



DE LA SALLE COLLEGE

OFFICE USE ONLY

| | | | |
|-------------|--|------------|----------------------|
| Received | <input type="text"/> | Entered by | <input type="text"/> |
| MMEC flag | <input type="checkbox"/> Funded/Not-funded | Priority | <input type="text"/> |
| Letter sent | <input type="text"/> | Rec. No. | <input type="text"/> |
| SFID | <input type="text"/> | SC1 | <input type="text"/> |
| | | SC2 | <input type="text"/> |

APPLICATION FOR ENROLMENT

Please complete the form in BLOCK LETTERS and please include the following documentation, as appropriate:

- A copy of the child's birth certificate
- A copy of the child's Australian passport/Naturalisation certificate/Australian visa (if applicant was not born in Australia)
- A copy of the child's Baptism certificate and any other sacramental certificates received
- Payment of the application fee (\$100)

Please return this form to: College Registrar, De La Salle College, 1318 High Street Malvern, Victoria, 3144

APPLICANT DETAILS

| | | | |
|---------------------------------------|--|----------------------------------|----------------------|
| Commencement year level (e.g. Year 7) | <input type="text"/> | Year of commencement (e.g. 2020) | <input type="text"/> |
| Family name | <input type="text"/> | Given names | <input type="text"/> |
| Preferred name | <input type="text"/> | Date of birth | <input type="text"/> |
| Country of birth | <input type="text"/> | Religious affiliation | <input type="text"/> |
| Home address | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Nationality | <input type="checkbox"/> Australian <input type="checkbox"/> Other, please specify: <input type="text"/> | | |

Citizenship status – please choose one of the three options below and provide copies of the required documentation

- Australian Citizen, born in Australia (please provide copy of birth certificate only)
- Australian Citizen, not born in Australia (please complete one of the two options below, and provide a copy of the documentation)
 - Australian passport Passport no.
 - Naturalisation certificate Certificate no. Visa sub-class no.
 - Date of arrival into Australia
- Not an Australian Citizen (please provide further details as appropriate below)
 - Permanent resident Temporary resident Other/visitor/overseas student
 - Visa sub-class no. Visa sub-class no. Visa sub-class no.

Sacramental information – please note copies of certificates must be included as proof of sacraments received

| | | | | | |
|------------------------------------|----------------------|----------------------|---|------|----------------------|
| <input type="checkbox"/> Baptism | Date | <input type="text"/> | <input type="checkbox"/> Reconciliation | Date | <input type="text"/> |
| <input type="checkbox"/> Communion | Date | <input type="text"/> | <input type="checkbox"/> Confirmation | Date | <input type="text"/> |
| Current parish | <input type="text"/> | | | | |

SIBLINGS

Please complete the following for siblings currently enrolled, or to be enrolled at De La Salle College:

| Name of brother | Final year <i>(if previous student)</i> | House | OR | Current Homeroom <i>(if current student)</i> | House | OR | Expected year <i>(if future student)</i> |
|----------------------|--|----------------------|----|---|----------------------|----|---|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | <input type="text"/> | <input type="text"/> | | <input type="text"/> |
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DE LA SALLE COLLEGE CONNECTIONS

Please provide the following information if the student has any family connections to De La Salle College. Relationship may include: grandfather, father, uncle or stepfather.

| | | | |
|---------------------------|----------------------|------------|----------------------|
| 1. Name | <input type="text"/> | Final year | <input type="text"/> |
| Relationship to applicant | <input type="text"/> | House | <input type="text"/> |
| 2. Name | <input type="text"/> | Final year | <input type="text"/> |
| Relationship to applicant | <input type="text"/> | House | <input type="text"/> |
| 3. Name | <input type="text"/> | Final year | <input type="text"/> |
| Relationship to applicant | <input type="text"/> | House | <input type="text"/> |
| 4. Name | <input type="text"/> | Final year | <input type="text"/> |
| Relationship to applicant | <input type="text"/> | House | <input type="text"/> |

SCHOOLING INFORMATION

Attending school Yes No *(If no please proceed to parent/guardian details)*

Current school

School address

Does your son receive additional program support for educational needs? Yes No

(If yes, please tick appropriate box/es)

Currently receiving literacy, numeracy and special learning needs funding from the Catholic Education Office

Currently receiving funding from the Australian Government for special needs in government schools

Currently receiving support, but not receiving funding *(please provide details)*

Under which category is funding received?

Chronic health impairment

Social/emotional disorder

Physical disability

Vision impairment

Intellectual disability

Severe language disorder

Hearing impairment

Unsure/unknown

Does your son have any educational learning needs not referred to above? *(If yes, please provide details below)*

| |
|----------------------|
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
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| <input type="text"/> |
| <input type="text"/> |

Please include a copy of your son's most recent PSG meeting minutes and specialist reports (as applicable).

PARENT/GUARDIAN DETAILS

PARENT/GUARDIAN 1

| | |
|-----------------------|----------------------|
| Relationship to child | <input type="text"/> |
| Title | <input type="text"/> |
| Given name | <input type="text"/> |
| Family name | <input type="text"/> |
| Occupation | <input type="text"/> |
| Religion | <input type="text"/> |
| Nationality | <input type="text"/> |
| Country of birth | <input type="text"/> |

PARENT/GUARDIAN 2

| | |
|-----------------------|----------------------|
| Relationship to child | <input type="text"/> |
| Title | <input type="text"/> |
| Given name | <input type="text"/> |
| Family name | <input type="text"/> |
| Occupation | <input type="text"/> |
| Religion | <input type="text"/> |
| Nationality | <input type="text"/> |
| Country of birth | <input type="text"/> |

