

Marysville Primary School

STUDENT ENROLMENT INFORMATION – 2008

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Student ID

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Student Details Section

STUDENT PERSONAL AND ENROLMENT DETAILS								
Surname						Title		
						Miss, Ms, Mr		
First Given Name				Second Given Name				
Preferred Name <small>(if applicable)</small>				Gender <small>(circle)</small>	M / F	Birth Date <small>dd-mm-yy</small>	/	/
List Any Other Family Members Attending This School:								
OFFICE USE ONLY								
Birth Date Proof Sighted <small>(circle)</small>	Y / N	Enrolment Date	/ /		Status <small>(circle)</small>	Active / Inactive / Future		
Year Level		Home Group		House		Campus		

Family Details Section

PRIMARY FAMILY DETAILS							
NOTE: The 'PRIMARY' Family is: "The family or parent the student mostly lives with" - Alternative and Additional family forms are available from the school if this is required							
ADULT A (Primary Carer):				ADULT B:			
Gender <small>(circle)</small>	M / F	Title <small>Ms, Mr, Dr etc</small>			Gender <small>(circle)</small>	M / F	Title <small>Ms, Mr, Dr etc</small>
Surname				Surname			
First Name				First Name			
Occupation				Occupation			
Employer				Employer			
Country of Birth				Country of Birth			
Native Language <small>(Write E if English)</small>				Native Language <small>(Write E if English)</small>			
Other Language <small>(Write E if English)</small>				Other Language <small>(Write E if English)</small>			
Interpreter Required? <small>(circle)</small>			Y / N				
Relationship To Student <small>(circle)</small>	Parent, Step-Parent, Adoptive Parent, Foster Parent, Host Family, Relative, Friend, Self or Other			Relationship To Student <small>(circle)</small>	Parent, Step-Parent, Adoptive Parent, Foster Parent, Host Family, Relative, Friend, Self or Other		
Language spoken at home <small>(Write E if language is English)</small>			Preferred Language of Notices <small>(Write E if language is English)</small>				
The Family Occupation Code is:			Choose from the list provided at the back of this form				
Would either adult be interested in helping out the School with school council, excursions or similar activities? <small>(circle)</small>				A = Adult A, B = Adult B, C = Both Adults, N = Neither Adult			

ADULT A: Contact Details				ADULT B: Contact Details			
Can we contact you at work? <small>(circle)</small>			Y / N	Can we contact you at work? <small>(circle)</small>			Y / N
Are you usually home during business hours? <small>(circle)</small>			Y / N	Are you usually home during business hours? <small>(circle)</small>			Y / N
Work phone no. and any other contact information							
Are you usually home AFTER business hours <small>(circle)</small>			Y / N	Are you usually home AFTER business hours? <small>(circle)</small>			Y / N
Home phone no. and any other contact information							
Preferred method of contact <small>(circle)</small>		Mail / Email / Facsimile		Preferred method of contact <small>(circle)</small>		Mail / Email / Facsimile	
E-Mail Address							
Fax Number							

Family Home Address Details

Postcode	Road Street			State	
Suburb				State	
Telephone Number		Silent Number (circle)	Y / N	Mobile or Fax Number	

Family Mailing Address Details – Write “As Above” if the same as Family Home Address					
Postcode		Box Number			
Suburb				State	

Family Doctor / Medical Care Details					
Doctor's Name				Individual or Group Practice (circle)	I / G
No. & Street or Box Number					
Suburb		State		Postcode	
Telephone Number			Facsimile Number		
Ambulance Subscriber (circle)	Y / N		Medicare Number		

Prime Family Emergency Contacts				
	Name	Relationship [Neighbour, Relative, Friend or Other]	Telephone Contact	Language Spoken If English Write “E”
1				
2				
3				
4				

Student Emergency Contacts				
This section should ONLY be filled out if THIS student has emergency contacts other than the above.				
	Name	Relationship [Neighbour, Relative, Friend or Other]	Telephone Contact	Language Spoken If English Write “E”
1				

Primary Family Details				
The Student Lives With the Primary Family: (circle)	Always, Mostly, Balanced, Occasionally, Never	Send Correspondence Addressed to: (circle)	A = Adult A C = Both Adults	B = Adult B N = Neither

