

STUDENT DETAILS			
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Family Name		Date of Birth	
Given Names		Sex (M or F)	
Proposed Class of Entry		Proposed start date:	
Home Address			Postcode
Home Telephone Number		Mobile Telephone Number	
Siblings (+ages)			
Is the student Aboriginal or Torres Strait Islander?	Yes	No	

	MOTHER	FATHER
Family Name		
Given name/s		
Title (e.g. Mr, Mrs, Ms.)		
Occupation		
Home address		
Home phone		
Mobile no.		
Email		

How did you become aware of our school? *(advertising, word of mouth, prior knowledge, Open Day, etc.)*

An application fee of \$150 is required before we can process any application.

Application Fee (non-refundable) of \$150 to be paid in full prior to processing of enrolment. Please note: This fee will not be refunded if you withdraw your application or your child is not accepted.

Payment may be made in cash or by Mastercard Visacard

Cardholder name: Expiry date:/ CCV:.....

Signature:

Office: Application fee received? Y / N \$ Receipt No.

For Kindergarten students, what type of care did this child have in the year prior to enrolling at school?	
Long day care / Family day care	
Occasional care	
Early kindergarten/Pre-school	
Other care e.g. parent at home, relative, playgroup, other carer	

Amount of formal care each week, prior to enrolling at school:	
Up to 6 hours per week	
Up to 12 hours per week	
12 hours to fulltime each week	
Name of pre-school, long day care centre or other formal care service:	

All students: Were there any special provisions made for your child in his/her previous preschool/school?	
Supportive teaching and learning strategies/Learning support	
A reader or scribe/ access to assistive technology	
Modifications to equipment, furniture and learning spaces	
Personal carer support	
Other (please specify)	

What may be required for your child in this school?

For students with special needs	
Is your child a young person with:	
• Autism Spectrum Disorder	
• A hearing impairment	
• A vision impairment	
• A language disorder	
• Mental health issues	
• A physical disability	
• An intellectual disability	
• ADHD or significant difficulties in learning	
• Acquired brain injury	
• Other:	
Please provide a detailed description of the special needs:	

	Yes	No
What school is your child currently enrolled in?		
Does your child have any history of aggressive or violent behaviour?		
Has your child ever been subject to disciplinary action or suspended or expelled from any previous school?		
If yes, was this for:		
• Violence/ act of aggression to any person/property damage		
• Possession of a weapon or any item used to cause harm		
• Threats of violence or intimidation of others		
• Possession or distribution of illegal drugs or alcohol		
• Bullying/ Cyberbullying		
If yes, please provide details:		

Special circumstances		
	Yes	No
Are there any special circumstances about the student that the school should know prior to enrolment? (E.g. student subject of a court order, out of home care arranged by the state etc.)		
If yes, please provide a description of the circumstances:		

Student's history relevant to risk assessment		
	Yes	No
Central Coast Steiner School has a responsibility to assess and manage any risk of harm to its staff and students. To your knowledge, is there anything in your child's history or circumstances (including medical history), which might pose a risk of any type to him or her, other students, or staff at this school?		
If yes, please provide a detailed description:		
N.B. Parents or guardians are required to disclose any information that may need to be taken into account by the School including medical and psychological information and disciplinary action/ significant behavioural issues raised by previous school/s or professionals. Any lack of disclosure that may become apparent during the duration of a student's enrolment at the school may cause the enrolment of the child to be terminated.		

Please provide names and contact details of health professionals, previous schools or other relevant bodies that have knowledge of any relevant issues:	
Name	
Contact Phone Number	
I/we hereby declare that all information provided in this Application for Enrolment is true and complete:	
Parent/Guardian signature	
Parent/Guardian signature	
Date:	