correct.
- I/We agree to authorise this form by electronic means with an electronic signature.

Signature of Enrolling Adult:	Date:	1	/
Signature of Enrolling Adult (if applicable):	Date:	/	/
Please select the category that best describes who has signed and completed this for with the enrolment process.	orm. This will	assist th	ne school
☐Both parents/carers have completed and signed this form.			
☐Parents/carers are completing separate forms (schools can provide additional forms on	request).		
☐One parent has completed and signed this form on behalf of both parents. Contact detail	ils for the othe	r parent h	nave been
provided in the form for the school's use as required.			
One parent has completed and signed this form and the contact details for the other par	ent are unkno	wn to the	enrolling
parent/carer and not provided.			
☐There is only one parent/carer with legal responsibility for the child and that person has	completed and	d signed t	his form.
Other, please specify: (for instance, where the contact details for the other parent are known safe to contact them)	nown but it is n	not approp	oriate or

If there are any court orders about the child, please provide copies of those orders to the school with this form.

WHO CAN SIGN THIS FORM?

- A person with parental responsibility: a parent of a child under 18 years of age, subject to relevant court orders
 (including parenting orders made under the Family Law Act 1975 and protection orders made under the Children, Youth
 and Families Act 2005 by the Children's Court, or other person granted parental responsibility under a relevant court
 order).
- A carer formally authorised by Child Protection to enrol the student: the Department of Families, Fairness and Housing (DFFH) can issue a written authorisation to the carer of a child in out of home care to make decisions about the child. In some circumstances this will include specific authorisation to enrol the child at school.
- Informal carer: an Informal Carer is a relative or other responsible adult with whom the child lives, and who has day to
 day care of the child. The informal carer should provide an Informal Carer Statutory Declaration to confirm their status as
 an informal carer. A copy of this statutory declaration can be obtained from www.education.vic.gov.au/PAL/informal-carer-statutory-declaration-template.pdf
- Students living independently: If the student is an adult or a mature minor for the purpose of enrolment and they live
 independently. These students will need to be considered in accordance with the www.education.vic.gov.au/pal/decision-making-responsibilities-students/policy policy.
- Adult Students: a student 18 years of age or older is considered an adult and can sign their own consent form.

ATTACHMENT 1 - PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. Please indicate your current occupation – not your qualification. This information is used for determining funding allocations to schools.

Group A: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation

Public Service Manager (Section head or above), regional director, health / education / police / fire services administrator

Other administrator (school principal, faculty head / dean, library / museum / gallery director, research facility director)

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:

- Health, Education, Law, Social Welfare, Engineering, Science, Computing 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)

Group B: Other business managers, arts/media/sportspersons and associate professionals

Owner / Manager of 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)

Arts / Media / Sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proofreader, sportsman/woman, coach, trainer, sports official)

Associate Professionals - generally have diploma / technical qualifications and support managers and professionals:

- Health, Education, Law, Social Welfare, Engineering, Science, Computing technician / associate professional
- Business / administration (recruitment / employment / industrial relations / training officer, marketing / advertising specialist, market research analyst, technical sales representative, retail buyer, office / project manager)
- Defence Forces senior Non-Commissioned Officer

Group C: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a 4-year Trade Certificate, usually by apprenticeship. All tradespeople 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, sales, and service staff:

- Office (secretary, personal assistant, desktop publishing operator, switchboard operator)
- Sales (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)
- Service (aged / disabled / refuge / childcare worker, nanny, meter reader, parking inspector, postal worker, courier, travel
 agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

Group D: Machine operators, hospitality staff, assistants, labourers and related workers

Drivers, mobile plant, production / processing machinery and other machinery operators
Hospitality staff (hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper)
Office assistants, sales assistants, and other assistants:

- Office (typist, word processing / data entry / business machine operator, receptionist, office assistant)
- 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)
- Assistant / aide (trades' assistant, school / teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum / gallery attendant, usher, home helper, salon assistant, animal attendant)

