



St Andrew's Cathedral School academic scholarship enrolment form

1. Student Information

Family Name _____

First Name/s _____

Preferred Name in Conversation _____

Gender Male Female Date of Birth ____/____/____

Religion _____

Parish (if applicable) _____

To Commence Year (eg Year 7) _____ In Term (eg Term 1) _____ Year (eg 2025) _____

Nationality _____ Country of Birth _____

Residential Address _____

_____ Postcode _____

Residential Telephone _____ Mobile _____

Student's Mobile (if applicable but required for BOSTES for Years 10, 11 & 12) _____

Name of siblings at St Andrew's Cathedral School (Past and present) _____

Please tick the appropriate boxes from the following list

Student resides with Both parents One Parent Shared Residential Guardian

Aboriginal Yes No Torres Strait Islander Yes No If Yes go to the next page

Australian Citizen Yes No If Yes go to the next page

Permanent Resident of Australia Yes No Visa Class No _____

Temporary Resident of Australia Yes No Visa Class No _____

Overseas Student Yes No What year did he/she arrive in Australia? _____

2. Parent information

As your email address gives unique access to our Parent Portal, we need separate email addresses for each parent.

Parent 1 Details **Mother** **Father** **Other** _____

Title _____ Family Name _____ First Name _____

Occupation/Position _____ Employer _____

Religion _____ Church Affiliation _____

Residential Address _____

_____ Postcode _____

Telephone Home _____ Work _____

Mobile _____

Email _____

If an ex-student of St Andrew's, final Year and Year group _____

Parent 2 Details **Mother** **Father** **Other** _____

Title _____ Family Name _____ First Name _____

Occupation/Position _____ Employer _____

Religion _____ Church Affiliation _____

Residential Address _____

_____ Postcode _____

Telephone Home _____ Work _____

Mobile _____

Email _____

If an ex-student of St Andrew's, final Year and Year group _____

Guardian/Homestay Details (for overseas students)

Title _____ Family Name _____ First Name _____

Occupation/Position _____ Employer _____

Relationship to Student _____

Residential Address _____

_____ Postcode _____

Telephone Home _____ Work _____

Mobile _____

Email _____

3. Student profile

Current School _____ Academic Year _____ Dates _____

Previous Schools _____ Academic Year _____ Dates _____

_____ Academic Year _____ Dates _____

_____ Academic Year _____ 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) _____

Special learning or health needs _____

It is important that we are informed of any academic or behavioural issues including any special needs the student has, such as medical or mental health issue, physical or intellectual conditions or disabilities. Please attach any relevant documentation, such as reports from health professionals or other consultants. If this section is not completed, we will assume the student has no special needs. Failure to complete this section accurately and fully may delay the enrolment process or prevent an offer of a place being made.

The School may collect information about the child's educational history from the child's previous school.

Student questionnaire

1. Have you received an Outstanding Achievement or won an award for anything (eg Sports / Academic) over the past two years?
If so, what?

4. Application declaration

1. I/We request that the above student be admitted to St Andrew's Cathedral School.
2. I/We have read and understand the School's Policy on Privacy.
3. I/We certify that the information given herein by me is complete, true and correct, and agree to update the school of any changes to the information provided.
4. I/we understand that the school may request my/our consent to collect information about my/our child from a third party and that the school may not be able to proceed with the enrolment process if such consent is not provided.

Signature of both Parents (or the Guardian)

| | | | |
|------------|-------------------------|-----------|-------|
| _____ | _____ | _____ | _____ |
| Print Name | Relationship to Student | Signature | Date |
| _____ | _____ | _____ | _____ |
| Print Name | Relationship to Student | Signature | Date |

Please note: This application requires the signature of BOTH parents or the guardian. If both parents signatures are not present, please indicate the circumstances.

Note:

No application fee is required at this stage, it will be charged on enrolment.