

ENROLMENT APPLICATION

DETAILS OF DAUGHTER (Please complete in block letters)

FAMILY NAME: _____

GIVEN NAME/S: _____

DATE OF BIRTH: ___ / ___ / _____ COUNTRY OF BIRTH: _____

WE/I APPLY TO ENROL _____ AT AVE MARIA COLLEGE.

YEAR OF PROPOSED ENTRY: _____ ENTRY LEVEL: _____

WE/I UNDERSTAND THAT IF THE APPLICATION IS SUCCESSFUL THAT WE/I:

1. Will support the Catholic values of the College as expressed in the College Mission Statement.
2. Will have a contractual obligation to oblige by College Policies, rules and regulations.
3. Will support our/my daughter to comply with the rules and regulations for her conduct at the College.
4. Will support our/my daughter's participation in activities and events that the College deems are integral to the education it provides.
5. Have read and understand the Enrolment Policy and Standard Collection Notice available on the College website.*
6. Have read and understand the Fee Policy of the College, available on the College website.*
7. Accept to pay fees and levies as set by the Board of Governance.

FATHER'S/MALE GUARDIAN SIGNATURE: _____

MOTHER'S/FEMALE GUARDIAN SIGNATURE: _____

Signatures of both parents (or guardians) are required. If both parties are not signatories, then the signatory shall be solely responsible for the payment of all accounts.

The Enrolment Application Fee must accompany this application and is non-refundable. Payment can be made by Credit Card or by EFTPOS or cash at the College.

CREDIT CARD DETAILS: **Mastercard / Visa**

NAME ON CARD: _____

CARD NUMBER: _____ CCV: _____

EXPIRY DATE: ___ / ___

SIGNATURE: _____

AVE MARIA COLLEGE

ENROLMENT APPLICATION

OUR/MY DAUGHTER LIVES WITH:

- Both parents Mother Father Other

RESPONSIBILITY FOR PAYMENT OF SCHOOL FEES/LEVIES:

- Both parents Mother ____% Father ____%

MOTHER/FEMALE GUARDIAN'S CONTACT DETAILS

- Mrs Ms Other

SURNAME: _____

GIVEN NAME/S: _____

HOME ADDRESS: _____

POST CODE: _____

RELIGIOUS DENOMINATION: _____

PARISH: _____

HOME PHONE: _____

BUSINESS PHONE: _____

MOBILE PHONE: _____

EMAIL: _____

OCCUPATION: _____

EMPLOYER: _____

OCCUPATIONAL GROUP:

(SELECT FROM TABLE BELOW)

- Group A Group B
 Group C Group D

FATHER / MALE GUARDIAN'S CONTACT DETAILS

- Mr Other

SURNAME: _____

GIVEN NAME/S: _____

HOME ADDRESS: _____

POST CODE: _____

RELIGIOUS DENOMINATION: _____

PARISH: _____

HOME PHONE: _____

BUSINESS PHONE: _____

MOBILE PHONE: _____

EMAIL: _____

OCCUPATION: _____

EMPLOYER: _____

OCCUPATIONAL GROUP:

(SELECT FROM TABLE BELOW)

- Group A Group B
 Group C Group D

OCCUPATIONAL GROUP - PLEASE SELECT A GROUP THAT BEST DESCRIBES YOUR EMPLOYMENT.

GROUP A Senior Management in Large Business Organisation, Government Administration, Defence and Qualified Professionals.

GROUP B Other Business Managers, Arts/Media/Sportspersons and Associate Professionals.

GROUP C Tradesmen/women, Clerks and Skilled Office, Sales and Service Staff.

GROUP D Machine Operators, Hospitality Staff, Labourers, Drivers, Mobile Plant, Production/Processing Machinery Operators.

SCHOOL EDUCATION

(WHAT IS THE HIGHEST LEVEL OF SCHOOLING COMPLETED)

- Year 12 or equivalent Year 11 or equivalent
 Year 10 or equivalent

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EDUCATIONAL QUALIFICATION

(WHAT IS THE HIGHEST QUALIFICATION COMPLETED?)

- Bachelor Degree or above
 Diploma/Advanced Diploma
 Certificate I to IV (including Trade Certificate)
 No post school qualification

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MOTHER/FEMALE GUARDIAN'S DETAILS

COUNTRY OF BIRTH: _____

NATIONALITY: _____

LANGUAGE BACKGROUND: _____

FORMER COLLEGIAN: Yes No

MAIDEN NAME: _____

YEAR LEVEL AND YEAR OF DEPARTURE: _____

FATHER / MALE GUARDIAN'S DETAILS

COUNTRY OF BIRTH: _____

NATIONALITY: _____

LANGUAGE BACKGROUND: _____

FAMILY INFORMATION

Sister/s enrolled or previously attended Ave Maria College. Please include Year Level upon departure.

NAME: _____ YEAR LEVEL: _____ YEAR: _____

NAME: _____ YEAR LEVEL: _____ YEAR: _____

OTHER CHILDREN IN FAMILY: _____ MALE / FEMALE: _____

_____ MALE / FEMALE: _____

1. IS YOUR DAUGHTER

An Australian Citizen? Yes No

An Aboriginal or Torres Strait Islander? Yes No

A Permanent Resident of Australia? Yes No

Certified copy of permanent residency document attached Yes No - Return application

2. PRESENT SCHOOL: _____

3. RELIGIOUS DENOMINATION: _____

4. SCHOOLS ATTENDED PRIOR TO PRESENT SCHOOL FROM TO GRADE / S

5. LANGUAGES SPOKEN AT HOME: _____

6. COMMUNITY, SPORTS AND CULTURAL INTERESTS: _____

SPECIAL NEEDS? This information assists the school to identify its capacity to meet your daughter's needs.

Yes (Please identify below) No

Chronic Health Physical Disability Hearing Impairment Vision Impairment

Intellectual Disability Social/emotional Severe Language Disorder

Has your daughter received Catholic Education Office Melbourne funding through the Student with Disabilities (SWD) program? Yes No

Is your daughter still receiving funding? Yes No

HAS YOUR DAUGHTER RECEIVED ANY ASSISTANCE WITH

Reading Recovery: Year _____

Assistance with Literacy: Year _____

Assistance with Numeracy: Year _____

DATE OF MOST RECENT ASSESSMENT: _____ TYPE OF ASSESSMENT: _____

EXTENSION PROGRAM: _____ YEAR: _____

PLEASE SPECIFY: _____ TYPE OF ASSESSMENT: _____

CHECKLIST - HAVE YOU INCLUDED THE FOLLOWING?

- Enrolment Form
- Enrolment Application Fee
- Copy of Birth Certificate
- Copy of Baptism Certificate
- Copies of Sacramental Certificates

OFFICE USE ONLY

APPLICATION RECEIVED AT COLLEGE ___/___/___

1. APPLICATION FEE RECEIVED: Yes No - Return application

2. ATTACHMENTS INCLUDED: Yes No - Return application

3. STUDENT OFFERED PLACE IN YEAR: _____ ON ___/___/___

PRINCIPAL'S SIGNATURE: _____

4. ENROLMENT DEPOSIT RECEIVED: Yes No

5. FAMILY LOAN RECEIVED: Yes No

(Enrolment is not confirmed until the Enrolment Deposit and the Family Loan are received.)

6. DATE OF LEAVING SCHOOL: ___/___/___

IMMEDIATE DESTINATION ON LEAVING SCHOOL: _____

Endorsement by Parish Priest

I endorse this Enrolment Application for entry into Ave Maria College for the following applicant:

First Name: Surname:

Parish Priest's Signature: Date:

Parish Stamp: