



St Paul's Catholic Primary School Application for Enrolment Kindergarten to Year Six

St Paul's Primary School is a Catholic co-educational school catering for students from Pre-Kindergarten to Year 6. The school provides a strong foundation for children's spiritual, intellectual, social, moral, physical and aesthetic development by providing a supportive and nurturing environment which contributes to each student's sense of self-worth, enthusiasm and optimism for future learning and discovery.

Year of entry:

To commence in: (please select)

STUDENT INFORMATION

Surname:		
Given name/s:		Preferred name:
☐ Male		☐ Female
Address:		
Suburb:	State:	Postcode:
Date of birth:		Place of birth:
Country of birth:		
Citizenship status: (please select)		Visa code (if applicable):
Nationality:		Language spoken at home:

RELIGION

Religion:	
Parish name:	Parish location:
Date of Baptism:	Name of Church:
Date of Reconciliation:	Name of Church:
Date of First Eucharist:	Name of Church:
Date of Confirmation:	Name of Church:

FAMILY INFORMATION

PARENT or GUARDIAN 1			PARENT or GUARDIAN 2		
Title:	Surname:		Title:	Surname:	
Given name/s:			Given name/s:		
Address:			Address:		
Suburb:	State:	Postcode:	Suburb:	State:	Postcode:
Home telephone:			Home telephone:		
Business telephone:			Business telephone:		
Mobile phone:			Mobile phone:		
Email:			Email:		
Religion:			Religion:		
Parish:			Parish:		
Nationality:			Nationality:		
Country of birth:			Country of birth:		
Language spoken at home:			Language spoken at home:		
Occupation:			Occupation:		
Student living with parent/guardian: (please select)			Student living with parent/guardian: (please select)		

CUSTODY/GUARDIANSHIP

Person/s with legal guardianship of the student:

If applicable, please attach a copy of any Parenting or Court Orders	☐ Yes	☐ No
Any other conditions enforced by law?		

BILLING DETAILS			
Person/s responsible for settlement of school fees:			
Billing address (if different from above):			
(Please note, it is a school policy that, should a child be absent for an extended period, payment of school fees is still required)			
IN THE CASE OF SPLIT BILLING, PLEASE INDICATE THE PERCENTAGE FOR ACCOUNT ALLOCATION:			
Parent/Guardian 1:	%	Parent/Guardian 2:	%

PREVIOUS SCHOOL ATTENDED

SIBLINGS			
Name:	DOB:	Year:	School:
Name:	DOB:	Year:	School:
Name:	DOB:	Year:	School:
Name:	DOB:	Year:	School:
EMERGENCY CONTACT DETAILS (OTHER THAN PARENT/GUARDIAN)			
CONTACT 1		CONTACT 2	
Name:		Name:	
Relationship to student:		Relationship to student:	
Address:		Address:	
Suburb:	State:	Postcode:	Suburb:
			State:
			Postcode:
Home telephone:		Home telephone:	
Business telephone:		Business telephone:	
Mobile:		Mobile:	

AGREEMENT

I/We understand and accept that the completion of this application for enrolment does not guarantee an enrolment interview. Successful applicants will be determined in accordance with the school's enrolment criteria.

I/We understand and accept that attendance at an interview does not guarantee an enrolment offer being made.

I/We understand that enrolment of a student in one Catholic school does not guarantee the enrolment of that student in any other Catholic school.

I/We have completed this application form fully and to the best of my/our knowledge. Further, I/we acknowledge and accept that if it can be demonstrated that I/we have withheld information relevant to the application/enrolment process then the enrolment may be refused or terminated on this ground.

I/We have read and fully understand and agree that enrolment in a Catholic school means that we and our child will participate fully in all required aspects of the educational program of the school, including the Religious Education program of the school.

I/We declare that I/we have provided a copy of any Parenting or Court Orders that apply to the prospective student.

I/We declare that I/we have provided the necessary documentation that the school may request to confirm the student's Australian residency status.

I/We consent to my/our child travelling under the supervision of the school by its staff upon such transport where travel is necessary in connection with the school's activities.

I/We have read and fully understand and agree to the terms and conditions set out in the school's fee collection procedure.

I/We agree to abide by the Code of Conduct, policies and directions of St Paul's Primary School and Catholic Education Western Australia as are enacted from time to time.

I/We understand a full term's notice (in writing) must be given before removal of a student, or a full term's fees are payable.

I/We have received a Privacy Collection Notice.

Signature of Parent/Guardian:

Date:

Signature of Parent/Guardian:

Date:

THIS FORM IS TO BE ACCOMPANIED BY COPIES OF:

Copies of relevant sacrament certificates:

☐

Baptism Certificate

☐

Reconciliation Certificate

☐

Birth Certificate

☐

Parish Priest Reference

☐

Immunisation History Statement

☐

Application Fee

☐

First Eucharist Certificate

☐

Confirmation Certificate

☐

Latest School Report (if applicable)

☐

Latest NAPLAN Report (if applicable)

☐

Visa (if applicable)