

Year of Entry: 2019 2020 2021

Student Information (one form per student: student info, development profile & medical info is all unique.)

Given Names: Age: Date of Birth: / /

Legal Surname: Sex: M F A copy of Birth Certificate must be supplied

Name known as (if different) eg. shortened first name:

Year Level Entering: Prep Yr 1 Yr 2 Yr 3 Yr 4 Yr 5 Yr 6
Yr 7 Yr 8 Yr 9 Yr 10 Yr 11 Yr 12

Residential Address: Suburb: Post Code:

(Please note: The College needs to disclose your residential address to the Dept. of Education, Science and Training and other government agencies for funding purposes)

Nationality

In which country was the student born? What is the Nationality of the student?

Is the student of Aboriginal or Torres Strait Islander (TSI) origin? Yes, Aboriginal Yes, TSI (if both, tick both boxes) No

Residency

What is the student's residency status? Australian Citizen: New Zealand Citizen: Other:

Permanent Resident: Temporary Visa holder: A copy of Residency or Visa must be supplied

If born overseas, on what date did the student arrive in Australia? / /

If the student is a Permanent Resident or Temporary Visa holder please provide the following information:

Visa type: Current Visa Sub-Class no: Visa expiry date: / /

Language

Does the student speak a language other than English at home? No Yes If yes, what language:

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

Previous School

Please provide details of the school where the student was previously enrolled: A copy of student's most current school report must be supplied.

Name of school last attended:

Location of school last attended:

Dates of attendance (for example June 2008 to August 2014): to

Has your child ever been expelled? Yes No Suspended? Yes No
 or refused admission to another school? Yes No If yes, what was the reason?

Are there any details which may have an influence on your child's education or which may be relevant to their enrolment at the College? If yes, please indicate the details briefly:

Does your child have any behavioural difficulties? Yes No If yes, please provide details:

Student's Development Profile

Has your child ever received Learning Support? Yes No If yes, year levels:

Does your child have learning difficulties? Yes No Has your child been diagnosed with Dyslexia? Yes No

Has your child been diagnosed with: ADD ADHD Other:

Is your child taking medication for this? Yes No Type and Dosage:

A limited number of vacancies exist in the Learning Enrichment Unit for students who have been diagnosed with an ascertainment. If you would like your child to be considered for enrolment, please submit specialist reports and ascertainment documents with this application.

Has your child been Ascertained/EAP? Yes No

If yes, please indicate level of ascertainment:

Level 4 Level 5 Level 6 If yes, please indicate category of ascertainment:

Condition (please tick)

Asperger's Syndrome	<input type="radio"/>	Intellectual Impairment	<input type="radio"/>	Speech-Language Impairment	<input type="radio"/>
Autistic Spectrum Disorder	<input type="radio"/>	Physical Impairment	<input type="radio"/>	Visual Impairment	<input type="radio"/>
Hearing Impairment	<input type="radio"/>	Social/Emotional Disorder	<input type="radio"/>		

Sibling Information

Please list other children in the family, their ages, the schools they currently attend (if applicable) and their present year level:

Name:	Date of Birth:	Present School:	Present Year Level:
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>

Christian Beliefs

Church Affiliation:

Father: Church now attended Regular Seldom Never

Mother: Church now attended Regular Seldom Never

Church activities: (if applicable)

Father:

Mother:

In light of the information contained in the Prospectus about the College Philosophy and Aims, please make a statement below about your family's commitment to the spiritual development of your student and your reasons for seeking enrolment at Kingsley College:

Christian References:

Name of Pastor/Minister 1 Telephone:

Name of Pastor/Minister 2 Telephone:

Legal Guardian

Who is the Legal Guardian of the child? Mother Father Both Other:

Are there any other circumstances about the student seeking to be enrolled that the College should know prior to enrolment?

Eg. Shared care arrangements, Living apart from parental supervision, Subject to court orders, Child in foster care etc. If Yes, please provide details:

A copy of all Court Orders or other legal issues pertaining to the child must be supplied to the College.

