

WANNEROO SECONDARY COLLEGE

APPLICATION FOR ENROLMENT FORM

BECONDARY COLLEGE FOR EN	ROLMENT	IN A WESTERN AUSTR	ALIAN PUBLIC	SCHOOL			
PERSONAL DETAILS (PLEASE I	PRINT ALL [DETAILS BELOW)					
Child's surname:	Given nam	es:	Date of	Date of birth:		Sex (M /F):	
Surname of parent/responsible person:	Given nam	es:	Mr/Mrs/	Ms	Relati	onship to student	
parent/responsible person:							
Posidential Address (must be som				Postc	odo:		
Residential Address (must be completed):					FUSIC	oue.	
Nearest intersecting street:							
Postal Address (if different from residential address):					Postc	ode:	
,		,					
Telephone – Home:		Mobile Phone No:		l			
Work (if convenient):		Email:					
Are there any Family Court Orders	regarding th	ne day to day or long tern					
			YES	· 🗆	NO		
If applicable, year level child curre	ntly enrolled	in (e.g. Year 7):					
If applicable, name of school at wh	nich the child	is currently or was last e	enrolled:				
Percentage attendance at school i	n the previou	us 12 months.					
Are you applying to enrol in a spec	cialist progra	m at this school?					
Name of specialist program:	YES		NO				
Will there be any brothers or sisters attending this school?							
Names and year levels:	YES	. 🗆	NO				
Is your child currently under suspension from a school?					NO	П	
If YES, name of school:		YES	. Ц	NO	Ц		
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Has your child been suspended from school in the past 12 months? If YES, provide details			YES	S 🗆	NO		
Has your child ever been excluded	l from a scho	2012					
If YES, name of school:	JOI :	YES	· 🗆	NO			
Is your child a permanent resident	of Australia)					
13 your office a permanent resident	•	YES	YES 🗆				
If NO, please indicate date entered Australia:			Visa Sub Class No.:				
Does your child have a disability/n	nedical cond	ition? This information w	ill assist the scho	ool principa	al with	considering	
whether any specific or additional educational program for your child			to assist the sch	ool with pr	oviding	the best	
Physical Intellectual		ther medical condition					
Please outline nature of disability/i							

P2. APPLICATION FOR ENROLMENT FORM FOR ENROLMENT IN A WESTERN AUSTRALIAN PUBLIC SCHOOL. This is an application only and not an enrolment.

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	
The information and statements provided in this application for enrolment are true and accurate in	n relation to:
Name of child:	
Name of person enrolling child:	
Relationship to child: (Independent Minors and those aged 18 years or older may apply on their own behalf)	
Signature:	
Date:/	
NOTE: In the event that statements made in this application later prove to be false or misleading, application may be reversed. Information supplied may need to be checked by the school.	, a decision on this
DOCUMENTS TO BE PROVIDED	
Please place X in □ to indicate each document is attached to this application form. 1. Birth Certificate or extract or other identity documents if applicable 2. 'Immunisation Certificate' 3. Copies of Family Court or any other court orders (if applicable) 4. Proof of address (see Requested documentation in the attached Parent information) 5. Information relating to suspensions or exclusions 6. Information relating to disability	
If your child was not born in Australia, you must provide evidence of: 1. Date of entry into Australia □ 2. Passport or travel documents □ 3. Current visa subclass and previous visa subclass (if applicable)	
 If your child is a temporary visa holder, you must also provide: Confirmation of enrolment or evidence of any permission to transfer provided by Education and Training International (ETI) at study.eti@dtwd.wa.gov.au. (if holding an International full fee student visa, sub class 571); or Evidence of the visa for which the student has applied if the student holds a bridging visa. 	
Please note details will be checked regarding behaviour,(including suspensions), and attendan school.	ice at your child's previous
Application Successful: Yes or No Principals' Signature	ite
OFFICE USE ONLY Date received: Birth certificate / other: YES NO Visa sighted YES NO	

Family Court Order YES NO