

Student Enrolment Information Update

Fountain Gate Secondary College



STUDENT DETAILS

Surname:	
First Given Name:	
Second Given Name: <i>(if applicable)</i>	
Preferred First Name: <i>(if applicable)</i>	
❖ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____	
Date of Birth: <i>(dd-mm-yyyy)</i> ___ / ___ / _____	Student Mobile Number: <i>(if applicable)</i>

PARENT/CARER DETAILS

Enrolling Adult 1

Title
First Given Name
Surname
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____
❖ Does Adult 1 speak a language other than English at home?
<input type="checkbox"/> No, English only
<input type="checkbox"/> Yes (please specify): _____
Please indicate any additional languages spoken by Adult 1:
Is an interpreter required?
<input type="checkbox"/> Yes <input type="checkbox"/> No
❖ What is the highest year of primary or secondary school that Adult 1 has completed?
<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent
<input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below / no schooling
❖ What is the level of the highest qualification that Adult 1 has completed?
<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma / Diploma
<input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualification
Adult 1 Occupation:
Adult 1 Employer:

◆What is the occupation group of Adult 1? (see attached form page 5)
Please select the appropriate current parental occupation group from the attached list at the end of the document.

- If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached list.
- If the person has not been in paid work for the last 12 months, enter 'N'.

Enrolling Adult 2

Title	
First Given Name	
Surname	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described: _____
◆ Does Adult 2 speak a language other than English at home?	
<input type="checkbox"/> No, English only <input type="checkbox"/> Yes (please specify): _____	
Please indicate any additional languages spoken by Adult 2:	
Is an interpreter required?	<input type="checkbox"/> Yes <input type="checkbox"/> No

◆What is the highest year of primary or secondary school that Adult 2 has completed?

Year 12 or equivalent Year 11 or equivalent
 Year 10 or equivalent Year 9 or equivalent or below / no schooling

◆What is the level of the highest qualification that Adult 2 has completed?

Bachelor degree or above Advanced diploma / Diploma
 Certificate I to IV (including trade certificate) No non-school qualification

Adult 2 Occupation:

Adult 2 Employer:

◆What is the occupation group of Adult 2?
Please select the appropriate current parental occupation group from the attached list at the end of the document.

- If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached list.
- If the person has not been in paid work for the last 12 months, enter 'N'.

STUDENT DEMOGRAPHICS

❖ In which country was the student born?	
<input type="checkbox"/> Australia	<input type="checkbox"/> Other (please specify): _____
If born overseas, on what date did the student arrive in Australia? (dd-mm-yyyy) _____ / _____ / _____	
What is the student's residency status? *	
<input type="checkbox"/> Australian citizen – holds Australian Passport	<input type="checkbox"/> Permanent Resident (provide visa details below)
<input type="checkbox"/> Australian citizen – eligible for Australian Passport	<input type="checkbox"/> Temporary Resident (provide visa details below)
<input type="checkbox"/> New Zealand citizen	
Visa Sub Class: _____	Visa Expiry Date: (dd-mm-yyyy) _____ / _____ / _____
Visa Statistical Code: (Required for some sub-classes) _____	
Does the student speak English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
❖ Does the student speak a language other than English at home?	
<input type="checkbox"/> No, English only	
<input type="checkbox"/> Yes (please specify the main language spoken at home): _____	
❖ Is the student of Aboriginal or Torres Strait Islander origin?	
<input type="checkbox"/> No	<input type="checkbox"/> Yes, Aboriginal
<input type="checkbox"/> Yes, Torres Strait Islander	<input type="checkbox"/> Yes, Both Aboriginal & Torres Strait Islander
Is the student a young carer (providing support/care for other family member/s)? * <input type="checkbox"/> Yes <input type="checkbox"/> No	

ADDITIONAL LEARNING AND SUPPORT NEEDS

The Department of Education recognises that adjustments may be required for students with additional needs, including students with disability, so that they can participate at school. School personnel and parents or carers work together to identify the adjustments that may be needed to meet the student's learning and support needs.

Does the student have additional needs and require support for learning?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Does the student have additional needs in any of the following areas?	Hearing:	<input type="checkbox"/> Yes (please specify): _____
	Vision:	<input type="checkbox"/> Yes (please specify): _____
	Speech/Language:	<input type="checkbox"/> Yes (please specify): _____
	Physical:	<input type="checkbox"/> Yes (please specify): _____
	Cognitive/Learning:	<input type="checkbox"/> Yes (please specify): _____
	Social/Emotional:	<input type="checkbox"/> Yes (please specify): _____

Has the student had a disability assessment before?	<input type="checkbox"/> No
	<input type="checkbox"/> Yes (specify outcome): _____
Has the student received individualised disability funding before?	<input type="checkbox"/> No
	<input type="checkbox"/> Yes (please specify): _____

ATTACHMENT 1 – PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. Please indicate your current occupation – not your qualification. This information is used for determining funding allocations to schools.

Group A: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation
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

Professionals - generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat, and 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)

Group B: Other business managers, arts/media/sportspersons and associate professionals

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)

Arts / Media / Sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proofreader, sportsman/woman, coach, trainer, sports official)

Associate Professionals - generally have diploma / technical qualifications and support managers and professionals:

- 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

Group C: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a 4-year Trade Certificate, usually by apprenticeship. All tradespeople are included in this group

Clerks (bookkeeper, bank / PO clerk, statistical / actuarial clerk, accounting / claims / audit clerk, payroll clerk, recording / registry / filing 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:

- Office (secretary, personal assistant, desktop publishing operator, switchboard operator)
- Sales (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)
- Service (aged / disabled / refuge / childcare worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

Group D: Machine operators, hospitality staff, assistants, labourers and related workers

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)
- 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 NCO not included above
- 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)



MEDIA CONSENT FORM

Please complete all the boxes below by circling the appropriate answer, signing where indicated and return to Fountain Gate Secondary College with your enrolment form.

Fountain Gate Secondary College may use my child's work, voice or photograph for educational and/or publicity purposes. <i>See additional enrolment information booklet</i>		
I consent to the use of images of my child within the physical school environment (e.g.) in displays, and on noticeboards.	YES	NO
I consent to the use of images of my child within the school community (e.g.) in classroom blogs and apps only accessible by students, parents/carers and/or school staff with passwords, such as Compass.	YES	NO
I consent to the use of images of my child beyond the school community (e.g.) publicly available, such as on the school website, newsletter, promotional material, and social media accounts.	YES	NO

DECLARATION

Thank you for updating above Student Enrolment data.

I/We confirm that:

- **I am/We are the person/people named as completing this form.**
- **The information in this form is true and correct.**
- **I/We agree to authorise this form by electronic means with an electronic signature.**

Name of Parent/Carer: _____ Date: ____ / ____ / ____

Signature : _____