





St Francis of the Fields School operates with the consent of the Bishop of the Catholic Diocese of Sandhurst and is owned, operated and governed by Catholic Education Sandhurst (CES) Limited, where formation and education are based on the principles of Catholic doctrine, and where the teachers are outstanding in true doctrine and uprightness of life. This application form is part of the CES Limited's Enrolment Framework which is available at www.sfstrathfieldsaye.catholic.edu.au.

Office use only	Date received:			Enrolment Y	ear:		
	Start date:			VSN:			
Birth certificate attached: Yes □ No □	pertificate attached: Immunisation history staten				ficate attached: No □		
English as an Additional Language: Yes □ No □		Visa information attached (if relevant):			Signatures included: Yes □ No □		
STUDENT DETAILS (please atta	ch a Birth Certificate for your ch	nild)					
Surname:			Entry year		Entry level/grade:		
First name/s:							
Preferred first name:							
Date of birth:	Religion:						
Male: □	Female: □			Other: □			
HOME ADDRESS OF STUDEN	NT						
Street number and name:							
Suburb:		Postcode:					
Home phone:							
PLEASE LIST YOUR PREFER	ENCES OF SCHOOLS FO	OR FNROI I	MENT _ if	annlying at	several schools		
1.				Sppijiig at	33.01010		
2.							

SACRAMENTAL INFORMATION (please attach a Baptism certificate for your child – if applicable)									
Baptis	m:	Date:		Parish:					
Confir	mation:	Date:			Parish:				
Recon	ciliation:	Date:		Parish:					
Comm	nunion:	Date:		Parish:					
Currer	nt parish:								
OTH	ER CHILDREN IN FA			COMMENCE S	CHOOL L	ist other children in	your family (for plar	nning future enrolments)	
Name		Anticipated of Enrolmen		School/Pre-scho	ool		Year Level	Date of Birth	
	01141 ITV								
	ONALITY								
Government Requirement		Nationality:		Ethnicity:					
In which country was the student born?			Aus	Australia ☐ Other – please :			specify:		
	Is the student of Aboriginal or Torres Strait Islander origin? (For persons of both Aboriginal and Torres Strait Islander origin, tick 'Yes' for both.)								
No □	No □ Yes, Aboriginal □ Yes, Torres Strait Islander □								
IF NOT BORN IN AUSTRALIA, CITIZENSHIP STATUS* Please tick the relevant category below and record the visa subclass number as per government requirements:									
(original documents to be sighted and copies to be retained by the school)									
Australian citizen not born in Australia:									
Australian citizen (Australian passport or naturalisation certificate number/document for travel if country of birth is not Australia)									
Australian passport number:									
Natura	Naturalisation certificate number:								
Visa subclass recorded on entry to Australia:									
Date of arrival in Australia:									
Not currently an Australian citizen, please provide further details as appropriate below:									
	□ Permanent resident: (if ticked, record the visa subclass number)								
	☐ Temporary resident: (if ticked, record the visa subclass number)								
	☐ Other/visitor/overseas student: (if ticked, record the visa subclass number)								
* Please attach visa/Immigration Card/Letter of Notification and Passport photo page.									

IMMUNISATION (please attach an immunisation history statement for your child)						
All vaccines are recorded on the Australian Immunisation Register (AIR). You are required to obtain an immunisation history statement for your child (visit myGov) and provide it to the school with this enrolment form.						
Immunisation history statement attached: Yes □			No □ If no, please provide explanation:			
If the student entered Australia on a humanitarian visa, did they receive a refugee health check?				Yes □ No □		
PREVIOUS SCHOOL / PRESCHOOL PERMISSION						
Name of previous school/preschool:						
Address of previous school/preschool:						
I/We give permission for the school to contact the previous school or preschool and to gather relevant reports and information to support educational planning: Yes □ No □						
PARENT A / GU	ARDIAN 1					
Surname:		Title: (eg.Mr/Mrs/l	Ms)		First name:	
Address:				I		
Home phone:		Work phone:			Mobile:	
DOB:	Re		Reli	eligion:		
Email:						
PARENT B / GUARDIAN 2						
Surname:		Title: (eg. Mr/Mrs/Ms)			First name:	
Address:						
Home phone:		Work phone:			Mobile:	
DOB:	DOB: Religion:					
Email:						

By signing below, the applicant/s acknowledge/s:

- this is a request for the named child to be considered for enrolment in the school according to the school's Enrolment Policy, and that the school's receipt of this application does not mean the school has enrolled this child.
- the school will consider this request and endeavour to communicate the outcome of this consideration by Friday 7 June 2024.
- That any initial offer will be provisional, with the applicants to then be required to provide additional
 information according to government and other requirements, and to agree to the Terms and Conditions of
 Enrolment.

Signatures must be hand written and not computer generated.					
PARENT A / GUARDIAN 1 SIGNATURE:		Date:			
PARENT B / GUARDIAN 2 SIGNATURE:		Date:			

Note: The Victorian Government provides the following guidance regarding admission requirements:

Consent can be provided through the signature of:

• parent as defined in the Family Law Act 1975

Note: In the absence of a current court order, each parent of a child who is not 18 has equal parental responsibility.

- both parents for parents who are separated, or a copy of the court order with any impact on the relationship between the family and the school
- an informal carer, with a statutory declaration.

Guardian/Carers:

- may be a relative or other carer
- have day-to-day care of the student with the student regularly living with them
- may provide any other consent required e.g. excursions.

Notes for an informal carer:

- statutory declarations apply for 12 months
- the wishes of a parent prevail in the event of a dispute between a parent legally responsible for a student and an informal carer.

<u>CHE</u>	CKLIST Please ensure you have attached copies of
	Birth Certificate (must be provided)
	Baptism, Reconciliation, Eucharist and Confirmation Certificates (if received) (must be provided if applicable)
	Immunisation History Statement from Australian Childhood Immunisation Register (must be provided)
	Information and reports relating to any medical condition or special needs of your child
	Relevant Family Court Orders, custody, access or guardianship documents (where applicable)
	Relevant medical/special needs information including clinical/educational assessments (where applicable)