DEMOGRAPHIC DETAILS FOR STUDENT				
Country of Birth				
If Country of Birth is NOT Australia then advise:	Date of Arrival in Australia OR Date of Return to Australia [dd-mm-yyyy]		/ /	
Residential Status (circle)	P / T	P = Permanent, T = Temporary IF T, the next line must be completed		
Visa Sub Class	Visa Statistical Code [Not required for some sub-classes]	Visa Expiry Date [dd-mm-yyyy]	/ /	
Student Speaks English (circle)	Y / N	Indigenous Background	N = No Indigenous Background, K = Aboriginal, T = Torres Strait Islander, B = Both Aboriginal & Torres Strait Islander	
** Living Arrangement	** B = At home with TWO Parents/Guardians, O = At home with ONE Parent/Guardian, A = Arranged by State-Out of Home Care, H = Homeless Youth, I = Independent			
Usual Mode of Transport	W = Walking, Y = Bicycle, B = School Bus, P = Public Bus, T = Train, M = Tram, C = Driven, S = Self Driven, X = Taxi or O = Other	Distance to School In Kilometres		
Religion	Religious Instruction			
General Notes				

**See attachment at the back of this form for a full explanation of Living Arrangement.

SCHOOL DETAILS

Date Of First Enrolment in an Australian School		/ /		Previous School		
Repeating Year (circle)	Y / N	Integration Required (circle)	Y / N	Full Time Student (circle)	Y / N	Time fraction for Part Time Student, i.e. 0.8 = 4 days

RESTRICTIONS		
Is There An Access Alert? (circle)	Y / N	If Y, then complete the Access Type and Access Restriction sections If N move to medical / immunisation details section below
Access Type		Court Order, Family Law Order, Restraining Order or Other
Access Restriction [Description]		
Is There An Activity Alert? (circle)	Y / N	If Y, then describe the Activity Restriction in below
Activity Restriction: [If Any]		

MEDICAL / IMMUNISATION DETAILS FOR STUDENT					
In the event of illness or injury to my child whilst at school, on an excursion, or travelling to or from school; I authorise the Principal or teacher-in-charge of my child, where the Principal or teacher-in-charge is unable to contact me, or it is otherwise impracticable to contact me to:					
<ul style="list-style-type: none"> consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner, administer such first aid as the Principal or staff member may judge to be reasonably necessary. 					
Signature of Parent/Guardian _____					
Medical Alert (circle)	Y / N				
Disability (circle)	Y / N	Immunisation Certificate Sighted by School (circle)	Y / N / NA		
Disability ID Number		Immunisation Status (circle)	Complete Immunisation / Partial Immunisation / Not Immunised		
Hearing Impairment (circle)	Y / N	Legend: Y = Immunised, N = Not Immunised, U = Unknown			
Speech Impairment (circle)	Y / N	Diphtheria	Y / N / U	Poliomyelitis	Y / N / U
Vision Impairment (circle)	Y / N	Haemophilus Influenza type B	Y / N / U	Tetanus	Y / N / U
Mobility Impairment (circle)	Y / N	MMR	Y / N / U	Hepatitis B	Y / N / U
		Pertussis (Whooping Cough)	Y / N / U		

This box should ONLY be filled out if THIS student has a Doctor and/or Medicare number different to the Primary Family.	
Student Doctor Details	
Student Medicare Number	

MEDICAL CONDITIONS – More copies of the medical condition forms are available on request from the school.										
1/ ASTHMA Medical Condition Details										
Further Detail:										
Symptoms:	Cough (circle)	Y / N	Difficulty Breathing (circle)	Y / N	Wheeze (circle)	Y / N	Symptoms After Exertion (circle)	Y / N	Tight Chest (circle)	Y / N
If my child displays any of the above symptoms please:										
Inform Doctor? (circle)	Y / N	Inform Emergency Contact (circle)	Y / N	Administer Medication (circle)	Y / N					
Other Medical Action (circle)	Y / N	If Y please advise the action required								
Asthma Management Plan:										

Dosage		regularly) or in response to symptoms	Preventative / Response	
Medication is Administered By	Student, Nurse, Teacher, Other	Frequency	Student, Nurse, Fridge in Staff Room, Elsewhere	
Dosage time		Location Stored (circle)	Y / N	Poison Rating
		Reminder Required? (circle)		

2/ ANY OTHER Medical Condition Details					
Medical Condition					
Further Detail:					
Symptoms					
If my child displays any of the above symptoms please:					
Inform Doctor? (circle)	Y / N	Inform Emergency Contact (circle)	Y / N	Administer Medication (circle)	Y / N
Other Medical Action (circle)	Y / N	If Y please advise the action required			
Medication			Is Medication preventative (taken regularly) or in response to symptoms	Preventative / Response	
Dosage			Frequency		
Medication is Administered By	Student, Nurse, Teacher, Other		Location Stored	Student, Nurse, Fridge in Staff Room, Elsewhere	
Dosage Time			Reminder Required (circle)	Y / N	Poison Rating

