



STUDENT APPLICATION FOR ENROLMENT

Student Name: _____

NOTES:

1. Upon lodgement of your Application form, an interview will be arranged with the School Principal. **Acceptance for enrolment** will depend on the outcome of that interview, and availability of places within the school. You will be notified in writing of the decision made by the School.
2. A one off **Family Registration fee of \$60** will apply if accepted by the School.
3. **When applying please check that the following is supplied with the Application form:**
 - \$30 Application fee must accompany this form.
 - Child's Birth Certificate
 - Recent school reports
 - Copy of Immunisation Certificate from Medicare
 - Court Order (if applicable)
 - Copy of student medical documents (If applicable)
 - Passport or travel documents, visa etc (if not an Australian Citizen)
4. Send to: **Parkes Christian School**
P.O. Box 420
Parkes NSW 2870

The School is subject to the Privacy and Personal Information Protection Act 1998 (NSW).

The information provided on the Application for Enrolment Form is being obtained for the purpose of processing the application.

The information will be stored securely. You may access or correct any personal information provided by contacting the school.

The health-related information collected is subject to the Health Records and Information Privacy Act 2002. It is being collected for the purpose of ensuring the health and safety of all students, staff and visitors to the school.

243 Back Trundle Road, Parkes NSW 2870

PO Box 420, Parkes NSW 2870

Telephone: (02) 6862 4164 **Fax:** (02) 6862 3744 **Email:** administration@parkescs.nsw.edu.au

STATEMENT OF FAITH

God

There is one God and He is sovereign and eternal. He is revealed in the Bible as three equal divine Persons - Father, Son and Holy Spirit. God depends on nothing and no one; everything and everyone depends on Him. God is holy, just, wise, loving and good. God created all things of His own sovereign will, and by His Word they are sustained and controlled. God is the God and Father of our Lord Jesus Christ. He is also Father of all whom He has adopted as His children. Because of God's faithfulness and His fatherly concern, nothing can separate His children from His love and care. The Lord Jesus Christ is the eternally existing, only begotten Son of the Father. He is the Creator and Sustainer of all things. He was conceived by the Holy Spirit and born of a virgin, truly God and truly man. He lived a sinless life and died in our place. He was buried, rose from the dead in bodily form and ascended to heaven. Jesus is King of the universe and Head of the Church, His people whom He has redeemed. He will return to gather His people to Himself, to judge all people and bring in the consummation of God's Kingdom. The Holy Spirit proceeds from the Father and the Son. He convicts people of their sin, leads them to repentance, creates faith within them and regenerates them. He is the source of their new sanctified life bringing forth His fruit in the life of believers. He gifts believers according to His sovereign will, enabling them to serve the Lord.

The Bible

The Bible, which is comprised of the books of the Old and New Testament, is the inspired, inerrant and infallible Word of God, and the only absolute guide for all faith and conduct. It is indispensable and determinative for our knowledge of God, of ourselves and of the rest of creation.

God's Word

Adam and Eve, the parents of all humankind were created in the image of God to worship their Creator by loving and serving Him, and by exercising dominion under God's rule by inhabiting, possessing, ruling, caring for and enjoying God's creation. Consequently the purpose of human existence is to glorify God and enjoy Him forever. Sin entered the world through Adam's disobedience, because of which all people are alienated from God and each other and, as a result, they and all creation are under God's judgement. All people have sinned and, if outside of Christ, are in a fallen, sinful, lost condition, helpless to save themselves, under God's condemnation and blind to life's true meaning and purpose. God holds each person responsible and accountable for choices made and actions pursued. Human responsibility and accountability do not limit God's sovereignty. God's sovereignty does not diminish human responsibility and accountability.

(C) Christian Schools Australia 2010

VISION & MISSION STATEMENT

Motto: "Growing up into Christ – Reaching out to the world"

Mission: "To provide a Christian school which both teaches and models Christian faith"

Vision:

1. To encourage students to learn about God and to respond to Him in love and obedience.
2. To pursue academic excellence and to provide educational opportunities of the highest standard.
3. To teach and model Christian ethics, and encourage students to apply Biblical truth to the whole of life.
4. To foster the involvement of families in our school community.
5. To develop the servant attitude of Christ in our students so they may minister to the needs of others.
6. To enroll students from families who desire a Christian education for their children.

