APPLICATION FOR ENROLMENT

Name of Student: _____

Year Level:_____ **Start Date:**_____

IMPORTANT Please check that all required documentation is included and returned to Margaret River Senior High School. **This application cannot be processed until all documentation is received.**

PLEASE READ BEFORE COMPLETING APPLICATION

GENERAL INFORMATION

A parent or legal guardian applying to enrol a child in a government school should complete an *Application for Enrolment form*. Family details should include details of parents, guardians or carers residing at the same address as the student being enrolled. Only permanent residents of Australia and those children holding an approved visa sub-class number are eligible to be enrolled in a government school.

When enrolling your child at Margaret River Senior High School, the following documentation MUST be provided:

- ❒ *Birth certificate*
- ❒ *Immunisation History Statement*
- ❒ *Court order (if applicable)*
- ❒ *Proof of address*
- ❒ *Information relating to disability*

The Principal of the school may cancel the enrolment of an enrolled student if the Principal is satisfied that:

a) The enrolment was obtained by the giving of false or misleading information; or
b) The Principal has received notification of changes to the following:
   - Usual place of residence
   - Court orders pertaining to the child
   - Details of any conditions of the child that may call for special steps to be taken for the benefit or protection of the enrolee or other persons in the school
   - Legal guardian of the child

Please note: *LEGAL NAMES must be used in every instance; use of preferred name rather than legal name must be discussed with enrolling officer. This form is to be completed by Parent / Guardian / Carer.*

SECURITY AND CONFIDENTIALITY

The information provided on this form will be stored securely in local school and Departmental databases. The management of these databases is governed by State and Departmental policies to ensure security, privacy and confidentiality.

The Department of Education's *Information Communication Technologies Security Policy* preclude this information from being used for any purpose other than to:

- determine whether your application for enrolment can be accepted
- assist the school with addressing any needs for your child if enrolment is accepted
- comply with legal requirements or ministerial directions

RESIDENT IN LOCAL INTAKE AREA

Margaret River Senior High School is a Local Intake Area School. The boundaries are determined by the Department of Education of Western Australia. A map of this area is available, should you need to know these boundaries, on the website: https://www.det.wa.edu.au/schoolsonline/. **An eligible child whose place of residence is within the local intake area is guaranteed enrolment (subject to provision of required documentation)**.

In most cases, transporting your child to school is the parents' responsibility. Enquiries regarding school bus services should be directed either to School Bus Services on 08 9326 2625 or schoolbus@pta.wa.gov.au or to Shepherdson's Transport 08 9757 2955.

STUDENT DETAILS

SCSA STUDENT NUMBER _____ ***This is the number on your child's school report***

Surname: _____ Legal Surname (if different): _____

Previous Surname (if applicable): _____

1st Name: _____ 2nd Name: _____ 3rd Name: _____

Preferred 1st Name: _____

Date of Birth: _____/_____/_____ Sex: ☐ Male ☐ Female ☐ Indeterminate / Intersex

Residential Address: _____

_____ Postcode: _____

Telephone (Home): _____ Student's Mobile (if applicable): _____

Full Name/s of brothers and sisters attending this school:

_____

ADDITIONAL INFORMATION

Country of Birth: _____

Religion (Optional): _____

Student's First Language: _____

Is the student's descent: ..... Aboriginal ☐ YES ☐ NO
..... Torres Strait Islander (TSI) ☐ YES ☐ NO
..... Both Aboriginal and TSI ☐ YES ☐ NO

Does the student speak a language other than English at home? ..... ☐ YES ☐ NO
Does the student mainly speak English at home? ..... ☐ YES ☐ NO
(If more than one language, indicate the one that is spoken most often.)
☐ NO, English only
☐ YES, other - please specify: _____

Australian Citizenship/Permanent Resident: ..... ☐ YES ☐ NO

Date of Arrival in Australia: _____ Visa Sub-class No: _____ Visa Expiry Date: ....

