WESTERN AUSTRALIAN GOVERNMENT SCHOOL

OFFICE USE ONLY
Date received: _____

Application accepted ☐ not accepted ☐

Commence date: _____Room: _____Faction: _____

KINDERGARTEN 20___

APPLICATION FOR ENROLMENT (PART A)

1. PERSONAL DETAILS (PLEASE PRINT ALL DETAILS BELOW)			
Child's surname	Given names	Date of birth	Sex (M/F/X)
Surname of parent/guardian	Given names	Mr/Mrs/Ms	
Residential Address (must be completed)		Postcode	
Nearest intersecting street			
Postal Address (if different from residential address)		Postcode	
Email Address			
Telephone – Home	Work (if convenient)	Mobile Phone No	

Are there any Family Court Orders regarding the day to day or long-term care, welfare and development of the child? Please indicate (√) YES ☐ NO ☐

If applicable, year level child currently enrolled in (e.g. Year 4)

If applicable, name of school at which the child is currently or was last enrolled:

Are there any siblings currently attending this school? Please indicate (√) YES ☐ NO ☐
Names and year levels:

Is your child currently under suspension or has ever been excluded from a school?
Please indicate (√) YES ☐ NO ☐ N/A ☐
If yes, name of school:

2. PERMANENT RESIDENT OF AUSTRALIA? Please indicate (√) YES ☐ NO ☐

If no, please indicate date entered Australia:_____Visa subclass number:_____

3. Has your child been assessed by: Speech Therapist ☐ Occupational Therapist ☐ Physiotherapist ☐ Psychologist ☐ Child Psychiatrist ☐ Paediatrician ☐ When was their last appointment: _____

When was the last assessment: _____

4. DISABILITY/MEDICAL CONDITION?
This information will assist the school principal with considering whether any specific or additional resources are required and available to assist the school with providing the best educational program for your child. Please indicate (√)

Physical	Intellectual	Other	Medical Condition
YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

Please outline nature of disability/medical condition: _____

I declare that the information provided on this form is true.

Signature of parent/guardian: _____ Date: _____

Birth certificates, visas and immunisation details will be requested at the time of formal enrolment.