



|                          |  |
|--------------------------|--|
| <b>Office Use Only</b>   |  |
| Date Received:           | _____  |
| Birth Certificate/Other: | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Visa Sighted:            | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Accepted:                | Yes <input type="checkbox"/> No <input type="checkbox"/> |

## APPLICATION FOR ENROLMENT FORM FOR ENROLMENT IN A WESTERN AUSTRALIAN PUBLIC SCHOOL

*Students in the compulsory years of schooling who are already enrolled at the school do not need to lodge a new application for that school each year.*

### DECLARATION

|   |                  |                                   |                                       |                                |  |
|---|------------------|-----------------------------------|---------------------------------------|--------------------------------|--|
| Child's Surname:  |                  | Given Names                       |                                       | Date of Birth:                 | Sex<br>M <input type="checkbox"/> F <input type="checkbox"/> |
| Surname of Parent/Guardian:   |                  | Given Name                        |                                       | Mr / Mrs / Miss / Ms           |  |
| Residential Address:  |                  |                                   | Postcode:                             | Nearest intersecting street:   |  |
| Telephone – Home No:  | Mobile Phone No: | Email:                            |                                       |                                |  |
| Current school in which your child is currently enrolled  |                  |                                   |                                       |                                |  |
| Year level in which your child is currently enrolled  |                  |                                   |                                       |                                |  |
| Are you applying to enrol in G & T Visual Art?  |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Are you applying to enrol in the Dance program?   |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Will there be any brothers or sisters attending this school?  |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Is your child currently under suspension from a school?   |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Has your child ever been excluded from a school?  |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Is your child a permanent resident of Australia   |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Are there any Family Court Orders regarding the day to day or long term care, welfare and development of the child? |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Is the child subject to access restriction? If yes, please specify and attaching supporting documentation?          |                  |                                   |                                       | <input type="checkbox"/> Yes   | <input type="checkbox"/> No                                  |
| Please indicate if your child have a disability/medical condition   |                  | <input type="checkbox"/> Physical | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Other |  |
| Signature:  |                  |                                   |                                       | Date:                          |  |

**Note:** In the event that statements made in this application later prove to be false or misleading, a decision on this application may be reversed. Information supplied may need to be checked by the school.

### DOCUMENTS TO BE PROVIDED

- Birth Certificate or extract or other identity documents.....
- Last school report available .....
- Proof of address (eg utilities account, lease agreement of at least three months.....   
proof of ownership of property)

**Please see the document “What to include with your Enrolment Form” for a more comprehensive list of documents required.**