Visa Grant Number: _____ International Fee Paying (if known): ..... ☐ YES ☐ NO

Current School Attending: _____

If previously enrolled in Home Education, specify the Education Region: _____

PARENT / GUARDIAN 1

Parent/Guardian 1 Details (Legal Name)

Title: _____ First Name: _____ Second Name: _____ Surname: _____

Please indicate relationship to the student: _____

Residential Address: _____

Postal Address (if different from above): _____

Telephone (Home): _____

Occupation/Workplace location: _____

Telephone (Work): _____ Mobile No: _____

Do you mainly speak English at home? ☐ YES ☐ NO

Do you speak a language other than English at home? ☐ NO, English only ☐ YES, other - please specify:

(If more than one language, indicate the one that is spoken most often): _____

IMPORTANT **Mobile Phone for SMS (absence notifications): _____**

Email Address* Parent 1:

*Email address is required for access to our Learning Management System (Compass)

What is the highest year of primary or secondary school you have completed? If you did not attend school mark 'Year 9 or equivalent or below'.	What is the level of the highest qualification you have completed?
☐ Year 12 or equivalent. ☐ Year 11 or equivalent. ☐ Year 10 or equivalent. ☐ Year 9 or equivalent or below	☐ Bachelor degree or above ☐ Advanced Diploma or Diploma ☐ Certificate I to IV (indicating trade certificate) _____ ☐ Nil

Please select appropriate parental occupation group from the list provided on the table below.

☐ Group 1 ☐ Group 2 ☐ Group 3 ☐ Group 4 ☐ N/A

Please select appropriate parental occupation group from the list provided on the table below. If you are not currently in paid work but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 months, tick 'N/A'.

GROUP 1	**GROUP 2**	**GROUP 3**	**GROUP 4**
Senior management in large business organisation, government administration & defence, and qualified professionals	**Other business managers, arts/media/sportspersons and associate professionals**	**Tradesmen/women, clerks and skilled office, sales and service staff**	**Machine operators, hospitality staff, assistants, labourers and related workers**

PARENT / GUARDIAN 2

Parent/Guardian 2 Details (Legal Name)

Title: _____ First Name: _____ Second Name: _____ Surname: _____

Please indicate relationship to the student: _____

Residential Address: _____

Postal Address (if different from above): _____

Telephone (Home): _____

Occupation/Workplace location: _____

Telephone (Work): _____ Mobile No: _____

Do you mainly speak English at home? ☐ YES ☐ NO

Do you speak a language other than English at home? ☐ NO, English only ☐ YES, other - please specify:

(If more than one language, indicate the one that is spoken most often): _____

Email Address* Parent 2:

*Email address is required for access to our Learning Management System (Compass)

What is the highest year of primary or secondary school you have completed? If you did not attend school mark 'Year 9 or equivalent or below'.	What is the level of the highest qualification you have completed?
☐ Year 12 or equivalent. ☐ Year 11 or equivalent. ☐ Year 10 or equivalent. ☐ Year 9 or equivalent or below	☐ Bachelor degree or above ☐ Advanced Diploma or Diploma ☐ Certificate I to IV (indicating trade certificate) _____ ☐ Nil

Please select appropriate parental occupation group from the list provided on the table below.

☐ Group 1 ☐ Group 2 ☐ Group 3 ☐ Group 4 ☐ N/A

Please select appropriate parental occupation group from the list provided on the table below. If you are not currently in paid work but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 months, tick 'N/A'.

GROUP 1	**GROUP 2**	**GROUP 3**	**GROUP 4**
Senior management in large business organisation, government administration & defence, and qualified professionals	**Other business managers, arts/media/sportspersons and associate professionals**	**Tradesmen/women, clerks and skilled office, sales and service staff**	**Machine operators, hospitality staff, assistants, labourers and related workers**

EMERGENCY CONTACT

Third Contact Details *(People other than Parent/Guardian 1 & 2 for an Emergency)*

Title: ____ First Name: _____ Second Name: _____ Surname: _____

Please indicate relationship to the student: _____

Residential Address: _____

Telephone (Home): _____ Email Address: _____

Occupation/Workplace location: _____

Telephone (Work): _____ Mobile No: _____

Please advise the school if there are any other contacts you would like recorded:

_____

_____

FEES BILLING

School Fees & Charges

This is the person responsible for paying 100% of the student's Contributions & Charges, this is the person who will receive all correspondence regarding Contributions and Charges and statements.

Choose ONE person only: ☐ **Parent/Guardian/Carer 1** ☐ **Parent/Guardian/Carer 2**

Please complete the "Payment Plan Agreement" and return it together with this enrolment form.

CUSTODY / GUARDIANSHIP

Who does the student live with?	☐ Both Parents ☐ Parent 1 ☐ Parent 2 ☐ Neither If neither, who? _____
In shared custody arrangements show the percentage split as determined by Centrelink. (**This information must be included).**	Mother _____ % Father _____ % Other _____ %
ACCESS RESTRICTION - Is the student subject to any court orders in respect of their care, welfare and development? ..... ☐ YES ☐ NO If YES, please specify and attach supporting documentation	

LANGUAGE SELECTION

YEAR 7 AND 8 ONLY

At Margaret River Senior High School, we are fortunate to be able to offer three (3) language choices delivered by native speakers.