Labourers and related workers

- Defence Forces 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

ATTACHMENT 2 – ADDITIONAL PARENT/CARER DETAILS

Enrolling Adult 4

Enrolling Adult 3

Title **First Given Name First Given Name** Surname Surname Male Female Male Female Gender Gender Self-described: Self-described: Adult 3 Relationship to student: Adult 4 Relationship to student: □ Parent Relative Relative □ Parent ☐ Host Family Friend ☐ Host Family Friend Foster Parent Other: ☐ Foster Parent Other: Step Parent ☐Step Parent Student lives with Adult 3: Student lives with Adult 4: ☐ Always ☐ Mostly Always ■ Mostly Balanced (50%) Occasionally Balanced (50%) Occasionally Address is the Yes same as Enrolling ☐ No (complete below) No. & Street Adult 3 Address: No. & Street Address: Suburb: Suburb: State: **Postcode** State: **Postcode Adult 3 Job Title:** Adult 4 Job Title: Adult 3 Employer: Adult 4 Employer: In which country was Adult 3 born? In which country was Adult 4 born? ☐ Australia ☐ Other (please specify):_ ■ Australia Other (please specify): Does Adult 3 speak a language other than English at ❖ Does Adult 4 speak a language other than English at home? No, English only No, English only Yes (please specify): _ Yes (please specify): _ Please indicate any Please indicate any additional languages additional languages spoken by Adult 3: spoken by Adult 4: Is an interpreter Is an interpreter Yes ☐ No Yes □No required? required?

What is the highest year school that Adult 3 has con		secondary		What is the highest year school that Adult 4 has co		r secondary		
☐Year 12 or equivalent	Year 11	or equivalent		☐Year 12 or equivalent	☐ Year 1	1 or equivaler	nt	
Year 10 or equivalent	Year 9 o	r equivalent or schooling		☐Year 10 or equivalent	☐Year 9 obelow / no	or equivalent schooling	or	
What is the level of the h 3 has completed?	nighest qualifi	cation that Adult		What is the level of the has completed?	ighest qualifi	cation that A	Adult	
☐Bachelor degree or above	Advance Diploma	ed diploma /		Bachelor degree or above	Advance Diploma	ed diploma /		
Certificate I to IV (including trade certificate)	☐No non-s qualification			Certificate I to IV (including trade certificate)	☐No non- qualificatio			
 What is the occupation of Please select the appropriate group from the attached list at the person is not curred job in the last 12 months months, please use their the attached list. If the person has not be the last 12 months, enter the last 12 months, enter the last 12 months. 	e current paren at the end of th ently in paid wo s, or has retired ir last occupation	ntal occupation le document. ork but has had a d in the last 12 on to select from		 What is the occupation group of Adult 4? Please select the appropriate current parental occupation group from the attached list at the end of the document. 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 their last occupation to select from the attached list. If the person has not been in paid work for the last 12 months, enter 'N'. 				
What is the main language spoken between the student and adult at home?				What is the main language spoken between the student and adult at home?				
Preferred language of communications:				Preferred language of communications:				
Is Adult 3 interested in being involved in school group participation activities? (e.g., School Council, excursions)	□Yes	□No		Is Adult 4 interested in being involved in school group participation activities? (e.g., School Council, excursions)	Yes	□No		
Can we contact Adult 3			Ī	Can we contact Adult 4				
during school hours?	Yes	□No		during school hours?	Yes	□No		
Is Adult 3 usually home during school hours?	□Yes	□No		Is Adult 4 usually home during school hours?	Yes	□No		
Home Phone:				Home Phone:				
Work Phone:				Work Phone:				
Mobile:				Mobile:				
SMS Notifications:	□Yes	□No		SMS Notifications:	Yes	□No		
Email Address:				Email Address:				
Email Notifications:	Yes	□No		Email Notifications:	Yes	□No		
Adult 3's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	Mobile Home Phone	□Email □Work Phone		Adult 4's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	☐ Mobile ☐ Home Phone	□Email	hone	
Specify any other special conditions or times related to contact?				Specify any other special conditions or times related to contact?				