Father/Guardian Information

Full name of Father/Guardian:

Residential Address: Suburb: Post Code:

Mailing Address: Suburb: Post Code:

Home Phone: Silent Work Phone: Mobile:

Fax: Email:

Place of Employment: Occupation:

Marital Status: Married Single Separated Divorced De Facto Deceased

Widowed Living with child? Full Time Shared Care No Are you a past student of the College? Yes No

Mother/Guardian Information

Full name of Mother/Guardian:

Residential Address: Suburb: Post Code:

Mailing Address: Suburb: Post Code:

Home Phone: Silent Work Phone: Mobile:

Fax: Email:

Place of Employment: Occupation:

Marital Status: Married Single Separated Divorced De Facto Deceased

Widowed Living with child? Full Time Shared Care No Are you a past student of the College? Yes No

Step Parent/Guardian Information (if applicable)

Full name of Father/Guardian:

Residential Address: Suburb: Post Code:

Mailing Address: Suburb: Post Code:

Home Phone: Silent Work Phone: Mobile:

Fax: Email:

Place of Employment: Occupation:

Marital Status: Married Single Separated Divorced De Facto Deceased

Widowed Living with child? Full Time Shared Care No Are you a past student of the College? Yes No

Step Parent/Guardian Information (if applicable)

Full name of Father/Guardian:

Residential Address: Suburb: Post Code:

Mailing Address: Suburb: Post Code:

Home Phone: Silent Work Phone: Mobile:

Fax: Email:

Place of Employment: Occupation:

Marital Status: Married Single Separated Divorced De Facto Deceased

Widowed Living with child? Full Time Shared Care No Are you a past student of the College? Yes No

Administration of Medical Care

1. I hereby give permission for the provision of any necessary urgent medical treatment for my child/ren. Costs of this treatment will be paid by us the parents/guardians. Date: / /

Signature - Mother/Guardian: Father/Guardian:

2. The guidelines for the administration of medication to students are as follows:

A. The College First Aid Officer may only administer medication when the medication is in correct pharmaceutical packaging, is labeled by the pharmacist with the student's full and correct name and the dosage. Parents must write a note requesting the teacher to administer the medication, stating the times and dosage required. We will under no circumstances administer medication without the above and written instruction from the parent.

B. If a student is unwell and the parent/guardian or emergency contact cannot be reached, the student will be admitted to First Aid or alternatively remain in the classroom.

C. Please note that the College is unable to administer Panadol to students. In the event of a student experiencing a headache or other form of pain and being in need of pain relief, the College Office will phone you (the parent/guardian) or emergency contact with the option of collecting your child or bringing appropriate medication to the College to administer to the child yourself.

I have read and understand this information. Date: / /

Signature - Mother/Guardian: Father/Guardian:

Emergency Contacts Other than Parents (to be used when attempts to contact parents are unsuccessful)

If we cannot contact you in the event of an emergency, please provide contact details of at least two other contacts. Ideally, the contact person should be someone who lives in Rockhampton and who is able to act on your behalf in an emergency.

Please ensure that you have discussed with the people listed on this page their willingness to be emergency contacts.

1. Name: Relationship to child:

Home Phone: Work Phone: Mobile:

2. Name: Relationship to child:

Home Phone: Work Phone: Mobile:

3. Name: Relationship to child:

Home Phone: Work Phone: Mobile:

Student Medical Information

This information is needed in the case of emergency if your child needs transportation to hospital by ambulance.

Doctor's/Medical Centre/Hospital Name:

Doctor's/Medical Centre/Hospital Phone:

Doctor's/Medical Centre/Hospital Address:

In an emergency, which parent/guardian should be contacted first?

Parents must complete a Notification/Request to Administer Medication Form when providing medication for students.

Student Medical Details

Does your child suffer from any of the following? If yes, please give specific details.

Condition (Please tick any that apply)		Details (Warning signs/Symptoms/Severity/Occurrence/Treatment/Medications/Restrictions etc)
Acquired Brain Injury	<input type="radio"/>	
Anxiety	<input type="radio"/>	
Anaphylactic Reaction	<input type="radio"/>	
Asthma	<input type="radio"/>	
Blood Disorders	<input type="radio"/>	
Cardiac Condition	<input type="radio"/>	
Diabetes	<input type="radio"/>	
Eczema	<input type="radio"/>	
Epilepsy	<input type="radio"/>	
Hay Fever	<input type="radio"/>	
Headaches/Migraines	<input type="radio"/>	
Hearing/Sight Condition	<input type="radio"/>	
Muscular/Joint Problems	<input type="radio"/>	
Other (Please specify)	<input type="radio"/>	

If your child experiences Asthma (Moderate to Severe), Anaphylaxis, Diabetes (Type 1) or Epilepsy, Please provide a copy of their management plan or letter from a medical practitioner explaining what to do in case of emergency.

Has the student been admitted to hospital for Asthma? Yes No

Allergic Reaction Management Plan

Does your child have any allergies e.g. Latex (Band-aids), Nuts, Eggs, Animals, Dairy Products, Bee Stings etc.

