



**ST ANDREW'S
CATHEDRAL
SCHOOL**
FOUNDED 1885



Gawura School enrolment application form

1. Student Information

Family Name _____ Given Name/s _____

Preferred Name in Conversation _____ Gender Male Female

Point of Entry: Calender Year: _____ Academic Year: _____ Term if other than 1st: _____

Date of Birth ____/____/____ Country of Birth _____

Religion _____ Parish (if applicable) _____

Nationality _____ Country of Birth _____

Residential Address _____

_____ Postcode _____

Residential Telephone _____ Residential Fax: _____

Student resides with Both parents One Parent Shared Residential Guardian

Please tick the appropriate boxes from the following:

Aboriginal Yes No Torres Strait Islander Yes No

2. Parent/s Information

(A) Parent 1 Details

Title _____ Surname _____ Given Name/s _____

Occupation _____ Job Title _____

Employer _____ Religion _____ Church Affiliation _____

Residential Address _____

_____ Postcode _____

Telephone: Home: _____ Work _____ Mobile _____

Email: Home: _____ Work _____

Please tick the appropriate boxes from the following:

Aboriginal Yes No Torres Strait Islander Yes No

(B) Parent 2 Details

Title _____ Surname _____ Given Name/s _____

Occupation _____ Job Title _____

Employer _____ Religion _____ Church Affiliation _____

Residential Address _____

_____ Postcode _____

Telephone: Home: _____ Work _____ Mobile _____

Email: Home: _____ Work _____

Please **tick the appropriate boxes from the following:**

Aboriginal Yes No Torres Strait Islander Yes No

(C) Guardian/Homestay Details

Title _____ Surname _____ Given Name/s _____

Occupation _____ Job Title _____

Employer _____ Religion _____ Church Affiliation _____

Residential Address _____

_____ Postcode _____

Telephone: Home: _____ Work _____ Mobile _____

Email: Home: _____ Work _____

Please **tick the appropriate boxes from the following:**

Aboriginal Yes No Torres Strait Islander Yes No

Signature of both Parents (or the Guardian)

Print Name	Relationship to Student	Signature	Date
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Print Name	Relationship to Student	Signature	Date
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Please note: This application requires the signature of BOTH parents or the guardian. If both parents signatures are not present, please indicate the circumstances.

3. Education

Present Preschool: _____ Dates _____

Previous Preschools: _____ Dates _____

_____ Dates _____

Siblings (List other children in order of age, eldest first)

Name	Gender	Age	School	Year

Student's learning strengths (academic or social) _____

Student's learning areas of need (academic or social) _____

Other relevant information: _____

4. Medical Information

Please indicate any medical details of which the School should be aware:

Asthma: _____ Hearing: _____

Allergies: _____ Heart: _____

Attention Deficit Disorder: _____ Speech: _____

Autism Spectrum: _____ Disabilities: _____

Sight/Contact Lenses: _____ Diabetes: _____

Epilepsy: _____

Details of above or other conditions: _____

Hospital history: _____

Details of any regular medication: _____

Special medical details: _____

OFFICE USE ONLY:

5.1 Accounts information

Title _____ Surname _____ Given Name/s _____

Postal Address _____

Postcode _____

5.2 Application Declaration

1. I/We are accepting of the Christian values of the School
2. I/We understand that if we live out of area that I/we must arrange own transport.
3. I/ We understand that qualification for the Gawura Scholarship is reliant on proof of financial disadvantage. If our financial circumstances improve the Scholarship may be revised.
4. I/We are committed to the value of education and learning
5. I/We are committed to making a full commitment to the whole school life including sporting and music events.
6. I/We understand that we must truthfully disclose all details in relation to the applicant's school rediness.

Checklist:

Checklist for ALL applications:

- Complete and sign the Enrolment Application Form
- Include the student's School or Preschool reports
- Certificate of Aboriginality or Torres Straight Islander
- Read the School's Collection Notice
- Student's Birth Certificate or Passport
- Attach copies of Australian Driver's Licence or Passport for both parents

Additional requirment for Kindergarten to Year 2 Enrolment:

- A copy of the student's Immunisation History Statement



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**heart
mind
life**