APPLICATION FOR ENROLMENT INTERNATIONAL STUDENTS



To complete your child's Application for Enrolment please:

- 1. Complete the form below; and
- 2. Pay the non-refundable registration fee of \$50 (bank details: BSB 306 089 Account number: 1721 518 or via credit card by calling our Reception on 9303 3840); and
- 3. Return the completed form **AND** copies of these documents to our Admissions Registrar at enrolments@sag.wa.edu.au
- Photo page of current Passport
- Most recent school reports the last 2 years (if possible)
- English Language test report
- Copy of Immigration Visa Grant Notice
- Supplementary Form for Students with Special Needs (if applicable)

Section 1 STUDENT INF Proposed St. Andrew's Gramm			f Entry (Year 1 to Year 12) for 20 starting in Term
Surname:			First Name:
Second Name:			
Preferred Name:			Sex: M / F / X Date of Birth: / /
Country of Birth:			Ethnicity:
Language(s) spoken:			
Religion:			
Has an Education Agent assis	ted you	with thi	is application? YES NO
If YES, provide the name of th	e agent:		
Section 2 VISA STATUS Passport number:		_ Expir	y date:
Country of Issue:			Date of Entry into Australia:
Current Visa Type and Number	er:		
Student Visa (subclass 500)	YES	NO	
Visitor Visa (subclass 600)	YES	NO	
Bridging Visa	YES	NO	If Yes – what type of visa have you applied for?

Section 3 ACCOMMODATION AND WELFARE ARRANGEMENTS

the duration of their enrolment at St Andrew's Grammar, please go to Section 4. (This person will need to be approved by the Department of Home Affairs #1 see notes in Appendix 1) 1. If the student's parent or legal custodian or a relative is NOT accompanying them to Perth, does the student have an eligible relative #2 in Perth whom the parent/legal custodian has nominated to take on the role of guardian? YES NO If **YES**, please provide details of the guardian^{#3}: Name: Address in Perth: _____ Relationship to student: _____ If NO, please contact our Education Agent Jing Wei. 2. Will the student live with this approved guardian? YES__ (go to next Section 4) NO__ If NO, will the student live with another eligible relative or close family friend, approved by the parent/legal custodian, during their enrolment at St Andrew's Grammar? YES___NO__ If YES, please provide details of the person the student will live with#3: Name: Address in Perth: Relationship to student:_____ Relationship to nominated guardian:_____ If **NO**, please contact your Education Agent. **Section 4** STUDENT MEDICAL INFORMATION Please detail any medical conditions your child has, including whether each condition is considered mild, moderate, or severe. Please note we may require more detailed information during the enrolment process. Please tick and provide information for all that apply below: Medical Action Plan: \square Yes \square No To be provided to the school annually: \square Yes \square No Anaphylactic reactions: _____ ☐ Yes ☐ No

EpiPen Required: \square Yes \square No To be provided to the school annually: \square Yes \square No

If the student's parent or legal custodian or a relative is accompanying them to Perth and staying with them for

Allergies:		□ Yes □ No
Intolerance to food:		□ Yes □ No
Asthma: \(\sum \) Ye	es No Diabetes:	☐ Yes ☐ No
Epilepsy: Ye	s 🗆 No Phobias:	☐ Yes ☐ No
Please be aware that we have a Nut Exclus allergies to these products, we do not allow foods to school. For example, foods such as	v them on campus. Please ensure your chil	dren do not bring these
STUDENTS WITH SPECIAL NEEDS		
In order to best assist your child's education needs your child has that may affect their ecompleted if you have ticked Yes on any of School upon request. Failure to disclose this having to cancel the enrolment at any time.	ducation. The Supplementary Enrolment Fo the boxes below. This form is available from information may negate this application or	rm will also need to be our website or from the
Psychological ☐ Yes ☐ No	Physical □ Yes □ No	
Behavioural/Safety ☐ Yes ☐ No	Communication ☐ Yes ☐ No	
Mobility ☐ Yes ☐ No	Sensory (e.g. Vision/Hearing) ☐ Yes ☐ No	
Cognitive Yes No	Other (please state) Yes N	
(Gifted & Talented or Learning Difficulties)		