Yes No If yes, type of allergy:

Signs and symptoms of reaction:

What medication is taken (if any) for the prevention of allergic reaction:

What treatment is followed if an allergic reaction occurs:

Has the student at any time in the past suffered from:

A Localised reaction (any rash/itching/swelling at the point of contact with allergen) Yes No

A Systematic reaction (any rash/itching/swelling away from the point of contact with allergen) Yes No

Has the student been admitted to hospital for an Allergic Reaction? Yes No

Does the student take adrenaline (Epi-Pen) when suffering from an allergic reaction? Yes No

If 'Yes' was the answer to any of the questions above, please provide a copy of the student's Allergy Management Plan and Emergency Routine which your Medical Practitioner has documented.

How did you hear about Kingsley College? (Please tick as many as apply to you)

- Word of Mouth:
- Existing Family
 - Staff Member
 - Friend
 - Pastor
 - Past Parent/Student
 - Church

Who? (We would like to acknowledge Word of Mouth recommendations)

- Advertising:
- Website
 - Radio
 - Television
 - Billboard
 - Letter Box Drop
 - Open Day

Other:

What influenced you to enrol at Kingsley College? (Please tick as many as apply to you)

- | | | | | | |
|------------------------|-----------------------|----------------------------|-----------------------|-----------------------------------|-----------------------|
| Academic Excellence | <input type="radio"/> | College's Reputation | <input type="radio"/> | Co-Curricular Activities | <input type="radio"/> |
| Christian Values | <input type="radio"/> | Pre-Prep to Year 12 School | <input type="radio"/> | Unhappy with current school | <input type="radio"/> |
| Discipline | <input type="radio"/> | Past Parent/Student | <input type="radio"/> | Looking for Independent Education | <input type="radio"/> |
| Locality | <input type="radio"/> | College Tour | <input type="radio"/> | Distance Ed | <input type="radio"/> |
| Recommended by: Pastor | <input type="radio"/> | Staff Member | <input type="radio"/> | Existing Parent | <input type="radio"/> |

Other:

Parent Checklist

- Pastoral Reference
- Copy of Birth Certificate Attached
- Latest two years of school reports attached
- Latest NAPLAN report attached
- Any visa and passport details attached
- Any current Family Law orders or plans attached
- Any Specialist reports attached
- Any Verifications and Individual Education Plan attached

Enrolment Process

1. Parents have a meeting with the Principal.
2. Parents complete an enrolment application for each child in the family that they wish to enrol, ensuring all policies on the form have been read and signed.
3. Parents submit enrolment application with application fee and all supporting documents. This includes Birth Certificate, Visa details, current Student Report from previous school, copies of any Remedial Reports or Assessments, Court Orders, and enrolment application fee. Please note that until all documents are received we cannot proceed with the enrolment application.
4. The Principal will notify parents by phone of the outcome of their enrolment application.
5. For a successful enrolment, an enrolment contract and direct debit forms are provided for parents to sign.
6. Parents shall be provided with a copy of the relevant booklist, and contact arranged with the Uniform Coordinator so that correct uniforms may be ordered.
7. Once the student has received the full and correct uniform they will be able to commence at Kingsley College.

Publicity

Periodically the College will take photographs and/or videos as a pictorial record of the educational programs and of student's participation in them. This includes but is not limited to – the College Newsletter, Media Presentations, Television Advertisements, College Website, Social Media and professional class photographs.

I hereby give permission for my child to be included in all College publicity. Yes No Date: / /

Signature - Mother/Guardian: Father/Guardian:

Billing Responsibility

Please give details of the person responsible for billing. Please note that any changes to the persons responsible for paying College charges must be in writing from both parties.

Name: Phone:

Billing Address:

Name: Phone:

Billing Address:

Enrolment Application Fee

Please accept my payment of \$175.00 A registration fee of \$175 per family is to accompany an application. Subsequent enrolments do not incur a fee. Lodgement of this application and payment of the registration fee does not ensure enrolment.

Paid by cheque or Money Order (may payable to Kingsley College)

Or

Paid by Direct Deposit (please use your family name as identification)

Our Bank Details

Bank Name:

Account:

Or

Please charge my Credit Card

Name on Card:

Type of Card: Visa Mastercard Expiry Date: / /

Card Number:

Signature:

Information Required by the Federal Government

The following information is required by the Federal Government for assessment and reporting purposes.

