ENROLMENT FORM – Classes P-6

Sophia Mundi - Steiner Education and IB World School

Name:

Date of Application:
### ENROLMENT FORM

**Student’s Surname**

<table>
<thead>
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<th>Field</th>
<th>Information</th>
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<tbody>
<tr>
<td>First Name</td>
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<tr>
<td>Middle Name</td>
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<tr>
<td>Date of Birth</td>
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**Victorian Student Number (VSN) if known**

Is the Student an Australian Citizen?  
- Yes  
- No  

If No please advise of Residency Status

**Proposed Year of Entry:**  
- Prep or  
- Class: **(please specify)**

Previous Kindergarten or School attended (Name/Address)

**Contact Name & Position**

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<tr>
<th>Field</th>
<th>Information</th>
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<tbody>
<tr>
<td>Telephone</td>
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<td>Email</td>
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**Mother’s full name (or Guardian)**

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<th>Field</th>
<th>Information</th>
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<tr>
<td>Occupation</td>
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<td>Organisation/Position</td>
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<td>Post Code</td>
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<td>Home phone</td>
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<td>Work phone</td>
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<td>Mobile</td>
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Does the student live with this parent/guardian?  
- Yes  
- No  

**Drivers License Number**

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<th>Field</th>
<th>Information</th>
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**Father’s full name (or Guardian)**

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<th>Field</th>
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<tr>
<td>Occupation</td>
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<td>Mobile</td>
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<td>Email</td>
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</table>

Does the student live with this parent/guardian?  
- Yes  
- No  

**Drivers License Number**

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### Billing Details

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100%
FAMILY PICTURE (CONFIDENTIAL)

It is important to fully disclose all information requested to enable the school to access any support which may be required.

What is your child’s ordinal position in the family? 1st, 2nd, 3rd etc.

Does your child watch television/DVDs?  
- Yes  
- No (please tick)

Estimated watching time?  
- hrs/day  
- hrs/week

Does your child use computers/electronic games?  
- Yes  
- No (please tick)

Estimated usage time?  
- hrs/day  
- hrs/week

What language is spoken at home?

Please explain the family situation e.g. married, divorced, separated, adopted etc.

Is your child able to partake in normal physical activities?  
- Yes  
- No (please tick)

If no, please explain:

What are your child’s interests?

Is there any other information about your child you would like to share with the school?  
(Use this space to add any further information and feel free to add separate sheets).

SUSPENSIONS & EXCLUSIONS

Has your son/daughter ever been suspended and/or excluded from school  
- Yes  
- No (please tick)

If yes, please provide dates and details.

CHILD’S MEDICAL AND HEALTH INFORMATION

Name of Doctor       Telephone
Address

Medicare number      Ambulance member number

Does the child have any allergy or sensitivity (including bites?)  
- No  
- Yes

Does the child have any medical conditions and needs which are relevant to the school? (e.g. asthma, epilepsy, diabetes etc)  
- No  
- Yes

Does the child have any dietary restrictions?  
- No  
- Yes

If yes to any of the above, please indicate below the procedure required to be followed and/or a copy of the management plan such as in the case of asthma or anaphylaxis
Please list any surgery your child has had, with approximate dates:

<table>
<thead>
<tr>
<th>Has your child had any serious injuries or accidents?</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, please give details:</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Is your child on any continuing medication?</th>
<th>No</th>
<th>Yes</th>
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<tbody>
<tr>
<td>If yes, please give details:</td>
<td></td>
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**SPECIAL NEEDS STUDENTS**

The core school program provides for the needs of a student who can benefit from a regular provision of teaching resources. Children with special needs will be catered for to the degree that the school can resource such programs. The school will consult parents about the needs of the student and the availability of resources, in order to find cooperatively, the most effective ways to meet any such needs. Please ensure that full disclosure of special needs is made available to the school so that timely and effective assistance and resources can be provided.

Have there been any reports done on your child that are/or may be relevant to his/her enrolment? These would include all educational, auditory, visual, psychological and other reports to your child’s development academically, physically or emotionally. *(please provide details)*

<table>
<thead>
<tr>
<th>Are there any unusual concerns/problems with your child’s development e.g. eyes, feet, speech, coordination etc?</th>
<th>Yes</th>
<th>No (please tick)</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes please give details:</td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Does your child have a developmental delay or disability including intellectual, sensory, sensory or physical impairment, or a learning difficulty?</th>
<th>Yes</th>
<th>No (please tick)</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes please give details:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Has your child had learning support from a previous school or independent provider? <em>(please provide details)</em></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Has your child suffered any traumas or abuse?</th>
<th></th>
<th></th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Has your child been supported by a psychologist, welfare support or mental health professional? <em>(please provide details)</em></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

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CHILD’S IMMUNISATION RECORD

Has the child been immunised? ☐ No ☐ Yes

If yes, please provide a copy of one of the below:
- Child History Statement from the Australian Childhood Immunisation Register or
- Immunisation Status Certificate which are available through your Local Council

If no, please provide a copy of Immunisation Status Certificate which is available through your Local Council and they will mark the immunisation as incomplete.