PARENT DETAILS

Only complete both sections if both parents/guardians are able to sign this application form

PARENT 1 Relationship to student:	Relationship to Parent 2:
Mr/Mrs/Ms/Miss/Dr Other:	
Surname:	First Name:
Preferred name:	
Religion:	Country of Birth:
Nationality:	Australian Citizen: Yes No
Visa Type and Number:	Visa Expiry:
Passport Number:	Country of Issue:
Date of Entry into Australia:	
Main Language(s) spoken:	
Residential address in Australia:	
	Postcode:
State:	
Residential address overseas:	
	Postcode:
Country:	
Mobile Number:	
Email (please print clearly):	
The following information regarding your census data collection – See MCEETYA Da	r educational qualifications is required by the Federal Government for school tale Collection below:
Occupation:	Employer:
What is the highest year of schooling you ☐ Year 9 or below ☐ Year 10 ☐ Year 11	have completed? (Please tick the appropriate)
What is the highest level of qualification □ No qualification after school □ Certifi	

☐ Bachelor's Degree or above		
Please indicate your appropriate occupations. Senior Management, Government Administr Business Managers, Arts/media/sportspersor Tradespersons, Clerks & Skilled Office Worker Machine Operators, Hospitality Staff, Assista Not in paid work	ation or Defence, Qualified Professionals ns, Associate Professionals ers, Sales & Service Staff	
PARENT 2 Relationship to student:	Relationship to Parent 1:	
Mr/Mrs/Ms/Miss/Dr Other:		
Surname:	First Name:	
Preferred name:	Religion:	
Country of Birth: Australian Citizen: \square Yes \square No	Nationality:	
Visa Type and Number:	Visa Expiry:	
Passport Number:	Country of Issue:	
Date of Entry into Australia:		
Main Language(s) spoken:		
Residential address in Australia:		
Suburb:	Postcode:	
State:		
Residential address overseas:		
Suburb/city:	Postcode:	
Country:		
Mobile Number:		
Email (please print clearly):		
The following information regarding your educensus data collection – See MCEETYA Data C		ederal Government for school
Occupation:	Employer:	

What is the highest year of schooling you have completed? (Please tick the appropriate)

☐ Year 9 or below ☐ Year 10 ☐ Year 11 ☐	Year 12	
What is the highest level of qualification yo ☐ No qualification after school ☐ Certifica ☐ Bachelor's Degree or above	•	
Please indicate your appropriate occupational group: Senior Management, Government Administration or Defence, Qualified Professionals Business Managers, Arts/media/sportspersons, Associate Professionals Tradespersons, Clerks & Skilled Office Workers, Sales & Service Staff Machine Operators, Hospitality Staff, Assistants, Labourers and related workers Not in paid work		
GUARDIAN DETAILS if the student is being	accompanied by their legal custodian or a relative, not their par	rent:
Mr/Mrs/Ms/Miss/Dr Other:		
Surname:	First Name:	
Preferred name:		
Mobile Number:		
Email (<i>please print clearly</i>):		_
The state of the s	ersons to be called if parents/guardians cannot be contacted. completed, with a minimum of 2 contacts required***	
Name 1:	Relationship to student:	
Telephone:	Mobile:	
Name 2:	Relationship to student:	
Telephone:	Mobile:	
Name 3:	Relationship to student:	
Telephone:	Mobile:	

MCEETYA DATA COLLECTION

The Ministerial Council on Education, Employment, Training and Youth Affairs, Federal Government, requires information captured above regarding your educational qualifications for school census collection. Information is also collected on this form and during your child's enrolment in order to meet our obligations under the ESOS Act and the National Code 2007 for international students; to ensure student compliance with the conditions of their visas and their obligations under Australian immigration laws generally. The authority to collect this information is contained in the Education Services for Overseas Students Act 2000, the Education Services for Overseas Students Regulations 2001 and the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students 2007. Information collected about you and your child on this form and

during his or her enrolment can be provided, in certain circumstances, to the Australian Government and designated authorities and, if relevant, the Tuition Assurance Scheme and the ESOS Assurance Fund Manager. In other instances information can be collected on this form or during your enrolment can be disclosed without your consent where authorised or required by law.