Students will study one language for two years in Years 7 and 8. In Years 9 to 12, Languages will be offered as an elective subject. The placement of students will be dependent on school resources both staffing and timetabling.

Languages offered are:

- *Asian Languages* – Chinese (Mandarin) and Indonesian – one semester each
- *European Languages* – French, and Spanish

Please number the boxes below 1, 2, 3 for your child's language preference - for Year 7 & 8:

If you do not have a preference, please leave the selections blank and tick the box titled "I have no preference".

Chinese (Mandarin) and Indonesian	
French	
Spanish	

I have no preference	☐

Language studied at Primary School _____ for _____ years.

Do you speak a Language other than English at home? If so what Language?

_____

Do you have a strong Language or cultural link with a particular Language group? ☐

Please provide some detail:

_____

_____

_____

**Please note if this form is not completed, students will be placed in a language based on availability.*

If you have any queries, please contact the Head of HASS & Languages or Operations Manager on 9757 0700.

IMMUNISATION STATUS

Please state your child's immunisation status:

Immunisation Complete Yes ☐ * No ☐

Not Immunised Yes ☐ No ☐

*If yes ACIR Immunisation history MUST be attached. Please request from 1800 653 809 or email acir@humanservices.gov.au

Additional Information: _____

MEDICAL DETAILS

Doctor / Practice Name: _____ Phone Number: _____

Dentist / Practice Name: _____ Phone Number: _____

Permission to call Doctor Yes ☐ No ☐

Permission to call Dentist Yes ☐ No ☐

Permission to administer First Aid Yes ☐ No ☐

Do you have ambulance insurance? Yes ☐ No ☐ Insurance Provider: _____

If there is a medical emergency, parents/guardians are expected to meet the cost of an ambulance.

Health Care Card	Yes ☐ No ☐ Card Number:_____ Expiry Date:_____
Medicare	Card Number:_____ Ref #_____ Expiry Date:_____

ADMINISTRATION OF MEDICATION

Written authorisation must be provided for staff to administer any form of medication.

INFORMED CONSENT

Your child's health care information will be shared with staff on a "need to know" basis unless otherwise stated.
Do you give permission for the school to share your child's health care information? Yes ☐ No ☐

Does your child have one or more health condition(s) that will **require support** from school staff?

No ☐ If your child's requirements change, please notify the school.

Yes ☐ please complete the Health Condition(s) Section of this form.

HEALTH CONDITION(S)

	Will school staff require specific training to support your child?	
☐ Severe Allergy/Anaphylaxis:_____	Yes ☐	No ☐
☐ Minor and Moderate Allergies: _____	Yes ☐	No ☐
☐ Diabetes	Yes ☐	No ☐
☐ Seizure Disorder	Yes ☐	No ☐
☐ Asthma	Yes ☐	No ☐
☐ Coeliac	Yes ☐	No ☐
☐ Wears Glasses	Yes ☐	No ☐
☐ Hearing Condition	Yes ☐	No ☐
☐ Diagnosed Migraine/Headaches	Yes ☐	No ☐
☐ Other conditions or needs (please specify): _____ _____	Yes ☐	No ☐

Has your child's Medical Practitioner provided a health care plan to assist the school to manage the condition? Yes ☐ No ☐

If yes, please advise the school.

If you have ticked "Yes" for specific staff training, please discuss the type of training needed with the school.

DIAGNOSED LEARNING DIFFICULTY / DISABILITY

Does the student have a **diagnosed learning difficulty?** Yes ☐ No ☐

If you have ticked any of the disabilities below, you **MUST provide supporting documents (at time of enrolment).**

- ☐ Physical Disability
- ☐ Intellectual Disability
- ☐ Vision Impairment
- ☐ ADD/ADHD, Requires Medication: Yes ☐ No ☐
- ☐ Autism Spectrum Disorder
- ☐ Dyslexia
- ☐ Dyspraxia
- ☐ Dysgraphia
- ☐ Dyscalculia
- ☐ Deaf and Hard of Hearing (e.g., otitis media)
- ☐ Specific Speech Language Impairment
- ☐ Global Developmental Delay (prior to age 6)
- ☐ Severe Mental Disorder
- ☐ Central Auditory Processing Disorder (CAPD)
- ☐ Diagnosed Anxiety Disorder
- ☐ Other: _____ _____