PARENT/GUARDIAN 1

| | |
|------------------|--|
| Postal address | <input type="checkbox"/> same as applicant address |
| | <input type="checkbox"/> different to applicant <i>(please include below)</i> |
| | <input type="text"/> |
| | <input type="text"/> |
| Telephone (home) | <input type="text"/> |
| (work) | <input type="text"/> |
| (mobile) | <input type="text"/> |
| Email | <input type="text"/> |

PARENT/GUARDIAN 2

| | |
|------------------|--|
| Postal address | <input type="checkbox"/> same as applicant address |
| | <input type="checkbox"/> different to applicant <i>(please include below)</i> |
| | <input type="text"/> |
| | <input type="text"/> |
| Telephone (home) | <input type="text"/> |
| (work) | <input type="text"/> |
| (mobile) | <input type="text"/> |
| Email | <input type="text"/> |

Address general mail to: Both parents/guardians Parent/guardian 1 Parent/guardian 2

RESPONSIBILITIES OF THE PARENT(S)/GUARDIAN(S)

De La Salle College is a Catholic College and expresses its freedom to live and teach the primacy of the value of Jesus Christ as expressed in the Gospels and in the teachings and traditions of the Roman Catholic Church.

To ensure that the specific character is upheld, we require from parents/guardians of prospective students the commitment that their sons participate in regular instruction and worship.

The undersigned accepts, as a condition of enrolment, that the enrolled student will participate in the general College program that gives the Catholic College its special character.

A condition of enrolment and attendance at the College is that all fees, as determined by the College from time to time, be paid as they are due.

Please continue to page 4....

PAYMENT DETAILS

An application fee of \$100 is payable with an application for a place. This fee is neither refundable nor transferable.

| | |
|-------------------|--|
| Method of payment | <input type="checkbox"/> Cheque <i>(please make cheque out to De La Salle College)</i> |
| | <input type="checkbox"/> Credit card <input type="checkbox"/> Other <input type="text"/> |

CREDIT CARD PAYMENT AUTHORISATION

I authorise De La Salle College to charge the \$100 application fee to my credit card account.

| | | | |
|--------------|----------------------|------|----------------------|
| Name on card | <input type="text"/> | | |
| Signature | <input type="text"/> | Date | <input type="text"/> |

Card type *(please tick)* Mastercard Visa *(below perforation for office use only)*

| | | | | | | | | | | | |
|-------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Card number | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Expiry | <input type="text"/> | <input type="text"/> | | | | | | | | | |
| CCV number | <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | | | | | |

DECLARATION

I/we declare that all information provided in this application for enrolment is correct at the date of application and we request that the above-named be registered as an applicant for a place at De La Salle College, Malvern.

I/we understand that we will be informed if and when a place becomes available.

I/we have read and understood the *responsibilities of parent/guardian* and agree to abide by these terms and conditions (which may change from time to time).

I/we give permission for De La Salle College to contact the current school.

Parent/guardian 1 signature

Date

Parent/guardian 2 signature

Date

PRIVACY INFORMATION

The below information is an excerpt from De La Salle College's Privacy Policy. The policy can be accessed in its entirety on the College website.

In dealing with personal and sensitive information about individuals, De La Salle (DLS) is bound by the Australian Privacy Principles contained in the Privacy Act 1988 (Cth).

In relation to health records, DLS is also bound by the Health Records Act 2001 (Vic).

HOW WILL DLS USE THE PERSONAL INFORMATION YOU PROVIDE?

DLS will use personal information it collects from you for the primary purpose of collection, and for such other secondary purposes that are related to the primary purpose of collection and reasonably expected, or to which you have consented.

Students and parents: DLS uses personal information on students and parents collected by DLS or provided by DLS to:

- assist with students' learning and wellbeing
- satisfy DLS's accountability and legal obligations and allow DLS to discharge its duty of care.

The College engages in fundraising activities from time to time.

Information received may be used to make an appeal to students or parents; it may also be disclosed to organisations that assist in the College's fundraising activities solely for that purpose.

WHO MIGHT DLS DISCLOSE PERSONAL INFORMATION TO AND STORE YOUR INFORMATION WITH?

DLS may disclose personal information, including sensitive information, held about an individual to:

- the Catholic Education Office Melbourne
- government departments
- people providing services to DLS, including specialist visiting teachers and counsellors

- recipients of DLS print and online publications such as newsletters and magazines
- anyone you authorise DLS to disclose information to
- anyone to whom DLS are required to disclose the information by law.

SENDING AND STORING INFORMATION OVERSEAS

DLS may disclose personal information about an individual to overseas recipients, for instance, to facilitate a school exchange. However, DLS will not send personal information about an individual outside Australia without:

- obtaining your consent (in some cases this consent will be implied)
- otherwise complying with the Australian Privacy Principles or other applicable privacy legislation.

HOW DOES DLS TREAT SENSITIVE INFORMATION?

Sensitive information will be used and disclosed only for the purpose for which it was provided or a directly related secondary purpose, unless you agree otherwise, or the use or disclosure of the sensitive information is allowed by law.

MANAGEMENT AND SECURITY OF PERSONAL INFORMATION

DLS and DLS's staff are required to respect the confidentiality of students' and parents' personal information and the privacy of individuals. DLS has in place steps to protect the personal information DLS holds from misuse, interference and loss, unauthorised access, modification or disclosure by use of various methods, including locked storage of paper records and password access rights to computerised records.

HOW DID YOU HEAR ABOUT US?

(Please tick as many as relevant)

Through my son's primary school
Name of primary school

I know someone who went to De La Salle

I know someone currently at De La Salle

De La Salle College Website

Employer
Name of employer

Advertising or promotional materials
Please name

Other
Please list