Billing DetailsYou are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extracurricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees.

Send bills to: (select one)	Adult 3	Adult 4	Another person / address* (complete details below)		
Name to be used for all billing	ng correspondence:				
No. & Street or PO Box					
Suburb:					
State:			Postcode:		
Billing Email:					
* Note: If you would like to send bills to	another person / address,	please ensure Additional	Parent/Carer details a	re completed on page	es 16-17.
Correspondence Deta	ails				
Send correspondence addre	ssed to: (select one)	Adult 3	Adult 4	Both Adults	Neither

ATTACHMENT 3 - TRAVEL ASSISTANCE AND PROGRAMS

Conveyance Allowance Program

The Conveyance Allowance Program supports eligible families attending mainstream schools in rural and regional Victoria, and special schools (state-wide) with financial assistance towards the cost of transporting students to and from school.

Is the student applying	for the Conveyance Allow	ance Program?		
□Yes	Yes			
further information, inclu	the applicable application fo ding the conveyance allowar here: www.education.vic.gov.	ice policy and ap	plication forms, refer to the	
School Bus Prog	ram			
have access to public trans Travel by bus to special se	assists families in rural and rasport. The program supports chools is provided through the rest will pay a fare to travel. Y	travel to student e Students with I	is nearest government ar Disabilities Transport Pro	nd non-government school. gram (see below). Travel to a
Is the student applying	for the School Bus Progra	ım?		
☐Yes (see text below)			No (proceed to next que	estion)
Your school can provide the relevant application form and advice on travel type (free travel, pre-school, fare payer etc.) For further information, including the School Bus Program policy refer to the Department's PAL here: www.education.vic.gov.au/pal/school-bus-program/policy				
The Students with Disabili appropriate government s		sts families throug supports travel fo	r students within Designa	rting students to their nearest ted Transport Areas. Families I options to support school
Is the student applying	to travel on a school bus	or other travel a	ssistance?	
Yes (read below text)			□No	
Your school can provide Students with Disabilities	the relevant application form s Transport Program policy, r au/pal/transport-students-disa	efer to the Depa		er information, including the
First date of travel?	☐ Next school year	☐ Alternate o	late: (dd-mm-yyyy)	//
Type of travel assistan	ce requested?			
☐Access to School Bus	3		☐Conveyance Allowa	nce
If applicable, specify the	ne student's mode of assist	ted mobility.	□Wheelchair	□Walker
Comments relevant to	travel:			

ATTACHMENT 4 – OFFICE USE ONLY SECTION

OFFICE USE ONLY						
Child's Name sight	ed:		□Yes		□No	Enrolment Date:
Year level:	Home Group:	Timetal Group:		House:		Campus:
Student Email Add	ress:	İ				
Australian residency confirmed:		□Yes	□No		☐ Not sighted / provided	
Date of birth confir	med:		Yes – Birth	☐Yes - certificat		☐ Yes - ☐ Not sighted Other / provided
Does the student h	ave a Disability ID			Yes (please specify):		•
Does the student h	ave a Victorian Stu	ident Nu	mber (VSN)?			DNs the student been never
☐Yes, please spec	fy:		☐ Yes, but th	ne VSN is unkno	own	☐ No, the student has neve been issued a VSN
For Foundation students, has a Transition Learning and Development Statement been provided? Yes, via Insight Assessment Platform Yes, direct from teacher/parent/carer No Pending						
Immunisation Cert	ficate received:	□Y	es – Up to date	Yes – No	t up to date	☐Not sighted / provide
Are there any Notice/s on the Immunisation History Statement:		′es □No				
Does the student have asthma, allergies or anaphylaxis?		Yes No				
Does the student need to take medication during school hours?		Yes No				
*Have the required medical forms been provided to the school?		Yes No N/A – no medical conditions				
*Note: Additional forms including student medical advice and condition forms can be found here: Medical Advice Forms						
Can the student Individual Education Plan include travel training?						
Is the student attending their nearest school?					□Yes	□No
Does the student reside in Designated Transposition (School)?			oort Area (if atte	nding special	□Yes	□No
Can the student be accommodated on an exist			sting route (if ap	plicable)?	□Yes	□No
Pick-up Point:				Map Re	f: Time AM:	
Set Down Point:				Map Re	f: Time PM:	
Current Court Order or other access document placed on student file?						
Additional notes re to be provided to the		nt's enro	llment: (e.g., not	e if student infor	mation or d	ocumentation is missing and ye