Mother/Guardian Name: Father/Guardian Name:

In which Country was the:

Mother/Guardian born: Father/Guardian born:

What is the Nationality of the:

Mother/Guardian: Father/Guardian:

Do the parents/Guardians speak a language other than English at Home?

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

	Student	Mother/Guardian	Father/Guardian
No, English only	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes, Afrikaans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes, Cantonese	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes, Creole	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes, Maori	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes, Pidgin English	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes, French	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Yes, other - please Specify:	<input type="text"/>		

What is the highest year of school the parents/guardians have completed?

(For persons who have never attended school, mark Year 9 or equivalent or below)

	Mother/Guardian	Father/Guardian
Year 12 or equivalent	<input type="radio"/>	<input type="radio"/>
Year 11 or equivalent	<input type="radio"/>	<input type="radio"/>
Year 10 or equivalent	<input type="radio"/>	<input type="radio"/>
Year 9 or equivalent (or below)	<input type="radio"/>	<input type="radio"/>

What is the level of the highest qualification the parents/guardians have completed?

(Mark one box only in each column)

	Mother/Guardian	Father/Guardian
Bachelor degree or above	<input type="radio"/>	<input type="radio"/>
Advanced Diploma/Diploma	<input type="radio"/>	<input type="radio"/>
Certificate I to IV (including trade certificate)	<input type="radio"/>	<input type="radio"/>
No non-school qualification	<input type="radio"/>	<input type="radio"/>

Occupation Groups are listed over the page.

What is the occupation group of Mother/Guardian:

What is the occupation group of Father/Guardian:

Please return in person or email completed form to mail@kingsley.qld.edu.au

Parent Occupation Groups

Please Note: If the person has not been in paid work in the last 12 months, please write a number '8' in the box.

If the person is not currently in paid work but had a job or retired in the last 12 months, please use the person's last occupation.

<p>Group 4 Machine Operators, Hospitality Staff, Assistants, Labourers and Related Workers</p>	<ul style="list-style-type: none"> • Drivers, Mobile Plant, Production Processing Machinery and other Machinery Operators • Hospitality Staff (Hotel Service Supervisor, Receptionist, Waiter, Bar Attendant, Kitchen Hand, Porter, Housekeeper) • Office Assistants, Sales Assistants and other Assistants • Office (Typist, Word Processing/Data Entry/Business Machine Operator, Receptionist, Office Assistant) • Sales (Sales Assistant, Motor Vehicle/Caravan/Parts Salesperson, Checkout Operator, Cashier, Bus/Train Conductor, Ticket Seller, Service Station Attendant, Car Rental Desk Staff, Street Vendor, Telemarketer, Shelf Stacker) 	<ul style="list-style-type: none"> • Assistant/Aide (Trades' Assistant, School/Teacher's Aide, Dental Assistant, Veterinary Nurse, Nursing Assistant, Museum/Gallery Attendant, Usher, Home Helper, Salon Assistant, Animal Attendant) • Labourers and Related Workers • Defence Forces (ranks below Senior Non – Commissioned Officer not included below) • Agriculture, Horticulture, Forestry, Fishing, Mining Worker (Farm Overseer, Shearer, Wool/Hide Classer, Farm Hand, Horse Trainer, Nurseryman, Greenkeeper, Gardener, Tree Surgeon, Forestry/Logging Worker, Miner, Seafarer/Fishing Hand) • Other Worker (Labourer, Factory Hand, Storeman, Guard, Cleaner, Caretaker, Laundry Worker, Trolley Collector, Car Park Attendant, Crossing Supervisor)
<p>Group 3 Tradesmen & Women, Clerks & Skilled Office Staff, Sales and Service Staff</p>	<ul style="list-style-type: none"> • Tradesmen/Women (generally have completed a 4 year Trade Certificate, usually by Apprenticeship. All Tradesmen/Women are included in this group) • Clerks (Bookkeeper, Bank/PO Clerk, Statistical/Actuarial Clerk, Betting Clerk, Stores/Inventory Clerk, Purchasing/Order Clerk, Freight/Transport/Shipping Clerk, Bond Clerk, Customs Agent, Customer Services Clerk, Admissions Clerk) • Skilled Office, Sales and Service Staff 	<ul style="list-style-type: none"> • Office (Secretary, Personal Assistant, Desktop Publishing Operator, Switchboard Operator) • Sales (Company Sale Representative, Auctioneer, Insurance Agent/Assessor/ Loss Adjuster, Market Researcher) • Service (Aged/Disabled/Refuge/Child Care Worker, Nanny, Meter Reader, Parking Inspector, Postal Worker, Courier, Travel Agent, Tour Guide, Flight Attendant, Fitness Instructor, Casino Dealer/Supervisor)
<p>Group 2 Other Business Managers, Arts/Media/ Sportspersons and Associate Professionals</p>	<ul style="list-style-type: none"> • Owner/Manager (of Farm, Construction, Import/Export, Wholesale, Manufacturing, Transport, Real Estate Business) • Specialist Manager (Finance/Engineering/Production/Personnel/ Industrial Relations/Sales/Marketing) • Financial Services Manager (Bank Branch Manager, Finance/Investment/Insurance Broker, Credit/Loans Officer) • Retail Sales/Services Manager (Shop, Petrol Station, Restaurant, Club, Hotel/Motel, Cinema, Theatre, Agency) • Associate Professionals (generally have Diploma/Technical Qualifications and Support Managers and Professionals) 	<ul style="list-style-type: none"> • Arts/Media/Sports (Musician, Actor, Dancer, Painter, Potter, Sculptor, Journalist, Author, Media Presenter, Photographer, Designer, Illustrator, Proof Reader, Sportsman/Woman, Coach Trainer, Sports Official) • Health, Education, Law, Social Welfare, Engineering, Science, Computing Technician/ Associate Professional • Business/Administration (Recruitment/ Employment/Industrial Relations/Training Officer, Marketing/Advertising Specialist, Market Research Analyst, Technical Sales Representative, Retail Buyer, Office/Project Manager) • Defence Forces (Senior Non-Commissioned Officer)
<p>Group 1 Senior Management in Large Business Organisation, Government Administration & Defence and Qualified Professionals</p>	<ul style="list-style-type: none"> • Senior Executive/Manager/Department Head (in Industry, Commerce, Media or other Large Organisations) • Public Service Manager (Section Head or Above, Regional Director, Health/Education/Police/Fire Services Administrator) • Other Administrator (School Principal, Faculty Head/Dean, Library/Museum/Gallery Director, Research Facility Director) • Defence Forces (Commissioned Officer) 	<ul style="list-style-type: none"> • Professionals (generally have Degree or Higher Qualifications and experience in applying this knowledge to Design, Develop or Operate Complex Systems; Identify, Treat & Advise on Problems; and Teach Others) • Health, Education, Law, Social Welfare, Engineering, Science, Computing Professional • Business (Management Consultant, Business Analyst, Accountant, Auditor, Policy Analyst, Actuary, Valuer) • Air/Sea Transport (Aircraft, Ship's Captain, Officer, Pilot, Flight Officer, Flying Instructor, Air Traffic Controller)