FINANCE DETAILS							
Youth Allowance (circle)	Y / N	EMA (circle)	Y / N	Ab Study Allowance (circle)	Y / N	Attracts SGB Funds (circle)	Y / N

Photographing Students Consent

I give my permission for my child's photo and name to be taken and included in any school advertisements (ie Local newspapers, school newsletters etc)

Signature of Parents/Guardians _____ Dated ___ / ___ / 20__

Head Lice Consent

I give permission for my child to be checked regularly for Head Lice

Signature of Parents/Guardians _____ Dated ___ / ___ / 20__

Consent to Medical Attention

Signature of Parents/Guardians _____ Dated ___ / ___ / 20__

Thank you for taking the time to complete this Student Information form. The details are confidential, but are required to enable staff to properly enrol your child at our school.

Signature(s) of Parents/Guardians:

_____ Dated ___ / ___ / 20__

_____ Dated ___ / ___ / 20__

FAMILY OCCUPATION CODES

The codes below are to be used when providing family status details for enrolled students. This information is used for determining funding allocations to schools. All data remains confidential and only aggregate data will be provided to the central administration.

FAMILY OCCUPATION STATUS GROUP CODES

The Family Occupation Status Group is based on the occupation groups of parents or other adults living with the student who have a parental/guardianship role. From the list below, select the most appropriate family occupation status group. Where both parents/guardians are working and their occupations fall into two different groups, select the group with the higher number. The groups are based on the Australian Bureau of Statistics Australian Standard Classification of Occupations (ASCO).

GROUP 1

Home duties; pensioner; unemployed; retired; student; no parents (eg. homeless).

GROUP 2

Indoor Manual Workers: includes trades assistants, factory hands, cleaners, ushers, door attendants, luggage porters, storemen/women, guards, security officers, caretakers, housekeepers, laundry workers, kitchen hands, ward helpers and veterinary nurses.

Outdoor Manual Workers: includes farm hands, forestry labourers, nursery and garden labourers, survey hands, railway labourers, garbage collectors, fishermen/women, deck hands and seamen/women.

Personal Service Workers: includes childcare and refuge workers, enrolled nurses, dental nurses, home companions and family aides, travel stewards, funeral directors, beauty therapists and masseurs/masseuses.

Plant and Machine Operators and Drivers: includes bus, tram, truck and engine drivers, excavating, earthmoving, forklift and agricultural plant operators, fire fighters, boiler operators, petroleum and gas operators, crane and hoist operators, metal, plastics, chemical, wood and paper machine operators, sewing and shoemaking machinists, food processing operators, photographic developers and printers, and infantry.

Performing Arts Support Workers: includes sound technicians, light technicians, motion picture camera operators, and television equipment operators.

Sportspersons: includes coaches, referees, racecourse officials, jockeys and other sports persons.

GROUP 3

Amenity Horticultural Tradespersons: includes nurserymen/women, greenkeepers and gardeners.

Building Tradespersons: includes carpenters, bricklayers, painters, signwriters, plasterers, plumbers and tilers.

Electrical and Electronics Tradespersons: includes electrical linesmen/women, electrical fitters, automotive technicians, refrigeration mechanics, electricians, communications equipment tradespersons, radio and television servicers, office equipment and computer servicers and lift mechanics.

Food Tradespersons: includes butchers, bakers, pastry cooks and chefs.

Garment Tradespersons and Hairdressers: includes tailors, dressmakers, hat makers, apparel cutters and hairdressers.

Metal, Metal Fitting and Machining Tradespersons: includes toolmakers, metal fitters and machinists, textile mechanics, forging, sheetmetal, boilermaking, welding and metal casting tradespersons, aircraft maintenance engineers, instrument makers and repairers, watch makers and repairers, gunsmiths and engravers.

Printing Tradespersons: includes compositors, printing machinists, binders and screen printers.

Vehicle Tradespersons: includes motor mechanics, panel beaters, vehicle painters and vehicle trimmers.

Other Trades: includes wood machinists and turners, cabinet makers, picture framers, boat builders and repairers, blasting tradespersons, upholsterers and bedding tradespersons, shoemakers and repairers, sailmakers, floor coverers, glass tradespersons, piano tuners, potters and other craft workers, sheep shearers, animal trainers, stonemasons, divers, florists and other tradespersons.

GROUP 4

Farmers: includes animal farmers, pasture growers, horse breeders, vegetable growers, beekeepers and other farmers.

Managing Supervisors: includes shop managers, hotel/motel managers, caravan park managers, financial institution branch managers, sports centre managers, postmasters/mistresses, railway stationmasters/mistresses, real estate agency managers, bookmakers, professional builders and wholesalers.