Information and Communication Technologies

Dear Parents and Carers,
Information and Communication Technologies are a priority at BMPS as we value our students being able to use the digital and interactive tools of today's society. Students need to be taught how to make critical choices about the media and tools best suited to particular situations.
BMPS has formulated an Acceptable Use Policy, in line with the Department of Education and Training requirements, which are attached for you to read through.
Also attached is a computer user agreement and permission forms. Please read and discuss this with your child, sign where appropriate, and return with your enrolment.
If you have any queries about this permission form please contact our office.

Thank you in anticipation of your co-operation.

Melinda Williams

Principal eLearning Co-ordinator

56 Lerderderg Street, Bacchus Marsh 3340 – Ph: 03 5367 2745 – Fax: 03 5367 5757 Email: bacchus.marsh.ps@education.vic.gov.au – Web: www.bacchusmarshps.vic.edu.au

Daniel Morris





School profile statement

At Bacchus Marsh Primary School we support the right of all members of the school community to access safe and inclusive learning environments, including digital and online spaces. This agreement outlines the School's roles and responsibilities in supporting safe digital learning, as well as the expected behaviours and expectations we have of our students when using digital or online spaces.

At our School we:

- have a Student Engagement Policy that outlines our School's values and expected student behaviour. This Policy includes online behaviours;
- have programs in place to educate our students to be safe and responsible users of digital technologies within classroom discussions and whilst following Bacchus Marsh Primary School's eSafety scope and sequence;
- educate our students about digital issues such as online privacy, intellectual property and copyright;
- supervise and support students using digital technologies in the classroom;
- use clear protocols and procedures to protect students working in online spaces. This includes
 reviewing the safety and appropriateness of online tools and communities, removing offensive
 content at the earliest opportunity, and other measures;
 - See: <u>Duty of Care and Supervision</u> (www.education.vic.gov.au/about/programs/bullystoppers/Pages/prindutycare.aspx)
- provide a filtered internet service to block inappropriate content. We acknowledge, however, that full protection from inappropriate content cannot be guaranteed;
- use online sites and digital tools that support students' learning;
- address issues or incidents that have the potential to impact on the wellbeing of our students;
- refer suspected illegal online acts to the relevant Law Enforcement authority for investigation;
- support parents and care-givers to understand safe and responsible use of digital technologies and the strategies that can be implemented at home. The following resources provide current information from both the Department of Education & Training and The Children's eSafety Commission:
 - Bullystoppers Parent Interactive Learning Modules
 - iParent | Office of the Children's eSafety Commissioner





Safe, responsible behaviour, Prep – Grade 6

When I use digital technologies I communicate respectfully by:

- always thinking and checking that what I write or post is polite and respectful;
- being kind to my friends and classmates and thinking about how the things I do or say online might make them feel;
- not sending mean or bullying messages or forwarding them to other people;
- creating and presenting my own work, and if I copy something from online, letting my audience know by sharing the website link to acknowledge the creator.

When I use digital technologies I **protect personal information** by being aware that my full name, photo, birthday, address and phone number is personal information and is not to be shared online. This means I:

- protect my friends' information in the same way;
- protect my passwords and don't share them with anyone except my parents/carers;
- only ever join spaces with my parents/carers or teacher's guidance and permission;
- never answer questions online that ask for my personal information;
- know not to post three or more pieces of identifiable information about myself.