CONDITIONS OF ENROLMENT

Enrolment at the school is subject to the following terms and conditions:

1. That the parents will agree to allow the child to share fully in the life and program of the school, including the devotional activities and doctrinal lessons.
2. Agree to comply with the Statement of Faith.
3. That the parents will support the aims of the school and order their own lives and home so that the child will be given every opportunity to grow up into Christ.
4. The parents undertake to provide the child with all necessary textbooks and other equipment of a personal nature that may be required to enable the child to benefit from the education offered.
5. That the parents undertake to provide the child with the correct uniform approved by the school, and to ensure that the child is always sent to school neatly and modestly dressed in the required uniform.
6. That the parents accept the right of the school to employ such discipline as it deems wise and expedient for the child and agree to uphold in every way possible the school's authority and right to administer appropriate discipline in accordance with the policies of the school.
7. That all fees are payable by the second week of each term.
 - Where payment is not made within 7 days of due date a late payment charge may be charged. (Note- In cases where this requirement would cause hardship alternate arrangements may be discussed with the School Board Finance Committee.)
 - Alternately a Direct Debit system, with regular payments, may be availed of with payments being taken from the start of February through to the end of November. Ask the office staff for forms.
8. In the event of non-payment of fees, where debt collectors are used, collection agency fees become the responsibility of the student's family.
9. Parents must give one term's notice for termination of enrolment and failure to do so may render them liable for the next term's fees.
10. The School is able to contact other Schools and/or Agencies as it sees fit to obtain information to support the school making a decision on this enrolment
11. That the School may suspend or terminate enrolment at its discretion for failure to comply with these conditions or other serious breaches of the school's rules and regulations.

I/we accept the conditions of enrolment as set out above and hereby apply to have _____ enrolled in the School.

I CERTIFY THAT ALL INFORMATION PROVIDED IN THIS ENROLMENT IS TRUE AND CORRECT.
I accept that we will be jointly and severally liable for the school fees arising from this enrolment.

Signed Date

(Father) (Mother)

STUDENT INFORMATION**Student Name:** _____*Please print*Please state why you wish to enrol your child in a Christian School.

_____**Year/Class applied for** _____ for 20 _____ (eg 2019)**Family name** _____**Given names** _____**Preferred first name** _____**Date of Birth** ___/___/___ **Age:** _____ **Male/ Female (circle)****Home Address** Lot no _____ Property name _____

Street No _____ Street Name _____ City _____ Postcode _____

Postal Address _____ Postcode _____**Student lives with** _____*(mother, father, both parents, guardian, other – please specify)*Is this child of **Aboriginal or Torres Strait Islander Descent?** (circle one)

No Yes, Aboriginal Yes, Torres Strait Islander Both, Aboriginal & Torres Strait Islander

Religion _____ Church attended _____

Country of birth _____ Nationality _____

Australian Citizen Y / N Permanent Resident Y / N Temporary Visa Holder Y / N

Languages other than English spoken at home _____

EDUCATION (please ensure a copy of last school report is attached)

Present school _____ Location _____ Years attended _____

Previous schools _____ Location _____ Years attended _____

_____ Location _____ Years attended _____

Board of Studies Number: _____ **(Year 10/11/12 only. Please ask previous school)**What is your child's level of academic performance? excellent above average average below average
Does your child experience learning difficulties? (e.g problems with reading, dyslexia)

Y / N

If so please outline the difficulties experienced _____

Briefly outline the assistance your child has received _____

Is there a family history of learning difficulties? Briefly Outline _____

SOCIAL DEVELOPMENT

Which of the following best describes your child? (please circle)

Makes friends easily Plays alone Makes some good friends Finds it difficult to make friends

Other comment _____

HOBBIES/ INTERESTS OF CHILD

What does your child enjoy doing by themselves?

With others as a group?

STUDENT MEDICAL DETAILS

Medicare number: _____ Expiry Date: ___/___ Student's position on card: ____

Doctor's name: _____ Phone: _____

Address: _____

Medical Attention:

I give my permission for the school to seek information from the Doctor listed in this Enrolment Form about how to manage any allergy or medical condition experienced by the student. Y / N

I give permission for an ambulance to be called in an emergency. (covered under the school's policy) Y / N

I give permission for the school staff to administer paracetamol/panadol. Y / N

Date of Last Tetanus booster shot: _____

Has your child been fully immunised as required by the government? Y / N

If not please explain:

Medications at school:

Please list any medication to be taken at school with times. *(see Health to give further details)*

HEALTH

Emotional development – has this been normal?

Y / N If not, give details.

Has physical development been normal?

Y / N If not, please provide details.

Allergies: Please list allergies/intolerances and treatment used.

Y / N e.g., medicine or drug, insect stings or other substances?

