



Education Support Enrolment Documentation

All OUT OF AREA enrolments must be submitted by **15th July 2024**.

Parents/Guardians, please complete this form - your child's previous school will be able to help with the **BLUE SECTIONS**. Return this (and required documents) with your enrolment application to Wanneroo Secondary College 56 Quarkum Street, Wanneroo (note we are closed in the school holidays).

STUDENT DETAILS

Year Enrolling at Wanneroo Secondary College: Year _____ 20_____

Child's Name: _____ Date of Birth: ____/____/____

Parent/Guardian Name: _____

Parent/Guardian Contact Number: _____ Email: _____

Child's previous/primary school: _____

Contact Person & Phone N° of previous primary school: _____

Previous/primary school Psychology Involvement: Yes No To be determined

DIAGNOSES - this section **MUST** be completed for the child to be considered for the Education Support Program. (Eligibility for Education Support requires at least ONE of these diagnosis – **previous school should have these documents and can assist with completing this section**).

ID (IDD) – DSM-5: Mild Moderate Severe Profound Documents attached

ASD – DSM-5: Level 1 Level 2 Level 3 Documents attached

Other: Documents attached

IDA Funding Level:	Notes:
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SUPPORT PLANS WHERE APPLICABLE - these may be provided by medical practitioners, therapists, or previous schools; please submit all relevant plans.

RMP: <input type="checkbox"/> Document attached	Escalation Profile: <input type="checkbox"/> Document attached
PRN Administration: <input type="checkbox"/> Document attached	Behaviour Support: <input type="checkbox"/> Document attached
IEP: <input type="checkbox"/> Document attached	Functional Needs Assessment: <input type="checkbox"/> Document attached
Toilet Management: <input type="checkbox"/> Document attached	Sensory Profile: <input type="checkbox"/> Document attached
Seizure Management: <input type="checkbox"/>	
Other: <input type="checkbox"/> Document attached (please specify):	

WANNEROO SECONDARY COLLEGE OFFICE USE ONLY

Enrolment: In Area Out of Area Nearest Education Support Program (if not, where is the closest Education Support Program or school): _____

Diagnoses documents checked: ID (IDD) – DSM-5 ASD – DSM-5 Physical Disability Other

Support Plans checked: RMP Escalation Profile PRN Administration Behaviour Support IEP Functional Needs Assessment Toilet Mgmt Mealtime Management Seizure Management Other