


OFFICE USE ONLY:	Student ID Cases 21		Victoria Student Registration	
		BUNYIP PRIMARY SCHOOL STUDENT ENROLMENT INFORMATION 2017		
STUDENT PERSONAL AND ENROLMENT DETAILS				List other siblings attending this school:
Legal Surname:				
Title: (Miss, Mr)		Gender: M or F		
Legal First Given Name				
Second Given Name:				
Preferred Name (Preferred name is different to Above Name)				
Birth Date: / / 20	A copy of your child's birth certificate must be provided on Enrolment			Proof of Birth date Presented? Yes or No
Student's Country of Birth				
First Day Attendance at this School / /	Current Year Level:	House Group:		
FAMILY HOME ADDRESS DETAILS				
Street or Box Number				
Suburb			Postcode:	
Telephone Number			Mobile Number(s):	
Silent Number Y or N				
FAMILY MAILING ADDRESS - (leave blank if the same as Family Home Address)				
Street or Box Number				
Suburb			Postcode:	
Residential Status	P = Permanent	T = Temporary <i>If T, complete * boxes below</i>	Date of Arrival in Australia OR Date of Return to Australia	
* Visa Sub Class:	* Visa Statistical Code : <i>(Not required for some sub-classes)</i>		* Visa Expiry Date: <i>(dd - mm - yyyy)</i>	
Speaks English	Yes or No	If No = Language Spoken at Home		
Indigenous Background	K = Koori B = Both Koori & Torres Strait Islander	T = Torres Strait Islander N = Either		
Living Arrangement	B = At home with BOTH Parents or Guardians A = State Arranged Out of Home Care		O = At home with ONE Parent or Guardian	
HOME LOCATION DETAILS:				
Usual Mode of Transport		W = Walking T = Train	Y = Bicycle C = Driven	B = School Bus X = Taxi P = Public Bus O = Other
Distance to School In Kilometres (Example 5.5 K)				
Date of First Australian School (Grade 1-6 only) :				Name of Last School or Kindergarten:
Years of Previous Education				Language of Previous Education:
Years of Interruption to Education:				Repeating Year Yes or No
Does the Student have a Victorian Student Number (VSN)? (Prep will be NO)				
Yes. Please Specify:	Yes. VSN unknown		No. VSN Never Been Issued	

All Sections on this page must please be completed

PRIMARY FAMILY DETAILS			
NOTE: Primary Family Members are those adults who have day to day care of the child. Alternative and Additional family forms should be completed where parents have separate residences (i.e. mother and father living in separate homes)			
ADULT A: (First contact parent or guardian)		ADULT B:	
Gender	Male or Female	Gender	Male or Female
Title:	<input type="checkbox"/> Ms, Mr, Mrs, Miss, <input type="checkbox"/> Dr, Rev, Hon, Prof.	Title:	<input type="checkbox"/> Ms, Mr, Mrs, Miss, <input type="checkbox"/> Dr, Rev, Hon, Prof.
Legal Surname:		Surname:	
Legal First Name		First Name	
Occupation		Occupation	
Employer		Employer	
Country of Birth	<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify)	Country of Birth	<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify)
Native Language	English Only	Native Language	English Only
Other Language	<input type="checkbox"/>	Other Language	<input type="checkbox"/>
Interpreter Required	Yes or No	Interpreter Required	Yes or No
Relationship To Student : (Parent, Step Parent, Adoptive Parent, Foster Parent, Relative, Friend or Other)		Relationship To Student : (Parent, Step Parent, Adoptive Parent, Foster Parent, Relative, Friend or Other)	
ADULT A: Contact Details		ADULT B: Contact Details	
Phone:		Phone:	
Home		Home	
Mobile		Mobile	
Work		Work	
This section must be completed for the school records. Thank you			
What is the highest year of Secondary school Adult A has completed? (tick one). (For persons who have never attended school, tick 'Year 9 or equivalent or below'.) <input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below		What is the highest year of Secondary school Adult A has completed? (tick one). (For persons who have never attended school, circle 'Year 9 or equivalent or below'.) <input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below	
What is the highest qualification level Adult A has completed? (Please tick) <input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced Diploma / Diploma <input type="checkbox"/> Certificate 1 to IV (including trade certificate) <input type="checkbox"/> No non-school qualification		What is the highest qualification level Adult A has completed? (Please tick) <input type="checkbox"/> Bachelor Degree or above <input type="checkbox"/> Advanced Diploma / Diploma <input type="checkbox"/> Certificate 1 to IV (including trade certificate) <input type="checkbox"/> No non-school qualification	
What is the occupation group of Adult A? (Please enter letter of the appropriate group from the attached list. <input style="width: 40px; height: 20px;" type="text"/> If the person is not currently in paid work but 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 occupation group list. If the person has not been in paid work for the last 12 months, enter 'N'.)		What is the occupation group of Adult B? (Please enter letter of the appropriate group from the attached list. <input style="width: 40px; height: 20px;" type="text"/> If the person is not currently in paid work but 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 occupation group list. If the person has not been in paid work for the last 12 months, enter 'N'.)	
Student Living With Primary Family:			
A = Always, M = Mostly, B = Balanced, O = Occasionally, N = Never		Correspondence to: A =Adult A, B =Adult B, C =Both Adults	