Even if the child’s immunisation is classed as incomplete we still require the information returned to us as required by law, to assist the school in an event of a contagious infection outbreak.

Please give dates for any of the following illnesses your child has had:

- German Measles
- Measles
- Whooping Cough
- Mumps
- Scarlet Fever
- Chicken Pox
- Other

CONSENT

During outbreaks of head lice at school do you consent to your child being checked for head lice by an authorised adult? ☐ Yes ☐ No

If your child suffers from severe medical reactions, epilepsy, asthma, allergy or similar condition, do you consent to that information being displayed in the School Staff Room? ☐ Yes ☐ No

If your child requires welfare support, do you consent to the teacher referring your son/daughter to Student Welfare? ☐ Yes ☐ No

DECLARATION AND CONSENT TO EMERGENCY MEDICAL TREATMENT

I, [please print full name]

A person with lawful authority of the child referred to in this enrolment form:
- declare that the information in this enrolment form is true and correct and undertake to immediately inform the school in the event of any change to this information
- agree to collect or make arrangements for the collection of the child referred to in this enrolment form if she/he becomes unwell at school
- consent to the staff of the children’s service seeking, or where appropriate, administering, such emergency, medical treatment as is reasonably necessary and that I will reimburse any necessary expenses incurred by the school.

Signature Date

Lawful Authority—Parents: All parents have powers and responsibilities in relation to their children that can only be changed by a court order. The Children’s Services Regulations 1998 refer to these powers and responsibilities as ‘lawful authority’. It is not affected by the relationship between the parents, such as whether or not they have lived together or are married. A court order, such as under the Family Law Act, may take away the authority of a parent to do something, or may give it to another person.

Guardians: A guardian of a child also has lawful authority. A legal is given lawful authority by a court order. The definition of ‘guardian’ under the Children’s Services Act 1996 also covers situations where a child does not live with his or her parents and there are no court orders. In these cases, the guardian is the person the child lives with who has day to day care and control of the child. Note: This enrolment form is not complete unless the school’s Privacy Collection Statement has been included.
STANDARD ENROLMENT QUESTIONS DEVELOPED FOLLOWING DEPARTMENT OF HUMAN SERVICES GUIDELINES
Confidential: (information collected from this form will be covered by the School’s Privacy Policy. More information about the Privacy Policy is located on page 12).

COURT ORDERS RELATING TO THE CHILD
Are there any court orders relating to the powers and responsibilities of the parents in relationship to the child or access to the child?

☐ No   Go to the next section
☐ Yes   Please complete the following:

1. Please provide the original court order/s to the office for photocopying to accompany this enrolment form;
2. If these orders:
   a) change the powers of a parent/guardian to:
      authorize the taking of the child outside the service by a staff member of the service;
      consent to the medical treatment of the child;
      request or permit the administration of medication to the child;
      collect the child, AND/OR
   b) give these powers to someone else, please describe these changes and provide the contact details of any person given these powers

COLLECTING THE CHILD FROM SCHOOL
Your consent is required for other people to collect the child from school. Please list below the details of those people who can collect the child. In the event that the child is not collected is not collected from the school and the parents or guardians can not be contacted, this list will be used to arrange someone to collect the child. This list may be added to or changed throughout the year)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Telephone (home)</th>
<th>(work)</th>
<th>(mobile)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Address</td>
<td>Telephone (home)</td>
<td>(work)</td>
<td>(mobile)</td>
</tr>
</tbody>
</table>

EMERGENCY CONTACTS
There may be times when the child has an accident, injury, trauma or illness and the parents or guardians can not be contacted. To deal with these situations the school should notify one of the following people who are authorized to collect the child after accident, injury, trauma or illness. Including any person who has lawful authority to -Consent to the medical treatment of the child; request or permit the administration of medication to the child.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Telephone (home)</th>
<th>(work)</th>
<th>(mobile)</th>
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<tr>
<td>Name</td>
<td>Address</td>
<td>Telephone (home)</td>
<td>(work)</td>
<td>(mobile)</td>
</tr>
</tbody>
</table>
DATA COLLECTION FORM (MCEETYA)

Ministerial Council on Education, Employment, Training and Youth Affairs

Information required for assessment and reporting purposes
If you need help with this form please telephone the school office on 9416 3011

Name of student

<table>
<thead>
<tr>
<th>First name</th>
<th>Last name</th>
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</table>

Home address of student:

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Suburb</th>
<th>Post Code</th>
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</thead>
</table>

Sophia Mundi is bound by the National Privacy Principles contained in the Commonwealth Privacy Act. A copy of the school’s Privacy Policy is available upon request.