When I use digital technologies I **respect myself and others** by thinking about what I share online. This means I:

- stop to think about what I post or share online;
- use spaces or sites that are appropriate, and if I am not sure, I ask a trusted adult for help;
- protect my friends' full names, birthdays, school names, addresses and phone numbers because this is their personal information;
- speak to a trusted adult if I see something that makes me feel upset or if I need help;
- speak to a trusted adult if someone is unkind to me or if I know someone else is upset or scared;
- don't deliberately search for something rude or violent;
- turn off or close the screen if I see something I don't like and tell a trusted adult;
- am careful with the equipment I use.

I will use this knowledge at school and everywhere I use digital technologies.





BYOD Program, Grades 4-6

BRING YOUR OWN DEVICE (BYOD):

Year levels from Grade 4-6 participate in our school's BYOD program. As part of the program, all students in these year levels are expected to:

- bring their device into the classroom at the beginning of each day and ensure it is safely and securely stored;
- ensure their device is working correctly;
- ensure their device is charged every day and has sufficient battery power to work throughout the day;
- ensure their device does not contain any inappropriate, offensive or any other content which they
 would not be comfortable for a teacher or parent to see. Students are expected to show any content
 on their device to teachers if requested;
- only use their device for school-related educational purposes while at school;
- only use their device under the supervision of a teacher whilst at school;
- keep their device secured in the classroom's designated storage area when not in use;
- take full responsibility for the safety and security of their device at all times;
- use their device in accordance with the 'Using Technology' section of this policy (see below);
- fulfill the expectations of students outlined in the Information Booklet;
- allow the school to re-image their device for any reason (full memory, virus etc) This will involve the
 deletion of any personal files and downloads that have been added and re-installation of the school's
 software package only.

The school does not take any responsibility for the loss or damage of any personal items, including electronic devices (computers, phones, etc).

Devices can be purchased through the BMPS Order Portal: https://bmps.orderportal.com.au/

DAMAGED TECHNOLOGY:

In cases where the student has been responsible for damage to technology owned by the school or another student, the student and parents/carers may be asked to pay for the damage through associated repairs.

BYOD SPECIFIC SAFE AND RESPONSIBLE USE WHILE AT SCHOOL, STUDENTS MUST:

- fulfill their obligations under this policy and the BYOD Information Booklet;
- ensure no inappropriate or offensive digital content is downloaded or used at school;
- only take photos, sound or video recordings of people when they have received that person's consent and whilst under the direction of a teacher;
- handle technology with care and notify a teacher if any of the school's or their own technology is damaged or requires attention;
- never interfere with the school's network systems and security settings;
- not access the data of another user or attempt to login with a username or password that is not their own;
- avoid downloading or installing unauthorised software (including games) onto school/personal devices:
- Ensure online 'chat' facilities or social networking websites are only used under the direction and direct supervision of a teacher;
- not deliberately damage hardware or make changes to the configuration of a device.





Signature

I understand and agree to comply with the Terms of Acceptable Use and Expected Standards of Behaviour set out within this agreement.

I understand that there are actions and consequences established within the school's Student Engagement Policy if I do not behave appropriately.

tudent name:
tudent signature:
arent/Guardian Name:
arent/Guardian Signature:
ate:



Dear Parents,

To help make the transition to school a smooth one, we are asking all Prep parents to complete this information form and return it to school along with the enrolment for your child. This information is confidential and allows us to receive important information about your child. It is used by our Prep teachers to aid them in making the best possible placement for your child in their class.