MEDICAL ALERT INFORMATION

Does your child have a Medic Alert bracelet or pendant? Yes ☐ No ☐

If yes, please provide details:_____

_____

STUDENT AGREEMENT

ONLINE SERVICES ACCEPTABLE USE AGREEMENT FOR HIGH SCHOOL STUDENTS (YEAR 7-12)

You must agree to the following rules when you use the Department provided online services:

- I will only use online services for purposes which support my learning and educational research.
- I understand that I am responsible for all activity in my online services account.
- I will check with the teacher before sharing images or giving information about myself or anyone else when using online services.
- I will keep my password private and not share with other students.
- I will not let other people logon and/or use my online account.
- I will tell the teacher if I think someone is using my online account.
- I understand the school and the Department of Education can monitor my use of online services.
- If I find any information that is inappropriate or makes me feel uncomfortable I will tell a teacher about it. Examples of inappropriate content include violent, racist, sexist, or pornographic material, or content that is offensive, intimidating or encourages dangerous or illegal activity.
- I will not use the Department's online services for personal gain or illegal activity (e.g. music file sharing), to bully, offend or intimidate others or access or send inappropriate materials including software that may damage computers, data or networks.
- I will acknowledge the creator or author of any material used in my research for school work by using appropriate referencing.
- I will get permission from the copyright owner of any material used in my school work before I reuse it in a portfolio for employment, in a competition or any other uses other than for my private research and study.
- I will use appropriate language in all internet communications.
- I will not try to access internet sites that have been blocked by the school or the Department of Education
- I will not use the internet to access violent or pornographic publishing or other sites deemed inappropriate by the school and Department of Education
- I will not access chat lines, conversation sites or other sites that link students to unauthorised individuals outside of the school community.
- I will not damage or disable the computers, computer systems or computer networks of the school, the Department of Education or any other organisation.

I understand that:

- I will be held responsible for my actions while using online services and for any breaches caused by allowing any other person to use my online services account;
- the misuse of online services may result in disciplinary action, determined by the principal in accordance with the Department's Behaviour Management in Schools policy; and
- I may be held liable for offences committed using online services.

MOBILE PHONE POLICY – ABRIDGED VERSION

- The use of mobile phones for all students is banned from the time they arrive at school to the conclusion of the school day. This includes before school and at break times (off and away all day). Students who bring their mobile phone to school are required to switch it off or to silent. Smart watches must be in 'aeroplane mode' so phone calls and messages cannot be sent or received during the school day. All communication between parents and students, during school hours, should occur via the school's administration or Student Services.
- Students seen wearing headphones or using mobile phones (or similar devices) before school, during class or during breaks will be asked to hand the headphones and mobile phone over to the staff member.
- Any student who refuses a teacher's request to hand over their phone (or other mobile device) will receive sanctions as outlined in the school's Behaviour Management policy. These sanctions may include suspension and the loss of their entitlement to bring a mobile device to school for a specified period of time.
- Multiple breaches of this policy will result in additional consequences such as detention, loss of the privileges associated with Good Standing and suspension.
- The full Mobile Phone Policy can be found at: School Policies - Margaret River Senior High School

STUDENT AGREEMENT CONTINUED

UNIFORM POLICY – ABRIDGED VERSION

At Margaret River Senior High School, our uniform reflects who we are as a community. It promotes a positive public image, creates a sense of belonging, and encourages students to feel proud of being part of our school.

Wearing a uniform helps students develop confidence in presenting themselves and supports their understanding of community, workplace and safety expectations as they move into adult life. Most importantly, it ensures that all students can participate in school feeling comfortable, included and ready to learn.

Students at MRSHS wear their uniform with pride. Consistent uniform expectations help maintain a safe environment by clearly identifying those who are part of our school community.

Our uniform has been developed in partnership with students, families and staff to ensure it is practical, affordable and contemporary. We regularly review uniform items to make sure they continue to meet the needs of our school.

This Uniform Policy has been endorsed by the MRSHS School Board and outlines the expectations for uniform wear for all students. By enrolling at MRSHS, parents and caregivers agree to support their child in wearing the approved school uniform.

The uniform must be **safe, practical and cost-effective**, appropriate for all learning environments.