FAMILY DOCTOR DETAILS			
Doctor's Name			
Building or Group Details			
No. & Street Details			
Suburb		Postcode	
Telephone Number		Mobile Number	
Medicare Number:		Ambulance Subscriber	Yes or No
EMERGENCY CONTACTS (Important that this is fill out) - If Parents cannot be contacted			
Name	Relationship: Relative, Friend etc	Language Spoken	Telephone Contacts:
1.			
2.			
3.			
4.			
IMMUNISATION DETAILS			
An Immunisation Certificate for your child must be provided on enrolment. (The Health Care book is not Acceptable. <u>It must be the Certificate from Medicare</u>)			
Immunisation Certificate Presented and copied?			Yes or No
Medical Alert?	Yes or No	If Yes - Please ensure that the medical details are completed below:	
MEDICAL CONDITIONS			
If the student has been diagnosed with any health conditions. Please ask for special forms available from the school Office for each of your child's medical needs.			
1. MEDICAL CONDITION - ASTHMA	Yes or No	If Y - Please complete School Asthma Management Plan	
2. MEDICAL CONDITION - OTHER (Name of Condition) (Allergies to Medicines, Other Allergies, ADHD, Migraines etc)			
Further Detail:			
Symptoms:	ON DISPLAY OF SYMPTOMS:		
	Inform Doctor	Yes or No	
	Inform Emergency Contact	Yes or No	
	Administer Medication	Yes or No*	
		Other Medical Action	Yes or No
More medical conditions	Yes or No	If Yes please request additional forms from office staff.	
DISABILITY DETAILS			
Does the child have disability (Integration) funding	Yes or No	Disability ID Number	
Hearing Impairment	Yes or No	Speech Impairment	Yes or No
Vision Impairment	Yes or No	Mobility Impairment	Yes or No

**** This section should only be completed if this student has a doctor other than the family doctor ****

STUDENT DOCTOR DETAILS

Doctor's Name:			
Number & Street or Box Number			
Suburb		Postcode	
Telephone Numbers			

PERMISSION FOR MEDICAL INTERVENTION

In the event of illness or injury to my child whilst at school, on an excursion, or travelling to or from school; I authorise the Principal or Teacher-in-charge of my child, or other First Aid Trained Staff members, where the Principal or Teacher-in-charge is unable to contact me, or it is otherwise impracticable to contact me to:

- Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner,
- Administer such first aid as the Principal or staff member may judge to be reasonably necessary.

_____ / _____ / _____
 Signature of Parent/Guardian Dated

PERMISSION TO GIVE MEDICATION

At times your child may need to be given medication for a medical condition or illness while they are attending Bunyip Primary School. Staff at Bunyip Primary School need permission to be able to administer any form of medication to a student.

I GIVE permission for any Bunyip Primary School Staff member to administer prescribed medication/ dosage to my child as stated by the medical practitioner.

I GIVE permission for any Bunyip Primary School Staff member to administer Panadol etc to my child after being contacted with their concern prior to administering the medication.

CUSTODY AND ACTIVITY RESTRICTIONS

Custody/Access Restrictions	Yes or No	N.B. A Copy of Legal Orders must be given to the School. Copy of Court Orders Supplied: Yes or No		
Access Type: Please circle	Court Order	Family Law Order	Restraining Order	Other
Please describe the Access Restriction:				
Is there an Activity Alert for the student?	Yes or No			
Please describe the Activity Restriction:				

PART TIME STUDENT INFORMATION (IF REQUIRED)

Actual Time Fraction Not Required Unless Part Time Student	0.	SGB Time Fraction Not Required Unless Part Time Student	0.
Other School Name		Time Fraction	0. Enrolled Yes or No
Other School Name (If required)		Time Fraction	0. Enrolled Yes or No

Before completing the following section please ensure that you have been given and read all of the School Policies and Codes of Practices:

BUNYIP PRIMARY SCHOOL STUDENT MANAGEMENT POLICY

I have read and understood Bunyip Primary School's Codes of Practice for Student Management and agree to support the School Council in their implementation.

BUNYIP PRIMARY SCHOOL STUDENT DRESS CODE & SUN SMART POLICY

I have read and understood Bunyip Primary School's Uniform (Student Dress Code) and Sun Smart Policies and agree to support the School Council by making every attempt to ensure that my child adheres to the Uniform (Student Dress) and Sun Smart codes at all times and that I will provide a written explanation whenever my child is not wearing correct school uniform.

BUNYIP PRIMARY SCHOOL HEAD LICE POLICY

To help control the number of head lice cases in the school, the School Council and community have developed a policy, which allows suitably trained staff, and volunteers to conduct head lice checks as required. We request that parents give permission for their child's hair to be inspected. This will enable us to promptly arrange checks for classes experiencing problems.