PRIVACY STATEMENT

Under the Privacy Act (the Act) St Andrew's Grammar is required to provide you with certain information as to how we protect your privacy and how we comply with the requirements of the Act and the 13 Australian Privacy Principles (APP's). This information is set out in your Privacy Policy which is available on the schools public website www.sag.wa.edu.au and also available upon request from the School Administration. Our Privacy Policy describes:

- Who we collect information from;
- The types of personal information collected and held by us;
- How this information is collected and held;
- The purpose for which your personal information is collected, held, used and disclosed;
- How you can gain access to your personal information and seek its correction;
- How you may complain or inquire about our collection, handling, use or disclosure of your personal information and how that complaint or inquiry will be handled; and
- Whether we are likely to disclose your personal information to any overseas recipients.

** We strongly recommend that you read our Privacy Policy and if you have any queries with respect to its content you should contact the Principal's Personal Assistant at principalpa@sag.wa.edu.au.

PARENT ACKNOWLEDGEMENTS

I/We acknowledge that all information provided to the school is true and current to the best of our knowledge and belief, and that a failure to disclose any information may result in this application being refused or may result in the school having to cancel the enrolment at any time.

I/We acknowledge that information about our school account may be shared with the Education Agent, if they have assisted with this application.

Signature of Parent 1:	Date:	
Signature of Parent 2:	Date:	

Appendix 1: Notes:

#1 The Department of Home Affairs will assess the nominated arrangements according to the Migration Regulations 1994 and, if approved, the eligibility relative will be the student's nominated guardian. The School is not involved in setting up the student's accommodation or welfare arrangements but may require the guardian to meet with staff early in the first term of the student's enrolment.

#2 Eligible relative is:

- a brother, sister, step-parent, step-brother, step-sister, grandparent, aunt, uncle, cousin, niece, nephew, step-grandparent, step-aunt, step-uncle, step-niece or step-nephew
- nominated by a parent/legal custodian of the student
- at least 24 years of age
- of good character: if residing in Australia have a valid Working with Children (WWC) card or a police clearance from their own country
- an Australian citizen, permanent resident or be eligible to remain in Australia until the student's visa expires or the student turns 18 years of age (whichever happens first).

- #3 In this case the School will issue a **Confirmation of Accommodation and Welfare letter (CAAW)** and accept responsibility for the welfare arrangements of the student. We are placing a student into arrangements that we consider suitable into the care of
- a. a relative who has signed an agreement with the parents/legal custodian to act as the nominated guardian and provide accommodation; or
- b. a relative who has signed an agreement with the parents/legal custodian to act as the nominated guardian AND another **relative** or **close family friend** who will provide accommodation. Parent/legal custodians has agreed to this accommodation arrangement.

Please send a copy of my child's statement to Guardian Agent

DOCUMENTS ATTACHED TO THIS APPLICATION FOR ADMISSION It is essential that copies of the following documents are supplied to th	
boxes below to acknowledge that copies have been attached. \Box Current Passport	
☐ Most recent school reports (2 years if possible)	
English Language test report	
☐ Copy of Visa documents	
\square Supplementary Form for Students with Special Needs (if app	olicable)
ADMINISTRATION USE ONLY	
☐ Registration Fee of \$50.00 Receipt Number:	Cash/EFTPOS
\square Documents scanned/received Date received:	
☐ Interview Booked Date of Interview:	_
☐ Entered into Synergetic ☐ F ☐ C Date of entry:	
Additional Notes:	