- Students must wear the correct uniform **at school, on excursions, and while travelling to and from school**.
- Only approved MRSHS uniform items may be worn unless otherwise stated under transition arrangements.
- Uniform items must be worn as designed, and any alterations that change the intended fit, style, or appearance are not permitted.
- The uniform supports equity by reducing peer pressure around clothing choices.

Further information regarding our Uniform Policy and Uniform Supplier can be found at School Policies - Margaret River Senior High School

PLEASE READ CAREFULLY BEFORE SIGNING

MOBILE PHONE POLICY

I have read Margaret River Senior High Schools Mobile Phone Policy. I agree to abide by this policy..... ☐ Yes

..... ☐ No

UNIFORM

All students are expected to wear school uniform as part of the School's Dress Code as endorsed by the School Board.

I agree to meet this expectation..... ☐ Yes

..... ☐ No

ONLINE SERVICES & INTERNET

I have read the Online Services Acceptable Use Agreement. I agree to abide by this policy. ☐ Yes ☐ No

NAME AND SIGNATURE OF STUDENT AGREEING

NAME _____ **SIGNATURE** _____ **DATE** _____

BYOD MEMORANDUM OF UNDERSTANDING

This document contains information about student BYOD (Bring Your Own Device) devices and free resources available to the students at Margaret River Senior High School.

Our vision for Margaret River Senior High School is to use Information and Communication Technologies to enhance the school's teaching and learning environment.

Margaret River Senior High School staff and students have access to an array of resources including:

- School web-based emails
- **Compass Learning Management system**
- Free **Office 365** tools including online Word, PowerPoint, Excel, Sway and OneNote
- Free **online storage** Microsoft One Drive
- Links to study skills and ETV video software
- Learning area teaching portals including STILE & Mathspace
- Access Audio& Ebooks, Pressreader, Informit, SmartSuite & TV4 Education – Library resources

BYOD MEMORANDUM OF UNDERSTANDING

As a part of the student's enrolment students and parents have been asked to sign the following memorandum of understanding:

Before using your own device at school, the following procedures must be followed and adhered to:

- The device is only to be switched on for educational use. This will occur after asking permission from their teacher or requested by the teacher. The device must remain switched off at all other times.
- Devices are not to be used for messaging, social media, or phone calls.
- You must not film, record or take images or videos unless it is supervised by the class teacher and directly a part of the class program.
- No photos or videos are to be shared or uploaded to the internet or any social networking sites (eg TikTok, Facebook, SnapChat, Twitter, Instagram etc).
- Devices are not to be used out of class time (before school, recess, lunch) unless specifically requested by a teacher in order to do school work – this must be done in a supervised classroom.
- Student owned devices are not licensed to use school owned or purchased software other than the DoE Microsoft 365 suite.
- You must not access any other social media sites (Tiktok, Snapchat, Instagram, Facebook etc) or any site that is not directly part of the school educational program and has been directed by a teacher.

Misuse of Devices:

- If you misuse your device it will be confiscated and sent to Student Services.
- The device may be collected by the student from Student Services at the end of the day.
- Second offence, the device may only be retrieved by a parent or guardian.
- Breaches of this policy will be treated as any other breach of school rules.

Student Name: _____

Student Signature: _____ Date: _____

ONLINE THIRD PARTY SERVICES

At Margaret River SHS we provide access to high-quality online services that aim to enhance student learning opportunities. This is done through utilising a range of electronic and interactive teaching tools that are available either from the Department of Education WA, or from independent organisations.

Online third party services often require separate account creation and login credentials, and provide content, activities or transactions via the internet. The third-party services being used in our school are found at this link: http://margaretrivershs.wa.edu.au/download/19600/

BYOD & ONLINE THIRD PARTY SERVICES PARENT CONSENT AND AGREEMENT FORM

CONSENT FROM PARENT/GUARDIAN/CARER

At Margaret River Senior High School, we aim to offer your child the widest range of learning opportunities and celebrate learning whenever possible. This may often require some form of parental consent. This form asks you to consent (or otherwise) to your child's participation/use/access to several aspects of the school program. At all times we make the very best efforts to exercise exemplary standards in respect of duty of care.

More information can be obtained from our website: https://www.margaretrivershs.wa.edu.au/

BYOD MOU AND THIRD-PARTY SERVICES

I agree to the conditions of the Memorandum of Understanding for Student owned devices as outlined above:

☐ Yes, I agree. ☐ No, I do not agree.