Standard Collection Notice

1. The School collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil's enrolment at the School. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the School to provide schooling to the pupil and to enable them to take part in all the activities of the School.
2. Some of the information we collect is to satisfy the School's legal obligations, particularly to enable the School to discharge its duty of care.
3. Laws governing or relating to the operation of a school require certain information to be collected and disclosed. These include relevant Education Acts, and Public Health and Child Protection laws.
4. Health information about pupils is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. We may ask you to provide medical reports about pupils from time to time.
5. The School from time to time discloses personal and sensitive information to others for administrative and educational purposes, including to facilitate the transfer of a pupil to another school. This includes to other schools, government departments, medical practitioners, and people providing services to the School, including specialist visiting teachers, [sports] coaches, volunteers and counsellors.
6. Personal information collected from pupils is regularly disclosed to their parents or guardians.
7. The School may store personal information in the 'cloud' which may mean that it resides on servers which are situated outside Australia.*
8. The School's Privacy Policy sets out how parents or pupils may seek access to personal information collected about them. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the School's duty of care to the pupil, or where pupils have provided information in confidence.
9. The School Privacy Policy also sets out how you may complain about a breach of privacy and how the School will deal with such a complaint.
10. As you may know the School from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. [It may also be disclosed to organisations that assist in the School's fundraising activities solely for that purpose.]* We will not disclose your personal information to third parties for their own marketing purposes without your consent.
11. On occasions information such as academic and sporting achievements, pupil activities and similar news is published in School newsletters and magazines [and on our website]. Photographs of pupil activities such as sporting events, school camps and school excursions may be taken for publication in School newsletters and magazines [and on our website]. The School will obtain separate permissions from the pupils' parent or guardian prior to publication. [12. We may include pupils' and pupils' parents' contact details in a class list and School directory.
12. If you provide the School with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the School and why, that they can access that information if they wish and that the School does not usually disclose this information to third parties.