1 Sex

- [ ] Male
- [ ] Female

2 Is the student of Aboriginal or Torres Strait Islander origin?
(For persons of both Aboriginal and Torres Strait Islander origin, mark both ‘Yes’ boxes.)

- [ ] No
- [ ] Yes, Aboriginal
- [ ] Yes, Torres Strait Islander

3 In which country was the student born?

- [ ] Australia
- [ ] China
- [ ] India
- [ ] South Africa
- [ ] New Zealand
- [ ] Philippines
- [ ] Hong Kong
- [ ] England
- [ ] Viet Nam
- [ ] Sri Lanka
- [ ] Other—please Specify

4 (If more than one language, indicate the one that is spoken most often.)

<table>
<thead>
<tr>
<th>Student</th>
<th>Mother/parent 1 guardian 1</th>
<th>Father/parent 2 guardian 2</th>
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<tbody>
<tr>
<td>No, English only</td>
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<td>[ ]</td>
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<tr>
<td>Yes, Italian</td>
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<td>[ ]</td>
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<tr>
<td>Yes, Greek</td>
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<td>[ ]</td>
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<tr>
<td>Yes, Vietnamese</td>
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<tr>
<td>Yes, Cantonese</td>
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<td>[ ]</td>
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<tr>
<td>Yes, Arabic (inc. Lebanese)</td>
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<tr>
<td>Yes, Mandarin</td>
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<td>[ ]</td>
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<tr>
<td>Yes, Turkish</td>
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<td>[ ]</td>
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<tr>
<td>Yes, Macedonian</td>
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</tr>
<tr>
<td>Yes, Tagalog (Filipino)</td>
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<td>[ ]</td>
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<tr>
<td>Other—please specify</td>
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</table>
5a What is the highest year of primary or secondary school the parents/guardians have completed? (For persons who never attended school, mark 'Year 9 or equivalent or below')

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<thead>
<tr>
<th>Mother/parent 1 guardian 1</th>
<th>Father/parent 2 guardian 2</th>
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<tbody>
<tr>
<td>Year 12 or equivalent</td>
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<td>Year 11 or equivalent</td>
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<tr>
<td>Year 10 or equivalent</td>
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<tr>
<td>Year 9 or equivalent or below</td>
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</table>

5b What is the level of the highest qualification that parents/guardians have completed? (Mark one box only in each column).

<table>
<thead>
<tr>
<th>Mother/parent 1 guardian 1</th>
<th>Father/parent 2 guardian 2</th>
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<tbody>
<tr>
<td>Bachelor degree or above</td>
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<tr>
<td>Advanced diploma/Diploma</td>
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<tr>
<td>Certificate I to IV (including trade certificate)</td>
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<tr>
<td>No non-school qualification</td>
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Please select the appropriate parental occupation from the list (see next page).

• If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person’s last occupation
• If the person has not been in paid work in the last 12 months, enter ‘8’ in the box below

6a What is the occupation group of the mother/parent 1 /guardian 1?

6b What is the occupation group of the father/parent 2 /guardian 2?
LIST OF PARENTAL OCCUPATION GROUPS (FOR QUESTION 6) (please circle the most appropriate description)

Group 4: Machine operators, hospitality staff, assistants, labourers and related workers
- Drivers, mobile plant, production/processing machinery and other machinery operators
- Hospitality staff (hotel service, supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper)
- Office assistants, sales assistants and other assistants.
- Office (typist, word processing/data entry/business machine operator, receptionist, office assistant)
- Sales (sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker)
- Assistant/aide (trades assistant, school/teacher’s aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant)
- Labourers and related workers
- Defence Forces ranks below senior NCO not included above
- Agriculture, horticulture, forestry, fishing, mining worker (farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseyman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand)
- Other worker (labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)

Group 3: Tradesmen/women, clerks and skilled office, sales and service staff
- Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.
- Clerks (bookkeeper/bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, bond clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer service clerk, admissions clerk)
- Skilled office, sales and service staff
- Office (secretary, personal assistant, desktop publishing operator, switchboard operator)
- Sales (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)
- Service (aged/disabled/refuge/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

Group 2: Other business managers, arts/media/sportspersons and associate professionals
- Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business
- Specialist manager (finance/engineering/production/personnel/industrial relations/sales/marketing)
- Financial services manager (bank branch manager, finance/investment/insurance broker, credit/loans officer)
- Retail sales/services manager (shop, petrol station, restaurant, club hotel/motel, cinema, theatre, agency)
- Arts/media/sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media, presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official)
- Associate professionals generally have diploma/technical qualifications and support managers and professionals.
- Business/administration (recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, of fice/project manager)
- Defence Forces senior Non-Commissioned Officer

