

ST CECILIA'S PRIMARY SCHOOL  
PORT HEDLAND

STUDENT ENROLMENT POLICY



*St Cecilia's Primary School  
Vision Statement*

*St Cecilia's Catholic Primary School is a multi-cultural Catholic School where staff, parents and students strive to provide a secure environment concerned with the spiritual, moral, social, emotional and intellectual development of each person. We endeavour to create an atmosphere of openness, mutual respect and loyalty within the school community.*

Written 2011  
Reviewed 2013  
Review in 2016

## **RATIONALE**

St Cecilia's Catholic Primary School exists to further the mission of the Church. In Western Australia, the Mandate of the Bishops requires the Catholic Education Commission of Western Australia to make Catholic school education available to all Catholic children, as far as resources allow (Mandate page 50).

## **PRINCIPLES**

1. St Cecilia's exists to provide a distinctly Catholic education for students enrolled.
2. St Cecilia's recognises the uniqueness of each student.
3. St Cecilia's has a preferential option for the poor and marginalised.
4. St Cecilia's fulfils its mission in partnership with parents who are the first educators of their children.
5. St Cecilia's has a responsibility to fulfil the requirements of relevant Federal, State and Local Government laws and regulations.
6. St Cecilia's shall accept all application forms for enrolment.
7. The acceptance of an application form does not guarantee an enrolment interview or subsequent offer of enrolment.
8. Enrolment in St Cecilia's is dependent on the availability of appropriate accommodation and compliance with legislative requirements.
9. Enrolment in St Cecilia's does not guarantee enrolment in any other Catholic school.
10. The Principal is responsible for developing St Cecilia's enrolment policy.

## **PROCEDURES**

The enrolment policy shall provide for the following enrolment priority for all students:

- Catholic students from the parish with a Parish Priest reference
- Catholic students from outside the parish with a Parish Priest reference
- other Catholic students
- siblings of non-Catholic students
- non-Catholic students from other Christian denominations
- other non-Catholic students

Aboriginal students shall be given enrolment preference wherever possible and practicable.

The Principal may vary the above priorities to suit particular local circumstances prevailing at the time after prior consultation with the Director of Catholic Education and written confirmation of the outcome.

Enrolments must comply with Government entry age requirements.

The enrolment policy shall address the following:

- procedure for application
- interview process
- school enrolment criteria
- reference to the school's schedule of fees and payment policy
- timeline for processing (in general terms)
- enrolment of overseas students
- what constitutes a breach of enrolment
- parental obligations
- other points particular to the local situation

Before an offer of a place is made, prospective students and their parent(s) or guardian(s) shall be interviewed by the Principal or a member of the School Leadership Team.

The Catholic/Non-Catholic Enrolment Percentage Parameters approved by the Bishop of the diocese shall be referred to when enrolling students. Non-Catholic Aboriginal students shall not be included in the percentage calculations.

Enrolment may take place at any year level K–7 and, K – 6 from 2015.

Application for Enrolment forms for St Cecilia's are designed to suit its particular requirements and incorporates the following compulsory elements:

- an acknowledgement that completing an Application for Enrolment form and its acceptance by St Cecilia's does not guarantee an enrolment interview nor a place at the school
- an acknowledgement that enrolment in St Cecilia's is not a guarantee of enrolment in any other Catholic school
- a statement that if a parent(s) or guardian(s) has knowingly withheld material information relevant to the application/enrolment process then the Principal reserves the right to refuse or terminate enrolment on that ground
- a declaration signed by all custodial parent(s) or guardian(s) that to the best of their knowledge they have:
  - a) disclosed any special educational needs of the prospective student
  - b) disclosed any particular medical, social and/or emotional conditions as well as health care requirements of the prospective student
  - c) provided a copy of any Parenting or Restraint Order that applies to the prospective student
  - d) provided the necessary visa documentation relating to an overseas student enrolment

- e) fully understood and agree they accept that their child will participate in all required parts of the education program of the school including the Religious Education program
- f) fully understood and agree to the terms and conditions set out in the school fee collection policy (refer to CECWA Policy statement 2-C12 'School Fees: Setting and Collection')
- g) fully and truthfully completed the Application for Enrolment form

At St Cecilia's we adhere to the CECWA's policy statements regarding the management, storage, transfer and disclosure of confidential information.

- The following entry priority shall be consulted for the program (provided the school is not operating the program under the Child Care Act 2007 with the associated Child Care Benefit):
  - a) Catholic students from the parish
  - b) Catholic students from outside the parish
  - c) siblings of non-Catholic students
  - d) non-Catholic students from other Christian denominations
  - e) other non-Catholic students
- Aboriginal students shall be given enrolment preference wherever possible and practicable.
  - \*The term Aboriginal includes Torres Strait Islander peoples.

**COMPULSORY ELEMENTS OF AN APPLICATION FOR ENROLMENT FORM**

**School**

**STUDENT INFORMATION**

Student Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Birth Certificate Attached: Yes/No

Aboriginal/Torres Strait Islander: Yes/No

If yes to Aboriginal/Torres Strait Islander, then Group of Origin : \_\_\_\_\_

Nationality: \_\_\_\_\_ Australian Permanent Resident: Yes/No

If born outside of Australia:

Date of arrival in Australia: \_\_\_\_\_ Visa Category Number: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Language Spoken at Home: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_ Parish Priest: \_\_\_\_\_

Parish: \_\_\_\_\_ Suburb: \_\_\_\_\_

Date of Reception of Sacraments: \_\_\_\_\_ Baptism Certificate Attached Yes/No

Baptism \_\_\_\_\_ Reconciliation \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation \_\_\_\_\_

Present School : \_\_\_\_\_ Location: \_\_\_\_\_ Year level: \_\_\_\_\_

**FAMILY INFORMATION**

**FEMALE PARENT OR GUARDIAN**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_ Parish Priest: \_\_\_\_\_

Parish: \_\_\_\_\_ Suburb: \_\_\_\_\_

Occupation: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Email Address: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

**MALE PARENT OR GUARDIAN**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_ Parish Priest: \_\_\_\_\_

Parish: \_\_\_\_\_ Suburb: \_\_\_\_\_

Occupation: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Email Address: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

**CUSTODY/GUARDIANSHIP**

Name of person(s) with legal guardianship of the student: \_\_\_\_\_

If applicable a copy of any Parenting or Restraint Order is attached. Yes/No

Any other conditions enforced at law? \_\_\_\_\_

**SIBLINGS CURRENTLY ATTENDING SCHOOL**

| Name  | Year Level | Name  | Year Level |
|-------|------------|-------|------------|
| _____ | _____      | _____ | _____      |
| _____ | _____      | _____ | _____      |

**SIBLINGS CURRENTLY ATTENDING OTHER SCHOOLS**

| Name  | Year Level | School |
|-------|------------|--------|
| _____ | _____      | _____  |
| _____ | _____      | _____  |
| _____ | _____      | _____  |

**STUDENT'S INDIVIDUAL NEEDS**

The School Education Act 1999 requires the provision of:

“details of any condition of the enrollee that may call for special steps to be taken for the benefit or protection of the enrollee or other persons in the school” (16G).

To assist the school to respond to individual requirements please detail any special needs your child has in the following area(s) that may affect his/her learning, participation or welfare during school hours.

Medical/Health Care \_\_\_\_\_

\_\_\_\_\_

Medication \_\_\_\_\_

\_\_\_\_\_

Physical \_\_\_\_\_

Orthoses/Prostheses \_\_\_\_\_

\_\_\_\_\_

Psychological/Cognitive \_\_\_\_\_

Sensory (eg Vision/Hearing) \_\_\_\_\_

\_\_\_\_\_

Behavioural or Safety \_\_\_\_\_

\_\_\_\_\_

Communication \_\_\_\_\_

\_\_\_\_\_

Allergies \_\_\_\_\_

\_\_\_\_\_

If medication or medical/health care services are required during school hours please provide full details, name, contact number and signed authorisation by the relevant practitioner.

\_\_\_\_\_

\_\_\_\_\_

**EXTERNAL SERVICE PROVISION**

Does your child receive any services from an external agency which may effect educational arrangements?  
Yes/No

If so please detail name of Service Provider and Contact No. \_\_\_\_\_

\_\_\_\_\_

Does your child require special transport arrangements to and from school? Yes/No

Does your child receive Respite Care on a regular basis? Yes/No

**EMERGENCY CONTACT DETAILS (OTHER THAN A PARENT/GUARDIAN)**

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

**MEDICAL INFORMATION** (Applicable to an imminent enrolment commencement)

**IMMUNISATION RECORD**

|                                      |  |                                      |  |
|--------------------------------------|--|--------------------------------------|--|
| F- fully immunised                   | N - not immunised                                      | I - incomplete immunisation          | P- personal objections   |
| Measles <input type="checkbox"/>     | Mumps <input type="checkbox"/>                         | Rubella <input type="checkbox"/>     | Diphtheria <input type="checkbox"/> Tetanus <input type="checkbox"/> |
| Hepatitis B <input type="checkbox"/> | Pertussis <input type="checkbox"/><br>(Whooping Cough) | Polio (OPV) <input type="checkbox"/> | Immunisation Record Attached <input type="checkbox"/>                |

Family Doctor/Medical Clinic: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Dentist/Dental Clinic: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Medicare Number: \_\_\_\_\_ Private Health Fund: \_\_\_\_\_ Blood Group: \_\_\_\_\_

(If known)

**MEDICAL EMERGENCY AUTHORISATION**

*I authorise the school/college to seek medical/dental attention, call an ambulance or to hospitalise my son/daughter when considered necessary. If an emergency occurs requiring surgery, anaesthetic, oxygen, blood transfusion, medication and I/we are unable to be contacted within a reasonable time, I/we authorise the school/college to agree to medically recommended treatment by an accredited medical practitioner on my/our behalf.*

Signature of Parent(s)/Guardian(s): \_\_\_\_\_ Date: \_\_\_\_\_

FEMALE PARENT OR GUARDIAN

\_\_\_\_\_ Date: \_\_\_\_\_

MALE PARENT OR GUARDIAN

**DISCLOSURE**

Do you agree that the information supplied in the *Student Information* and *Family Information* sections, can be provided to the relevant Parish Priest?

Yes/No

**AGREEMENT**

I/we understand and accept that the completion of this application/enrolment form 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, especially in relation to this student's individual needs, medical conditions, health care requirements and/or Parenting Orders, 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 have read and fully understand and agree to the terms and conditions set out in the school fee collection policy.

I/we agree to abide by the policies and directions of the school and the Catholic Education Commission of Western Australia as they are enacted from time to time.

Signature of Parent(s)/Guardian(s): \_\_\_\_\_ Date: \_\_\_\_\_  
FEMALE PARENT OR GUARDIAN

\_\_\_\_\_  
MALE PARENT OR GUARDIAN Date: \_\_\_\_\_

***A copy of your child's Birth Certificate, Baptism Certificate, Immunisation Record, Passport, Visa and Custodial Court Orders are to accompany the Application for Enrolment form. Originals of these documents should be presented at the enrolment interview.***