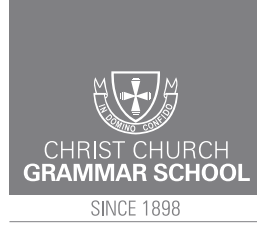


APPLICATION FOR ENROLMENT



Student Information

Last name: _____

Given name(s): _____

Sex: _____ Date of birth: _____

Religious denomination: _____

Country of birth: _____

Is your child:

An Australian citizen? Yes No

A Permanent Resident of Australia? Yes No

A Temporary Resident of Australia? Yes No

Passport number: _____

Visa number: (If applicable)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

What languages are spoken at home? _____

Preferred date of entry: _____

Preferred year level of entry: _____

Are you aware of any special needs your child may have?

Yes No

English as a second language _____

Support programs in literacy _____

Support programs in numeracy _____

Individual integration support _____

Present school (if applicable): _____

Current year level: _____

Names of siblings who have previously attended
Christ Church Grammar School: _____

Names of siblings who are currently attending
Christ Church Grammar School: _____

Names of siblings enrolled as future students of
Christ Church Grammar School: _____

Did a parent or relative attend
Christ Church Grammar School? Yes No

If Yes, name: _____

Years of attendance: _____ to _____

(Previous name, if female) _____

Family Information

Parent or Guardian 1:

(Title/given name(s)/last name) _____

Home address: _____

Postcode: _____

Phone: _____

Mobile: _____

Email: _____

Occupation: _____

Employer: _____

Type of industry: _____

Business address: _____

Postcode: _____

Parent or Guardian 2:

(Title/given name(s)/last name) _____

Home address: _____

Postcode: _____

Phone: _____

Mobile: _____

Email: _____

Occupation: _____

Employer: _____

Type of industry: _____

Business address: _____

Postcode: _____

If the child does not reside with both parents, indicate which home address is applicable:

Parent/Guardian 1 **Parent/Guardian 2**

Mailing details for Accounts:

Name: _____

Address: _____

Postcode: _____

Legal requirements

Are there court orders relating to the powers and responsibilities of the parents in relation to your child or access to your child?

Yes No

If Yes, please bring the original court order/s to the office for the staff to sight and copy and attach to this document.

Additional required government assessment and reporting information

Please indicate if a language, other than English, is spoken at home.

Student: _____

Parent/Guardian 1 _____

Parent/Guardian 2 _____

What is the highest year of primary or secondary school the Parents/Guardians have completed.

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

Parent/Guardian 1 _____

Parent/Guardian 2 _____

What is the highest qualification the Parents/Guardians have completed.

Parent/Guardian 1 _____

Parent/Guardian 2 _____

I/We understand that I/we must comply with any rules and regulations as Christ Church Grammar School may impose from time to time.

I/We understand that payment of the Application Fee of \$100 is not a guarantee that my/our child will secure enrolment at Christ Church Grammar School. The Application Fee is non-refundable.

I/We acknowledge my/our joint and several responsibility for the payment by the due date of all school fees and other moneys owing to the school in respect of the child enrolled and that if I/we do not pay the fees to the school by the specified date, penalty fees will be charged on overdue monies.

If my/our child is transferring from another school or kindergarten, I/we authorise you to obtain from that organisation any credit or other information that you may require.

I/We understand and acknowledge that I/we must give one full term's notice in writing to the Principal before the withdrawal of my/our child from the school (this includes a child who has been accepted to commence at a future date) and that failure to give such notice means that I/we must pay a full term's fees in lieu to the school. I/We acknowledge that the school will strictly adhere to its policy of charging a term's fees in lieu if the correct notice period is not given to the Principal.

I/We consent to our personal details being given published on school lists distributed throughout the school

I/We consent to Christ Church Grammar School using images by publishing them as part of a book, poster, brochure, leaflet, report or advertisement and including them online or any other media.

I/We agree that Christ Church Grammar School and its agents may edit the image prior to publication as they consider appropriate without first consulting me.

Signatures of both parents are required unless one parent is sole custodian (proof required).

Parent/Guardian 1: _____

Date: _____

Parent/Guardian 2: _____

Date: _____

Please return:

1. Completed *Application for Enrolment form*
2. Application Fee of \$100
3. Birth certificate or Passport
4. Previous school reports (if applicable)

Post to Registrar
Christ Church Grammar School
PO Box 392
South Yarra VIC 3141
or email to: registrar@ccgs.vic.edu.au

Could you please complete the following by ticking the appropriate boxes:

What prompted you to enrol your child at Christ Church Grammar School?

- 1. Reputation of the school
- 2. Coeducational
- 3. Continuing the family tradition
- 4. Academic excellence
- 5. Entry open to all, regardless of ability or background
- 6. Catering for special needs
- 7. Other, please specify: _____

How did you learn about Christ Church Grammar School?

- 1. Family/friends
- 2. Christ Church South Yarra parishioner
- 3. Other Christ Church Grammar School parents
- 4. Advertisements
- 5. Other, please specify: _____

VICTORIAN STUDENT NUMBER (VSN)

- Child not previously at school in Victoria
- VSN provided - -
- VSN allocated but not known

APPLICATION FEE PAYMENT OPTIONS

The Application Fee can be paid by credit card or cheque or cash (in person).

- **Cheque**
Made payable to Christ Church Grammar School
- **Credit Card**
Complete the details below. Card details will be destroyed following processing of the transaction.

Please charge my:

Mastercard Visa Amex

Debit my credit card with \$ _____ (\$100 per child)

Name on card (Please print) _____

_____ Date _____

Signature of cardholder _____

Card Number

--	--	--	--

Expiry date _____

FOR OFFICE USE ONLY

Instrument _____

Brand _____

Serial number _____

Date issued to student _____

Date returned _____

Barcode _____