Group 1: Senior Management in large business organization, government administration and defence and qualified professionals
- Senior executive/manager/department head in industry, commerce, media or large organization.
- Public service manager (section head or above), regional director health/education/police/fire services administrator
- Other administrator (school principal, faculty head/dean, library/museum/gallery director, research facility director)
- Defence Forces Commissioned Officer
- Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems: identify, treat and advise on problems: and teach others
- Air/sea transport (aircraft/ship’s captain/office/pilot, flight officer, flying instructor, air traffic controller)
PRIVACY STATEMENT

1. The School collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil’s enrolment at the School. The primary purpose of collecting this information is to enable the School to provide schooling for your child.

2. Some of the information we collect is to satisfy the School’s legal obligations, particularly to enable the school to discharge its duty of care.

3. Certain laws governing or relating to the operations of schools require that certain information is collected. These include Public Health and Child Protection laws.

4. Health information about pupils is sensitive information within the terms of the National Privacy Principles under the Privacy Act. We may ask you to provide medical reports from time to time.

5. The School from time to time discloses personal and sensitive information to others for administrative and educational purposes. This includes to other schools, government departments, medical practitioners and providing services to the School, including specialist visiting teachers, sport coaches and volunteers.

6. Personal information collected from pupils is regularly disclosed to their parents or guardians. On occasions information such as academic and sporting achievements, pupil activities and other news is published in School newsletters, magazines and our website.

7. Parents may seek access to personal information collected about them and their children by contacting the School. Pupils may also seek access to personal information about them. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in the breach of the School’s duty of care to the pupil, or where pupils have provided information in confidence.

8. From time to time the School engages in fundraising activities. Information received from you will be used for this purpose; your personal information will not be released to third parties without your consent.

9. We may include your contact details in a class list and School directory accessible by the Class Carer for school communications. If you do not agree to this please advise us of this now.

10. If you provide the School with personal information of others (such as doctors or emergency contacts) we encourage you to inform them that you are disclosing that information to the School and why.

DECLARATION

I/We declare that the information provided in this enrolment form is true and correct to the best of our knowledge.

Mother’s/ Guardian’s name

Signature (Mother/Guardian) Date

Father’s/Guardian’s name

Signature (Father/Guardian) Date

STUDENT IMAGE CONSENT

Photographs of Students, examples of work done by students, and notices of academic, sporting or other school related achievements may from time to time, be included by the school in school publications, newsletters and publicity material (including material posted to the school’s website and social media) that is for the purpose of promoting the school. Should you wish to withhold consent, please attach a written statement to this effect.

I consent to the use of my child’s photograph, work and name for school marketing purposes.

Guardian’s name

Signature (Guardian) Date
WHAT HAPPENS NEXT

Once we are in receipt of the Application Form (along with the application fee in full) and the Enrolment Form, interviews will be arranged for the Student and their Parent/s and/or Guardian to meet with the Principal, the Class Teacher and/or Class Guardian.

A further meeting with the Business Manager may be required to discuss payment of School Fees. Parents are advised to familiarise themselves with the School Fee Policy, available on the school website at: http://www.sophiamundi.vic.edu.au/community/handbook-policies/ or to obtain a copy of the Fee Policy from the school office.

If the number of applications in any one year level exceeds the number of places available, it may be necessary for the school to take some of the under-mentioned factors into consideration in deciding priority for enrolment:

- Students who have siblings at the school
- Students who have attended the Little Sophia Kindergarten or previously attended the school
- Transfer from another Steiner School
- Application date
- Whether the Principal feels that the School’s program would make a marked contribution to the student’s growth and development
- Fee payment record
- Commitment of the family to the principles of Steiner education
- Any other special circumstances

Parents may be required to cover the cost of an initial extra lesson assessment or other recommended assessment before an enrolment is accepted.

When a place has been offered to the Student a formal letter of offer shall be issued. At this time you will receive an invoice for the Capital Fee (for all new families to the school only), Holding Bond Account Fee and the Term Fees. Payment of this invoice due within 14 days (or prior to commencement) is deemed as acceptance of the offer of a place at the school.

WHAT TO BRING TO THE INTERVIEW

- A copy of the student’s two most recent school reports
- A recent drawing
- All reports relevant to the Student’s enrolment including reports carried out by school or private clinicians
- Documentation that provides confirmation or details of any disability, physical or mental illness that the child is known to have and/or procedure that is to be followed if the child needs support at school
- A copy of the Student’s Birth Certificate
- A copy of the Student’s Immunisation Certificate
- An ID/Passport photo
- Completed and signed enrolment form (if not returned earlier)