Baldivis Secondary College

Protection and Family Services (DCPFS)?

| AVID Australia Bases | aldivis ondary College |
|----------------------------|---------------------------|
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|---|---|---|----------------|------------------------------|------------------------------|-----------------------|-------------------------------|
| Form A: Expression | on of interes | t for Enro | lment | | | | Bald1V1S Secondary College |
| FOR ENTRY INTO | ☐ Year 7 | ☐ Year 8 | □ Y | ear 9 | ☐ Year 10 | ☐ Year 11 | ☐ Year 12 |
| Completed applications ca or posted to: Enrolment Officer Baldivis Secondary Stillwater Drive BALDIVIS WA 617 | College | d to the College | Administrati | on, email | ed to <u>baldivis.sc.adı</u> | missions@educatio | n.wa.edu.au |
| SECTION 1: STUDE | NT PERSONAL | DETAILS | | | | | |
| Legal Family Name (as per Birth Certificate) | | | | | | | |
| Legal Given Names (as per Birth Certificate) | | | | | | | |
| Preferred Family Name | | | | Prefe | red Given Name | | |
| Gender | □ Male □ | Female 🗆 O | ther | Date o | of Birth | | |
| Copy of Birth Certificate Attached | □ Yes □ N | lo | | | | | |
| Enrolment may not be ap where it is not possible t suffice). This does not in enrolment by ETI, a pass | o obtain a birth cer clude failure to regi | tificate (e.g. chi ster a birth or r | ld born in cou | intry with | out birth registration | on system. Passport | or visa documents will |
| Are there any current Family Court or other court orders concerning the welfare, safety or parenting arrangements of your child/children? | | | □ No | If YES, please prov order | vide a copy of any r | elevant current court | |
| Is the student in the sare | of the Department | of Child | Пус | Пио | If VES please prov | uide name and cont | act details of DCDES |

| SECTION 2.1: APPLICATION DETAILS | | | | | | | | | |
|--|--|----------------|----------------|--|------------|------|------|------|------|
| Has the student ever been Ex | ☐ Yes | □ No | If YES, please | YES, please contact Principal for an appointment | | | | | |
| What school is the student currently attending? | Please provide NAME of CUF | RRENT or M | OST RECENT | school attend | ded. | | | | |
| Origin | □ WA □ QLD □ Overseas (Please specify | □ NSW COUNTRY) | □ vic | □ TAS | ; <u> </u> | l SA | □ NT | | |
| Origin Type | ☐ Primary School ☐ Secondary School ☐ Other (Please specify) | | | | | | | | |
| Does the student have a sibling attending Baldivis Secondary College? If YES, please provide name/s and year level/s of sibling/s If there are more than three siblings, please advise the Enrolments Officer. | | Sibling 1 | Name | | | | | | |
| | Sibling 1 \ | ear Group | □7 | □8 | □9 | □ 10 | □ 11 | □ 12 | |
| | Sibiling/s | Sibling 2 N | Name | | | | | | |
| | three siblings, please advise the Enrolments | Sibling 2 \ | ear Group | 0 7 | □8 | □ 9 | □ 10 | □ 11 | □ 12 |
| | | Sibling 3 N | Name | | | | | | |
| | | Sibling 3 \ | ear Group | □7 | □8 | □9 | □ 10 | □ 11 | □ 12 |