Thank you for your co-operation.
Melinda Williams
Principal

PREP - ENROLMENT INFORMATION

Child's Name:
Parent's Name/s:
Name of Pre-School or Day Care Centre attended:
Phone number of Centre:
Name of Dua calculation and analysis
Name of Pre-school Group or teacher:





Photographing, Filming and Recording students at Bacchus Marsh Primary School

Annual Consent Form and Collection Notice

During the school year there are many occasions and events where staff may photograph, film or record students participating in school activities and events. We do this for many reasons including to celebrate student participation and achievement, showcase particular learning programs, document a student's learning journey/camps/excursions/sports events and to communicate with our parents and school community in newsletters and on classroom blogs or apps.

This notice applies to photographs, video or recordings of students that are collected, used and disclosed by the school. We ask that any parents/carers or other members of our school community photographing, filming or recording students at school events (eg concerts, sports events etc) do so in a respectful and safe manner and that any photos, video or recordings ("images" of students are not publicly posted (eg to a social media account) without the permission of the relevant parent/carer.

If you do not understand any aspect of this notice, or you would like to talk about any concerns you have, please contact our school on (03) 5367 2745 or bacchus.marsh.ps@edumail.vic.gov.au.

A. Use or disclosure within the school community

<u>Unless you tell us otherwise below,</u> images of your child may be used by our school within the school community, as described below.

Photographs, video or recordings of students may be used within the school community in any of the following ways:

- in the school's communication, learning and teaching tools for example, emails, classroom blogs or apps that can only be accessed by students, parents/carers or school staff with passwords eg Compass, Seesaw, Google Classrooms, Class Dojo etc
- for display in school classrooms, on noticeboards etc
- documenting student's learning journey eg portfolios, camps, excursions, sports events etc
- to support student's health and wellbeing eg photographs of pencil grip to assist in OT assessments

B. Use or disclosure in publications/locations that are publicly accessible

<u>Unless you tell us otherwise below</u>, photographs, video or recordings of students may also be used in publications that are accessible to the public, including:

- on the school's website, including in the school newsletter which is publicly available on the website
- on the school's social media accounts

• in the school magazine

Your child may be identified by first name only in these images (or not named at all).

We will notify you individually if we are considering using any images of your child for specific advertising or promotional purposes.

Privacy

Photographs, video and recordings of a person that may be capable of identifying the person may constitute a collection of 'personal information' under Victorian privacy law. This means that any images of your child taken by the school may constitute a collection of your child's personal information. The school is part of the Department of Education and Training (**the Department**). The Department values the privacy of every person and must comply with the *Privacy and Data Protection Act 2014* (Vic) when collecting and managing all personal information. For further information see <u>Schools' Privacy Policy</u> (http://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx).

Ownership and Reproduction

Copyright in the images will be wholly owned by the school. This means that the school may use the images in the ways described in this form without notifying, acknowledging or compensating you or your child.

Opt Out

Bacchus Marsh Primary School understands that parents and carers have the right to withhold permission for our school to use photographs, video or recordings of your child (apart from circumstances where the school is not required to seek consent – see *our Photographing, Filming and Recording Students Policy*.

If you have read this notice and are comfortable with the school using photos, video or recordings of your child as described above, you do not need to take any further action.

However, if you have decided that you **do not** want images of your child to be collected or used by our school, **please complete the form below** and return it to the school office. Please note that it may not be possible for the school to amend past publications or to withdraw images that are already in the public domain.



2026 Photographing, Filming and Recording students at Bacchus Marsh Primary School

Annual Consent Form and Collection Notice

	this form and I do not consent to Bacchus Marsh Primary School using photos, cordings of my child (named below) to appear in the following ways:					
á	Use within the school community (eg in the school's communication, learning and teaching tools, on display around the school, documenting student's learning journey, to support student health and wellbeing)					
V	☐ Use in publications/locations that are publicly accessible (eg on the school's website, on the school's social media accounts, in promotional material for the school)					
<u>Note</u>	that you may choose to opt out of both or only one type of use.					
	ner information is available in the Bacchus Marsh Primary School Photographing, ng and Recording Students Policy					
Name of S	tudent					
Name of p	parent/carer					
Signature						
Date	//					