ONLINE THIRD PARTY SERVICES – PARENT NOTIFICATION

I understand that I have been notified and provided access to the terms of use and privacy policy of each of the Online Third Party Services listed as *with Notification* in the link http://margaretrivershs.wa.edu.au/download/19600/ These services have been assessed by the Department and do not require consent. This notification risk status is based on the Department of Education (WA) security and privacy risk assessment which reviews consent and data information of the online service.

I understand that my child's personal information will be provided to these Online Third Party Services for registration and use of the services and that this information will be stored within Australia.

☐ Yes, I agree. ☐ No, I do not agree

ONLINE THIRD PARTY SERVICES – PARENT CONSENT AND AGREEMENT

I understand that I have been provided access to the terms of use and privacy policy of each of the Online Third Party Services listed as *with Consent* in the link http://margaretrivershs.wa.edu.au/download/19600/.

I understand that my child's personal information will be provided to these Online Third Party Services for registration and use and that this information may be stored outside of Australia.
I understand that if I do not consent to my child's personal information being provided to these Online Third Party Services, my child may receive an alternative education program that does not make use of the Online Third Party Services.

☐ Yes, I agree. ☐ No, I do not agree

PARENT CONSENT AND AGREEMENT FORM

PERMISSION TO PUBLISH STUDENTS' IMAGES AND WORK FOR SCHOOL PURPOSES

Students' images and/or their work are often published to recognise excellence or effort and may appear in newspapers, on our website, in newsletters and social media i.e. School Facebook page or on film/video. Their names may also be included but no contact details are provided. Work/images captured by the school will be kept for no longer than is necessary for the purposes outlined above and will be stored and disposed of securely.

☐ Yes, I give my consent for student details/photograph as described above.

☐ I DO NOT give permission for my child's images and or name to be published.

INTERNET ACCESS

Student access to the internet is provided in accordance with the School Policy (available from the school website). Student access is contingent on abiding by the users' Code of Conduct.

☐ Yes, my child has permission to access the internet in accordance with School Policy.

☐ No, I do not give consent.

VIEWING CONSENT

Students often watch videos / DVDs and television documentaries as part of their learning. Almost always these are 'G' rated and don't require consent. Very occasionally something with a 'PG' rating is appropriate for which we would request parental permission.

☐ Yes, I consent to my child viewing the above material.

☐ No, I do not give consent.

LOCAL EXCURSIONS

Students occasionally walk within the local area for minor excursions under the supervision of the teacher and attend activities in local parks, nature reserves, another school, city council, library, or shopping centre. On all occasions, parents will be notified of the local excursion.

☐ Yes, I consent to my child participating.

☐ No, I do not give consent.

Name of Person Giving Consent: _____

Signature: _____

Date: _____

PARENT / GUARDIAN DECLARATION

1. I declare that the information provided on this form is true. I understand that if false information is provided, the enrolment of my child at Margaret River Senior High School may be terminated.

2. I have informed the school of any disabilities, medical conditions or special educational needs of my child.

3. I will support the school's Behaviour Management, School Dress Code Policy, and Computer and Internet Policies.

4. My child is not currently under suspension at, nor excluded from, another school.

5. I understand that in the event of an emergency, or a practice evacuation, it may be necessary to move students outside the perimeter of the school, under the direct supervision of staff members.

6. I agree to provide a reason when my child is absent from school.

All information contained in this document is true and accurate.

Parent/Guardian Name: _____

Signature: _____

Date: _____

Alternatively, name of person enrolling student (if not parent or guardian)

Name: _____

Relationship to student: _____

Signature: _____

Date:

SUPPORTING DOCUMENT CHECKLIST

	Parent check	Office check
1. Proof of Parent/Guardian Residential Address	☐	☐
2. Copy of full Birth Certificate	☐	☐
3. Immunisation Record	☐	☐
4. School Fees – Payment Plan Agreement Form	☐	☐
5. Last High School Report	☐	☐
6. Court Order (if applicable)	☐	☐
7. Copy of Passport/Visa (if born overseas)	☐	☐
8. Language choice	☐	☐
9. Copy of Diagnosed Learning Difficulty Report Please include all relevant information relating to disability.	☐	☐

OFFICE USE ONLY

Enrolment Form Received By: _____ *Date:* _____

Entered on SIS By: _____ *Date:* _____

158 Bussell Highway, Margaret River WA 6285
Phone: (08) 9757 0700
Email: margaretriver.shs.enrolments@education.wa.edu.au
Website: www.margaretrivershs.wa.edu.au
ABN: 70 847 797 698