Case Worker

| SECTION 2.2: SPECIAL | ENTRY PROGRAMS AP | PLICATION | DETAILS | | | |
|--|--|--|----------------------------------|--|------------------|--------------------------|
| Does the student want to be considered for admission into either the <u>Baldivis Film Academy</u> OR the <u>AVID Elective</u> OR the <u>Noongar Language Program</u> ? | | | lective cademy ar Language | TICK ONLY ONE SELECTION If TICKED, additional information regarding ent requirements will be provided | | |
| BSC Autism Specialised Lerning Program (ASLP) Note: Specific elegibility criteria exists | | ASLP If TICKED, an Expression of Interest Package will be provided | | | | |
| Is the student <u>currently</u> learning a musical instrument through the School of Instrumental Music and <u>wishes</u> <u>to continue</u> in the program? | | Yes If YES, provide the name of the instrument being learnt | | | | |
| Is the student keen to learn a musical instrument through the School of Instrumental Music if the opportunity arises? Note: Placement not guaranteed | | Yes If YES, provide name of preferred instrument to learn | | | | |
| SECTION 3: STUDENT | ADDRESS DETAILS | | | | | |
| Main place of residence | TIDDITEGO DE TATES | | | | | |
| Address Line 1 | | | | | | |
| Address Line 2 | | | | | | |
| Suburb/town | | | State | | Postcode | |
| Mailing Address (If the mailing | ng address is the same as the m | nain place of r | rasidansa nla | oso write (AS ABOVE) | | |
| - | ig address is the same as the n | iaiii piace oi i | esidence pied | ase write A3 ABOVE) | | |
| Address Line 1 | | | | | | |
| Address Line 2 | | | | Γ | | T |
| Suburb/town | | | State | | Postcode | |
| SECTION 4: COUNTRY | OF BIRTH | | | | | |
| In which country was the student born? | ☐ Australia ☐ Overseas (please specify country) | | | | | |
| the state in Serial | Date of arrival in Australia | | | | | |
| Is the student an Australian citizen? | □ Yes □ No | (If NO, evide | ence of stude | nt's immigration statu | s to be complete | ed in <u>Section 5</u>) |
| SECTION 5: EVIDENCE | OF STUDENT'S IMMIGI | RATION ST | TATUS (To b | e completed only if st | udent is NOT an | Australian Citizen) |
| ☐ Permanent Resident | Complete Passport and Visa | | | , | | |
| ☐ Temporary Visa Holder | Temporary visa holders must obtain an 'Approval to enrol in a state school' from ETI. Complete passport and visa details section below | | | | | |
| ☐ Other (please specify) | | | | | | |
| NOTE: Passport and visa details (to be completed for a student who is NOT an Australian citizen). | | | | | | |
| Passport number | | Pas | ssport expiry | date | | |
| Visa number | | Vis | a sub class | | | |
| Visa expiry date | | | | | | |

| SECTION 6: DECLARAT | TIONS | | | | | |
|-----------------------------------|---|--|--|--|--|--|
| | rements made in this application later prove to be false or misleading, a decision on this application may be reversed. may need to be checked by the college. | | | | | |
| Please tick ALL boxes that ap | pply; | | | | | |
| ☐ I hereby express an inter | est in enrolling my child at Baldivis Secondary College. | | | | | |
| | ing false or incorrect information on this form may lead to the reversal of a decision to approve enrolment. | | | | | |
| | ation I have supplied on this form is true and correct in every particular, to the best of my knowledge. | | | | | |
| | the college of any changes in living arrangements and residential location. | | | | | |
| - | wing documentation to support this Expression of Interest; | | | | | |
| ☐ Student born in Austi | | | | | | |
| | | | | | | |
| <u>_</u> | dent's Birth Certificate if born in Australia; or | | | | | |
| Student born Oversea | _ | | | | | |
| · | parents and the student if born overseas; | | | | | |
| | lass and previous visa subclass (if applicable); | | | | | |
| | rnational full fee student visa, sub class 571 - confirmation of enrolment or evidence of any permission to transfer on and Training International (ETI) at study.eti@dtwd.wa.gov.au | | | | | |
| ☐ If the child is a te | mporary visa holder or if the student holds a bridging visa - evidence of the visa for which the student has applied | | | | | |
| | equired to notify the school of any changes to a student's Citizenship, i.e. current Visa sub Class when changing from esident to Permanent Resident or where a student becomes an Australian Citizen. A copy of this documentation is our records. | | | | | |
| ☐ Proof of Residence: | | | | | | |
| | f the property by the parent/s where the student will reside. This may be a current rates notice from the local the rental agreement (minimum 12 months) where the family is in a rental property; | | | | | |
| Plus <u>at least three</u> of the | following: | | | | | |
| ☐ Power – connection of | or account | | | | | |
| ☐ Gas – connection or a | ☐ Gas – connection or account | | | | | |
| ☐ Telephone accounts | | | | | | |
| ☐ Contents Insurance | | | | | | |
| ☐ Any other official doc | cuments that may support the application as proof of residence | | | | | |
| □ Other | | | | | | |
| ☐ Copies of Family Cou | rt or any other court orders (if applicable) | | | | | |
| Name of person enrolling child | | | | | | |
| Relationship to Student | | | | | | |
| Signature | | | | | | |
| Date | | | | | | |
| Contact Telephone: | Home: Mobile: | | | | | |
| | | | | | | |
| Contact Email: | | | | | | |