Medical Does the child suffer from any illness or incapacity that would affect learning? If so please

Y / N indicate below. Also give details & any medications: *e.g. Epilepsy, ADD, ADHD, Asthma, Anxiety, Diabetes etc*

Disabilities, Impairments and Long Term Medical Conditions

Does your child have a disability, impairment or long term condition? (*Current medical documents relating to the diagnosis will need to accompany this application before your child can be accepted.*)

Vision Y/N _____

Hearing Y/N _____

Physical Y/N _____

Intellectual Y/N _____

Long Term Medical Condition Y/N _____

Mental Illness Y/N _____

Autism Y/N _____

Language (Speech) Y/N _____

Does your child have a current mental health plan? _____

Other _____

Special Diet Y / N _____

Are there any other medical facts that the school should know about?

STUDENT WELFARE

Has your child been on an individual student welfare or management plan? (If you please briefly outline)

Has the child been suspended/expelled from a previous school? Y / N When: _____

Why was your child suspended/expelled: _____

OTHER INFORMATION (If answer is yes DO NOT write details but discuss it with the interviewer)

Has the child been in trouble with the police? () Has the child been subject to criminal assault? ()

Are there any other facts about your child we should know? ()

Continued.	FATHER/GUARDIAN	MOTHER/GUARDIAN
Occupation group: (see list on back of this page)	1. Senior Management/Executive () 2. Business Manager () 3. Trades/Office/Sales () 4. Machine Op/Hospitality/Laborer () 8. Unemployed for last 12 months () See page 9 for breakdown of groups listed above. <i>(If not currently in paid work but have had a job or have retired in the last 12 months, please use the last occupation.)</i>	1. Senior Management/Executive () 2. Business Manager () 3. Trades/Office/Sales () 4. Machine Op/Hospitality/Laborer () 8. Unemployed for last 12 months () See page 9 for breakdown of groups listed above. <i>(If not currently in paid work but have had a job or have retired in the last 12 months, please use the last occupation.)</i>
School education:	Year 12 or equivalent () Year 11 or equivalent () Year 10 or equivalent () Year 9 or equivalent or below ()	Year 12 or equivalent () Year 11 or equivalent () Year 10 or equivalent () Year 9 or equivalent or below ()
Work number: Employer:	Bachelor degree or above () Advanced Diploma / Diploma () Cert I to IV (including trade cert) () Non-school qualification ()	Bachelor degree or above () Advanced Diploma / Diploma () Cert I to IV (including trade cert) () Non-school qualification ()

OTHER PARENT NOT LIVING AT STUDENT'S HOME

Names:

Surname: _____

First names: _____

Relationship to student: _____

Address: _____

Access Y / N Details of Access (must have supporting documentation):

Court Orders: Y/N Please provide copies of any court orders, which have been made in respect of your child, which could affect his/her stay at our school

Copies requested School reports Y / N
 Assessment task referrals (Years 9 & 10) Y / N
 School newsletters (emailed out) Y / N

Email Address: _____

EMERGENCY CONTACTS - OTHER than PARENTS

(please nominate someone, preferably close to the school, if parents are not contactable)

First emergency contact:

Name: _____ Phone: _____

Relationship to student: _____ Mobile: _____

Second emergency contact:

Name: _____ Phone: _____

Relationship to student: _____ Mobile: _____

BROTHERS at this school

Brother _____ Date of birth _____

SISTERS at this school

Sister _____ Date of birth _____

other BROTHERS

Brother _____ Date of birth _____

other SISTERS

Sister _____ Date of birth _____

List of Parental Occupation Groups

Group 1:

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 2: 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 3: 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 4: 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)

PERMISSION TO PHOTOGRAPH/FILM AND RECORD STUDENT

I (give / don't give) permission for
(please circle)

.....
(please print full name of child)

Who is enrolled at Parkes Christian School to be Photographed/Filmed and Recorded.

The material may be used for broadcast, video, online delivery (facebook/website), CD-ROM/USB format, or any other form of electronic transmission. The work may also be used in supporting print or audio materials and packages for free distribution and for sale for no-commercial purposes (eg study or training) and may also be used in further projects by Parkes Christian School.

Please note if at any time you no longer wish for your child to be photographed/filmed and recorded, you will need to notify the school in writing of your decision. Otherwise the school will have the right to use your child's photo until notification has been received.

Parent/Carer Name:
(please print your full name)

Signature:

Date:

RELEASE OF STUDENT INFORMATION

I (give / don't give) permission for Parkes Christian School to obtain information regarding my child in order to assist with their care during their time as a student at Parkes Christian School.

This includes information from previous schools, government agencies, medical practitioners and specialists.

Parent/Carer Name:
(please print your full name)

Signature:

Date:

LOCAL EXCURSION PERMISSION FORM

I give permission for my child/children _____
to attend **ANY** excursion which the school has arranged on their behalf, in the local area.

I understand that my child/children may be walking or travelling by bus to and from the excursion.

Parent/Carer Name:
(please print your full name)

Signature:

Date: