ENROLLING YOUR CHILD AT YANCHEP DISTRICT HIGH SCHOOL

In accordance with the Education Act (1999) Division S.19, Section 20 (1), the Principal of a school may cancel the enrolment of a student at the school if the Principal is satisfied that the enrolment was obtained by the giving of false or misleading information, or if notification has not been given in relation to the change of residence. This applies in instances both prior to, and after the student has commenced at the school.

LOCAL INTAKE AREA - YANCHEP DISTRICT HIGH SCHOOL (Government Gazette January 2014) BOUNDARY

The following defines the local-intake area for students in the primary school year levels of Yanchep District High School:
From a point on the coastline located south west from the junction of Yanchep Beach Road and Two Rocks Road, north east from this point to the junction of Yanchep Beach Road and Two Rocks Road, east along Yanchep Beach Road (south side included) to the western boundary of Yanchep National Park, north and west along this boundary to the locality boundary between Two Rocks and Yanchep, north, east and north along the locality boundary of Two Rocks and Yanchep to the local government boundary between City of Wanneroo and Shire of Gingin, east, south and east along this boundary to the local government boundary between City of Wanneroo and Shire of Chittering, south along this local government boundary to the locality boundary between Yanchep and Pinjar, west and south along this locality boundary to Old Yanchep Road, north west along Old Yanchep Road (north side included) to a point on the eastern extension of Doogarch Road, west along this extension and west along Doogarch Road (north side included) to Bernard Road South, south south west from this junction to a point on Wanneroo Road on the eastern extension of the locality boundary between Alkimos and Eglinton, west along this extension and this locality boundary to the coastline, and generally north west along the coastline to the point on the coastline located south west from the junction of Yanchep Beach Road and Two Rocks Road.

The following will define the local-intake area for students in the secondary school year levels of Yanchep District High School from 2015:
From the point where the locality boundary between Alkimos and Eglinton intersects the Indian Ocean coastline, generally north along the coastline to the local government boundary between City of Wanneroo and Shire of Gingin, east, south and east along this boundary to the local government boundary between the City of Wanneroo and the Shire of Chittering, south along this local government boundary to the locality boundary between Yanchep and Pinjar, west and south along this locality boundary to Old Yanchep Road, north west along Old Yanchep Road (north side included) to a point on the eastern extension of Doogarch Road, west along this extension and west along Doogarch Road (north side included) to Bernard Road South, south south west from this junction to a point on Wanneroo Road on the eastern extension of the locality boundary between Alkimos and Eglinton, west along this extension and this locality boundary to the coastline.

Leaving the local intake area
Should you move out of our local intake area at any stage you are required to inform our school within four weeks. Failure to inform the school can jeopardize the enrolment.

Enrolments from tenancy agreements
Enrolments based on tenancy agreements are monitored by our Administration team. It is the responsibility of the enrolling parent/carer to inform the school of any renewed or altered tenancy agreement within and no later than four weeks. If this does not occur the enrolment can be considered fraudulent.

Fraudulent enrolment
Should an Application for Enrolment contain misleading or false information the enrolment can be cancelled. Yanchep District High School and the North Metropolitan Education Office will work with the family to transfer enrolment to the designated local school.

I acknowledge that I have read and understood the above information regarding enrolling my child at Yanchep District High School

Name: ________________________________ (Please print full name)

Signature: __________________________________________ Parent/Carer  Date: __________________
APPLICATION FOR ENROLMENT FORM
(For enrolment in a Western Australian Public School)

Students in the compulsory years of schooling who are already enrolled at the school do not need to lodge a new application for that school each year.

DECLARATION

The information and statements provided in this application for enrolment are true and accurate in relation to:

Name of child: ___________________________________________________________
Name of person enrolling child: _____________________________________________
Title: ____________________ 1st Name: ____________________ 2nd Name: ____________ Surname: ______________________
Relationship to child: ___________________________________________________________

(Independent Minors and those aged 18 years or older may apply on their own behalf)

Tel (H): ______________  Tel (W): ______________  Mobile: ____________________
Signature: ________________________ Date: _____/____/________

NOTE: Children may be enrolled in Kindergarten in one school only, either public or private.
NOTE: In the event that statements made in this application later prove to be false or misleading, a decision on this application may be reversed. Information supplied may need to be checked by the school.

DOCUMENTS TO BE PROVIDED

Checklist:
Please place an "X" in the box □ to indicate each document attached (or sighted) to this application form.

1. Birth Certificate (original or certified copy) or extract or other identity documents ............................................... □
   if applicable. (Principals will refer to guidance 3.5.1 of the Enrolment Procedures where evidence is not provided).

2. "Immunisation Certificate" ........................................................................................................................................... □

3. Copies of Family Court or any other court orders (if applicable) ................................................................................ □

4. 2 x current Proof of Address documents (no more than one month old) ie Utilities, Phone, an original lease signed and dated, we do not accept Water or Land Rates .................................................................................................................. □

5. Information relating to suspensions or exclusions ........................................................................................................ □

6. Information relating to disability/medical condition .................................................................................................... □

If your child was not born in Australia, you must provide evidence of:

1. Date of entry into Australia ............................................................................................................................................... □

2. Passport or travel documents ........................................................................................................................................... □

3. Current visa subclass and previous visa subclass (if applicable) ................................................................................... □

If your child is a temporary visa holder, you must also provide:

 Confirmation of enrolment or evidence of any permission to transfer ................................................................................ □
 provided by Education and Training International (ETI) email: study.eti@dtwd.wa.gov.au
(if holding an International full fee student visa, sub class 571);

 or

 Evidence of the visa for which the student has applied if the student holds .......................................................... □
a bridging visa
| Personal Details (Please Print All Details Below) |
|-------------------------------------------------
| **Child’s surname** |
| **Legal (if different):** |
| **Given names:** | **Date of birth:** | **Sex (M / F):** |
| **Surname of parent/responsible person:** |
| **Given names:** | **Mr / Mrs / Ms / Other:** |
| **Residential Address (must be completed):** |
| **Postcode:** |
| **Nearest intersecting street:** |
| **Postal Address (if different from residential address):** |
| **Postcode:** |
| **Telephone (Home):** | **Mobile Phone No:** |
| **Work (if convenient):** | **Email:** |
| Are there any Family Court Orders regarding the day to day or long term care, welfare and development of the child? | YES | NO |
| Is the child subject to access restriction? If yes, please specify and attach supporting documentation. | YES | NO |
| **Year Level: ___________** |
| **Start date: Beginning of school year 20_______:** | YES | NO |
| If applicable, year level child currently enrolled in (e.g. Year 7): |
| If applicable, name of school at which the child is currently or was last enrolled: |
| Are you applying to enrol in a specialist program at this school? | YES | NO |
| Name of specialist program: |
| Will there be any brothers or sisters attending this school? | YES | NO |
| Name/s and year levels: |
| Is your child currently under suspension from a school? | YES | NO |
| If YES, name of school: |
| Has your child ever been excluded from a school? | YES | NO |
| If YES, name of school: |
| Is your child a permanent resident of Australia? | YES | NO |
| If NO, please indicate date entered Australia: _____________ Visa Sub Class No.: __________ |
| Does your child have a 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 whether: | | |
| Physical | Intellectual | Other medical condition/s |
| Please outline nature of disability/medical condition/s (or attach details). |
| Application for Enrolment approved: ________________ (signature of Principal) __/___/_____ (date) |
# ENROLMENT FORM

YANCHEP DISTRICT HIGH SCHOOL  
15 Primary Road  
Yanchep WA 6035  
Telephone: (08) 9561 1155  
Facsimile: (08) 9561 1554

<table>
<thead>
<tr>
<th>OFFICE USE ONLY</th>
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</table>
| Enrolment Interview conducted: YES [ ] NO [ ]  
Deputy: __________________ Date: ___________  
Entry Date: ___/___/___  
Date Transfer Note Sent: ___/___/___  
Previous School: __________________ Records Received: YES [ ] NO [ ]  
Contributions and Charges / Billing: PG1 [%] PG2 [%] Other [%]  
Academic Year: ___________ Form: ________ Faction: ___________  
Entered on SIS/Integris – ADMISSIONS / CURRENT ROLL – by: __________________ Date: ___/___/___  
Leave Date: ___/___/___  
Destination: __________________ Records Sent: YES [ ] NO [ ]  
Moved to FORMER ROLL (Integris) by: __________________ Date: ___/___/___ |
YANCHEP DISTRICT HIGH SCHOOL

STUDENT DETAILS

* Surname: ________________________________             * Legal Surname: _________________________
* 1st Name: ________________________________                2nd Name:  ____________________________
Preferred Name:   _______________________________          Academic Year Level:  ______________________
Student Email Address: ______________________________________________________________________________________________
* Date of Birth:   _____/_____/____ Gender:   Male   Female
* Residential Address: ____________________________________________________________ Postcode:   __________________
* Student Home Phone:  _________________________          * Student Mobile:  __________________________
Proof of Residency provided (to be completed by school) YES [ ] NO [ ]
Out of school intake area: YES [ ] NO [ ]
* Citizenship:  Australian □
* Permanent Resident: YES [ ] NO [ ] * Temporary Resident: YES [ ] NO [ ]
Visa Sub Class Number _________________ Visa Sub Class Number _________________
Visa Expiry Date _________________ Visa Expiry Date _________________
Date Entered Australia _________________ Date Entered Australia _________________
* Is this student in the care of the Department for Community Development’s (DCD) Chief Executive Officer?  YES [ ] NO [ ]
If YES, please specify the name of the DCD Case Manager, their DCD District and their contact phone number.

STUDENTS RIGHTS AND RESPONSIBILITIES:
I have read and agree to comply with all aspects of the Good Standing Policy, Assessment Policy, Code of Dress Policy, Academic Standards Policy, Internet and Information Technology User Policy.
Yes [ ] No [ ]
I am aware of my child’s rights and responsibilities related to the Good Standing Policy, Assessment Policy, Code of Dress Policy and Internet and Information Technology User Policy. I also understand the consequences that will be applied should my child fail to honour those Codes and Policies.
Yes [ ] No [ ]

PUBLICITY:
I give my permission for my child’s photo to be used for:
• Educational purposes – internal (eg. Library card, class projects).
• Other purposes – external (eg. Publicity-television, newspaper, webpage Facebook etc).
(If you don’t want your child’s photo used for publicity purposes, you must confirm this in writing to the School).

UNIFORM:
I am aware of and agree to abide by the School Dress Code.

SMARTRIDER AUTHORITY:  (please circle)  I do / do not give permission for Yanchep DHS to release my child’s details to Public Transport Authority for the purpose of issuing a Student SmartRider Card.

STUDENT SIGNATURE: ______________________________________
PARENT/GUARDIAN SIGNATURE: ____________________________ Date: __________/________/__________
Copy of visa must be included
EMERGENCY CONTACTS

Indicate, by placing a number in the box, the order in which the following people should be contacted in an emergency. Telephone number must be specified for the preferred emergency contact.

Parent/responsible Person 1 □ Parent/responsible Person 2 □ Other Contacts □

PARENT / GUARDIAN / CARER 1 – Details (this should be the most available SMS contact)

Title: _______ * First Name: ___________________________ * Surname: ___________________________

Please indicate relationship to the student: _____________________________________________________________

* Postal Address (if different from student residential address):

______________________________________________________________________________________________

[ ] *Parent 1 Telephone [ ] *Parent 1 Work Telephone [ ] *Parent 1 Mobile

Parent Email Address: _______________________________________________________ Occupation/Workplace: __________________________

PARENT / GUARDIAN / CARER 2 – Details

Title: _______ * First Name: ___________________________ * Surname: ___________________________

Please indicate relationship to the student: _____________________________________________________________

* Postal Address (if different from student residential address):

______________________________________________________________________________________________

[ ] * Parent 2 Telephone [ ] * Parent 2 Work Telephone [ ] * Parent 2 Mobile

Email Address: _______________________________________________________ Occupation/Workplace: __________________________

OTHER CONTACT / EMERGENCY Details

Title: _______ * First Name: ___________________________ * Surname: ___________________________

Please indicate relationship to the student: _____________________________________________________________

* Postal Address (if different from student residential address):

______________________________________________________________________________________________

[ ] * Emergency Contact Telephone [ ] * Emerg. Contact Work Telephone [ ] *Emergency Contact Mobile

Emergency Contact Email Address: _______________________________________________________ Occupation/Workplace: __________________________

STUDENT DETAILS – ADDITIONAL INFORMATION

BIRTH CERTIFICATE SEEN

(OR passport or Travel documents)

YES [ ] NO [ ] Date sighted: _____/_____/____

Previous School: ____________________________________________________________ OR

* If previously enrolled in Home Education, specify the Education District: __________________________

* If previously enrolled at Yanchep District High School – date left: __________________________

Movement Reason (if applicable): ____________________________________________________________

S:\Admin\Shared\Administration Staff\100 Administration\web info\2015\2016 enrolment Form Updated 4.11.15.docx
STUDENT DETAILS – MEDICAL / HEALTH

Does the student have a medical condition or intensive health care need?   YES [ ]   NO [ ]

If YES, please specify:

- Allergy – Anaphylaxis
- Allergy – Other _______________________________
- Asthma
- Diabetes
- Diagnosed migraine/headaches
- Seizure Disorder (eg epilepsy)
- Hearing condition (eg otitis media)
- Mental health or behavioural (eg depression, ADD/ADHD)
- Intensive Health Care Need (eg tube feeding)
- Other _____________________________________

If the student has a medical condition or intensive health care need you will also need to complete a separate Health Care Authorisation.

## IMMUNISATION DETAILS PROVIDED:

- YES [ ]   NO [ ]   Date sighted: _____/_____/

Medical Practice (Name and Address): _______________________________________________________________________________

Doctor’s Name: _____________________________________________________ Phone: ___________________________________

Medicare Number:__________________________________  Expiry Date:________________________

Health Card: YES [ ]           NO [ ]  Health Care Card No: ____________________________   Expiry Date:______________________

Please provide details of any other information you would like noted.