Clerks: includes accounting clerks, bookkeepers, payroll clerks, insurance and broking clerks, statistical and actuarial clerks, filing, sorting and copying clerks, mail sorters, materials recording and despatching clerks, receptionists, telephonists, messengers, teachers' aides, legal clerks, meter readers, proofreaders and market research interviewers.

Data Processing and Business Machine Operators: includes computer operators, data entry operators and supervisors.

Stenographers and Typists: includes office secretaries, typist-clerks and word processing operators.

Inspectors and Regulatory Officers: includes building inspectors, safety inspectors, health inspectors and other inspectors.

Police: includes police supervisors, policemen/women, and detectives.

Other Paraprofessionals: includes ambulance officers, prison officers, purchasing officers, interior decorators, layout artists, park rangers, wool classers, library technicians, radio telegraphists and other paraprofessionals.

Artists and Related Professionals: includes painters, sculptors, photographers, designers, authors, journalists, film, T.V. and stage directors, dancers, musicians, composers and actors.

Salespersons: includes investment, insurance and real estate salespersons, sales representatives, sales assistants, tellers, cashiers, ticket sellers, bar attendants, waiters and waitresses, travel agents and service station attendants.

Engineering and Building Associates and Technicians: includes electrical and electronics technicians and associates, building, architectural and surveying associates and other engineering technicians.

Medical and Science Technical Officers and Technicians: includes laboratory technicians, dental therapists and agricultural technical officers.

GROUP 5

Managing Directors: includes parliamentarians, judges, magistrates, general managers, finance, sales and marketing managers, production and supply managers, personnel managers, data processing managers, directors of nursing and school principals.

Registered Nurses: includes registered general nurses, community health nurses, registered midwives, registered psychiatric nurses and nursing supervisors.

Welfare Paraprofessionals: includes community workers, parole officers, welfare officers and youth workers.

Building Professionals: includes architects, landscape architects, quantity surveyors and cartographers.

Business Professionals: includes accountants, public relation officers, personnel specialists, computer programmers, software engineers, systems analysts and industrial relations officers.

Engineers: includes chemical, civil, electrical and electronic, mechanical and mining engineers and metallurgists.

Health Diagnosis and Treatment Practitioners: includes general medical practitioners, specialist doctors, dentists, speech pathologists, occupational therapists, optometrists, physiotherapists, chiropractors, radiographers, pharmacists and veterinarians.

Natural Scientists: includes chemists, geologists, geophysicists, botanists, zoologists, foresters, medical testing professionals, environmental scientists and meteorologists.

Professionals: includes social workers, counsellors, lawyers, ministers of religion, economists, psychologists, town planners, mathematicians, statisticians, historians, education researchers, actuaries and librarians.

School Teachers: includes pre-primary, primary and secondary teachers.

Other Teachers/Instructors: includes special educators, university and TAFE teachers, driving and other instructors.

Air and Sea Transport Technical Workers: includes aircraft pilots, air transport operating support workers, air traffic controllers, aircraft navigators, ship captains, ship officers, marine engineers and marine surveyors.

Living Arrangements

Explanation Notes

Student living arrangement information is one component of the Student Learning Needs (SLN) index.

(B) At home with TWO parents/guardians

Where student has regular access to two adults to support them with their education.

(O) At home with ONE parent/guardian

Where student has regular access to one adult to support them with their education

(A) Arranged by State-Out of Home Care

Students to be entered in this category are those **who have been subject to protective intervention by the Department of Human Services** and live in one of the following alternative care arrangements away from their parents. These DHS facilitated care arrangements include living with relatives or friends (kith and kin), living with non-relative families (foster families or adolescent community placements) and living in residential care units with rostered care staff. In Victoria, approximately 4000 children and young people live in out of home care. Students entered in this category are those that the Partnering Agreement: School Attendance and Engagement of Children and Young People in Out of Home Care has been developed to support.

In order to monitor the educational outcomes for this cohort, it is necessary to accurately record and maintain attendance and achievement records of these students.

(H) HOMELESS Youth:

- Have parents who cannot exercise their parental responsibilities, **or**
- Find it unreasonable to live at home because there is:
 - extreme family breakdown
 - serious risk if they continue to live in the parental home
 - consistent deprivation of basic necessities such as food, water, clothing, shelter, sleep etc.
 - threat to health and wellbeing through drug or alcohol abuse, criminal or illegal activity or violence in the home, **or**
- Are a refugee or orphan not living with parents/guardians

(I) INDEPENDENT students (with extended family or arranged private board):

- Have to live away from home to study
- Are or have been married or have been living in a marriage like relationship for at least 12 months, **or**
- Have a dependant child, **or**
- Have worked at least 30 hours per week for at least 18 months during the past 2 years