I have read and understood Bunyip Primary School's Head Lice Policy and agree to support the School Council by conducting regular checks of my child's hair and informing the school whenever head lice or nits are found.

BUNYIP PRIMARY SCHOOL CAR PARK POLICY

For the safety of all the students and the rest of the School Community it is very important to abide by the information written in the Car Park Policy at all times.

I have read and understood Bunyip Primary School's Car Park Policy and agree to support the School Council in their implementation.

BUNYIP PRIMARY SCHOOL SOCIAL MEDIA POLICY

I have read and understood Bunyip Primary School's Social Media Policy and agree to support the School Council in their implementation.

CONSENT TO PHOTOGRAPH

During your child's attendance at Bunyip Primary School, there will be times when photographs will be taken of the children. Reasons may include: Identification of children at medical risk; school promotions and publications in papers, curriculum displays, Web page displays such as newsletters & Award winners displays; etc.

I GIVE permission for my child to be photographed and their full names (Christian and Surname) to be published for school activities.

I DO NOT GIVE permission for my child to be photographed for any reason without previous consultation.

TRANSFER STUDENTS INFORMATION

In the event that your child may be transferred to another school in Victoria or Interstate for various reasons. **I GIVE** permission for the Office to send relevant information about my child on to the new school.



Thankyou for taking the time to complete this Student Information form.

The details are confidential, but are required to enable staff to properly enrol your child at our school.

I certify that the information contained within this form is correct.

Signature/s of Parent / Guardian _____

Dated _____ / _____ / _____

Signature/s of Parent / Guardian _____

Dated _____ / _____ / _____

PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students.

This information is used for determining funding allocations to schools.

Please select the appropriate letter from the following list of groups.

If you are not currently in paid work but have had a job in the last 12 months, or have retired in the last 12 months, please enter the occupation group letter of your last occupation

If you have not been in paid work for the last 12 months, enter 'N' into the 'occupation code' field on the enrolment form.

LIST OF PARENTAL OCCUPATIONS:

GROUP A Senior management in large business organisation, government administration & defence, & 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, proof reader, 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 Tradesmen/women, clerks and skilled office, sales and service staff

Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women 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 / child care 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)



Bunyip Primary School

School Number 2229
Po Box 12
Bunyip. 3815
Phone 5629 5462 Fax 5629 5846
E:mail bunyip.ps@edumail.vic.gov.au

PRIVACY NOTICE

Information About The Enrolment Form. Please Read This Notice Before Completing The Enrolment Form.

This confidential enrolment form asks for personal information about your child as well as family members and others that provide care for your child. The main purpose for collecting this information is so that Bunyip Primary School can register your child and allocate staff and resources to provide for their educational and support needs. All staff at Bunyip Primary School and the Department of Education & Early Childhood Development are required by law to protect the information provided by this enrolment form.

Health information is asked for so that staff at Bunyip Primary School can properly care for your child. This includes information about any medical condition or disability your child may have, medication your child may rely on while at school, any known allergies and contact details of your child's doctor. Bunyip Primary School depends on you to provide all relevant health information because withholding some health information may put your child's health at risk.

Bunyip Primary School requires information about all parents, guardians or carers so that we can take account of family arrangements. Family Court Orders setting out any access restrictions and parenting plans should be made available to Bunyip Primary School. Please tell us as soon as possible about any changes to these arrangements. Please do not hesitate to contact the Principal, Ted Lease, if you would like to discuss, in strict confidence, any matters relating to family arrangements.

Emergency Contacts

These are people that Bunyip Primary School may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Bunyip Primary School.

Student Background Information

This includes information about a person's country of birth, aboriginality, language spoken at home and parent occupation. This information is collected so that Bunyip Primary School receives appropriate resource allocations for their students. It is also used by the Department to plan for future educational needs in Victoria. Some information is sent to Commonwealth government agencies for monitoring, planning and resource allocation. All of this information is kept strictly confidential and the Department will not otherwise disclose the information to others without your consent or as required by law.

Immunisation status

This assists Bunyip Primary School in managing health risks for children. This information may also be passed to the Department of Human Services to assess immunisation rates in Victoria. Information sent to the Department of Human Services is aggregate data so no individual is identified.

Visa status

This information is required to enable Bunyip Primary School to process your child's enrolment.

UPDATING YOUR CHILD'S RECORDS

Please let Bunyip Primary School know if any information needs to be changed by sending updated information to the school office. During your child's time with Bunyip Primary School we will also send you copies of enrolment information held by us at the beginning of each year. Please use this opportunity to let us know of any changes. **Phones numbers are very important to keep up to date.**

ACCESS TO YOUR CHILD'S RECORD HELD BY SCHOOL

In most circumstances you can access your child's records. Please contact the Principal to arrange this. Sometimes access to certain information, such as information provided by someone else, may require a Freedom of Information request. We will advise you if this is required and tell you how you can do this.

If you have any concerns about the confidentiality of this information please contact the Principal. The Department can also provide you with more detailed information about privacy policies that govern the collection and use of information requested on this form. Please call the Department's Privacy Manager on (03) 9637 3601 if you would like this information.