DISABILITY DETAILS

Does the student have a disability? Yes [ ] No [ ]

If YES, please specify Disability: ___________________________________________________________________________________________

- Autism Spectrum Disorder
- Deaf or Hard of Hearing
- Specific Speech Language Impairment
- Intellectual Disability
- Severe Mental Disorder
- Global Developmental Delay (prior to age 6)
- Vision Impairment
- Physical Disability

*Please indicate if you have documentation about your child’s disability in any of the following areas. Copies of this documentation will be required for school records.

Do you have ambulance cover?            YES [ ]       NO [ ]     Name of Provider: __________________________________

(If there is a medical emergency, parents or guardians are expected to meet the cost of the ambulance)

Permission to call Doctor YES [ ] NO [ ]  Permission to call Dentist YES [ ] NO [ ]

Permission to administer First Aid YES [ ] NO [ ]

In Receipt of Allowance: Secondary Assistance ☐  Youth Allowance ☐

Assistance for Isolated Children (AIC) ☐  Abstudy ☐

SIGNATURE:

I declare these particulars to be true and correct in every respect including the student’s full name as stated on the Birth Certificate / Extract.

PARENT / GUARDIAN SIGNATURE: ___________________________  Date: _____/_____/

NAME OF PERSON ENROLLING STUDENT: ___________________________  Relationship: ______________
PARENTS – PLEASE COMPLETE THIS AS ACCURATELY AS POSSIBLE – OUR SCHOOL FUNDING DEPENDS ON THE DATA ENTERED – THANK YOU.

PARENT / GUARDIAN / CARER 1 – Details

What is the highest year of primary or secondary school you have completed?  
Year 12 or equivalent ☐  Year 11 or equivalent ☐  Year 10 or equivalent ☐  Year 9 or equivalent or below ☐

What is the level of the highest qualification you have completed?  
Bachelor degree or above ☐  Advanced diploma/Diploma ☐  Certificate I to IV (including trade certificate) ☐  No non-school qualification ☐

(If you did not attend school, mark ‘Year 9 or equivalent or below’)

What is your occupation group? ☐ (Write 1, 2, 3, 4 or 8)  
Please select the appropriate parental occupation group from the list provided over the page. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 months, enter ‘8’ above.

PARENT / GUARDIAN / CARER 2 – Details

What is the highest year of primary or secondary school you have completed?  
Year 12 or equivalent ☐  Year 11 or equivalent ☐  Year 10 or equivalent ☐  Year 9 or equivalent or below ☐

What is the level of the highest qualification you have completed?  
Bachelor degree or above ☐  Advanced diploma/Diploma ☐  Certificate I to IV (including trade certificate) ☐  No non-school qualification ☐

(If you did not attend school, mark ‘Year 9 or equivalent or below’)

What is your occupation group? ☐ (Write 1, 2, 3, 4 or 8)  
Please select the appropriate parental occupation group from the list provided over the page. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 months, enter ‘8’ above.

The above information is a requirement of the Education Department (please turn over)
Parent / Guardian / Carer Occupation Groups

(Relates to questions in Parent / Guardian / Carer 1 and Parent / Guardian / Carer 2 sections)

<table>
<thead>
<tr>
<th>GROUP 1</th>
<th>GROUP 2</th>
<th>GROUP 3</th>
<th>GROUP 4</th>
</tr>
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<tbody>
<tr>
<td>Senior management in large business organisation government administration &amp; defence, and qualified professionals</td>
<td>Other business managers, arts/media/sportspersons and associate professionals</td>
<td>Tradesmen/women, clerks and skilled office, sales and service staff</td>
<td>Machine operators, hospitality staff, assistants, labourers and related workers</td>
</tr>
<tr>
<td>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</td>
<td>Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business. Specialist manager [finance/engineering/productive personnel/industrial relations/ sales/marketing]</td>
<td>Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women 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]</td>
<td>Drivers, mobile plant, production/processing machinery and other machinery operators Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]</td>
</tr>
<tr>
<td>Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]</td>
<td>Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]</td>
<td>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/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]</td>
<td>Office assistants, sales assistants and other assistants Office [typist, word processing/data entry/business machine operator, receptionist, office assistant]</td>
</tr>
<tr>
<td>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/ships captain/officer/pilot, flight officer, flying instructor, air traffic controller]</td>
<td>Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/ woman, coach, trainer, sports official]</td>
<td>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.</td>
<td>Assistant/aide [trades’ assistant, school/teacher’s aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>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/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]</td>
<td>Labourers and related workers Defence Forces ranks below senior NCO not included in other groups Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farmhand, 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]</td>
</tr>
</tbody>
</table>

These categories have been determined nationally and are designed as broad occupational groupings. All Australian states and territories use the same categories.