Form to Enr	oi in	ıa	VIC	cori	lan	Go	ver	nm	ent	5c	nooi
BACCHUS MARS	H PRI	MAF	RY SC	CHO	OL						
Student Enrolment Informa	ition – 20	26	OFFICE	E USE	ONLY	CASI	ES21 St	udent l	ID:		
The information requested in the educational needs of your		require	ed for en	rolment	purpos	es. This	informa	tion is c	ollected	to plan	for and support
This form should be comple esponsibility of the person enrolment process. Parents unable to be shared between	completing or carers	ng this	form to	consu	lt with a	II other	adults	that nee	ed to be	involve	ed in the
required information is not principal is required to conside	provided o	or there ent's ec	is a disp ducation	oute be and we	tween p	arents o	or carers ciding w	s about hether t	a child's o defer	s enrolm or accep	ent, the enrolling of the enrolment.
only one enrolment form shou place for your child at the sp										nt form, y	ou are accepting
Il schools across Australia an equirement of the Commonwe ustralian Education Regulation	ealth Gove										
STUDENT DET	AILS										
Surname:											
First Given Name:											
Second Given Name: (if app	olicable)										
Preferred First Name: (if ap	plicable)										
◆ Gender:	Female		Self-des	cribed:							
Date of Birth: (dd-mm-yyyy)	/	/		Stud	ent Mol	oile Nur	nber: (if	applica	ble)		
Intended start date:											
☐ Day 1, Term 1				Other:	(dd-mm	- <i>yyyy</i>)_	/		/		
Which year are you seeking	g to enrol	l this st	tudent?								
☐Foundation ☐1 ☐2	 3	4	5	6	7	□8	1 9	1 0	□ 11	1 2	Ungraded
Student's Permanen											
our child's permanent resider n equal amount of time at two ne designated neighbourhood	addresse	es, both	are con	sidered	end the r their pe	najority ermanen	of their o	lays dur s and yo	ing the s our child	chool w will be	eek. If they spend entitled to enrol in
he school may make enquirie commission office or the Victo re any regulations/codes limit edroom unit.	rian Electo	oral Cor	nmission	head o	office; ch	ecking v	with a re	al estate	agent;	or check	ing whether there
No. & Street Address:											
Suburb:											
					1						

Postcode:

State:

How often does this student live at this address? Always Mostly Balanced (50%) If the student lives at another address during the school week, please provide further details including the address, who they reside with and how many days a week the student lives there:						
If the student lives at another address during the school week, please provide further details including the address,						
Siblings						
A sibling is defined broadly and can include step-siblings and students residing together as part of a multiple family cohabitation or out-of-home-care arrangements, including foster care, kinship care, permanent care and residential care.						
Does the student have any siblings at this school?						
Name Current Reside at same residential addres Year Level as the student						
Year Level as the student Tyes No Sometimes						
2 Yes No Sometimes						
Yes No Sometimes						
4 Yes No Sometimes						
PARENT/CARER DETAILS						
Enrolling Adult 1 Enrolling Adult 2						
Title Title						
First Given Name First Given Name						
Surname Surname						
☐ Male ☐ Female ☐ Male ☐ Female						
Gender Self-described: Gender Self-described:						
Adult 1 Relationship to student: Adult 2 Relationship to student:						
□ Parent □ Step Parent □ Parent □ Relative						
☐ Host Family ☐ Relative ☐ Host Family ☐ Friend						
Self (adult student / mature minor) Friend Friend Other:						
□ Foster Parent □ Other: □ Step Parent						
Student lives with Adult 1: Student lives with Adult 2:						
□ Always □ Mostly □ Always □ Mostly						
□ Always □ Mostly □ Always □ Mostly □ Balanced (50%) □ Occasionally □ Balanced (50%) □ Occasionally						
Balanced (50%) Occasionally Balanced (50%) Occasionally						
Balanced (50%) Occasionally Address is the same as Enrolling Adult 1 No. & Street Address: No. & Street						
Balanced (50%) Occasionally Address is the same as Enrolling Adult 1 Occasionally Address is the same as Enrolling Adult 1						

Adult 1 Job Title:		Adult 2 Job Title:				
Adult 1 Employer:		Adult 2 Employer:				
In which country was Adult 1 born?		In which country was Adult 2 born?				
☐Australia ☐ Other (please specify):		☐ Australia ☐ Other (ple	ease specify):			
Does Adult 1 speak a language other that home?	n English at	♦ Does Adult 2 speak a la home?	anguage other than English at			
☐No, English only		■ No, English only				
☐Yes (please specify):		☐ Yes (please specify):				
Please indicate any additional languages spoken by Adult 1:		Please indicate any additional languages spoken by Adult 2:				
Is an interpreter required?	□No	Is an interpreter required?	☐Yes ☐No			
What is the highest year of primary or secondary school that Adult 1 has complet	red?	♦ What is the highest year	ar of primary or secondary			
Year 12 or equivalent Year 11 or		☐ Year 12 or equivalent	Year 11 or equivalent			
Year 10 or equivalent	·	☐ Year 10 or equivalent	Year 9 or equivalent or below / no schooling			
What is the level of the highest qualificated has completed?	ion that Adult	What is the level of the 2 has completed?	highest qualification that Adult			
☐ Bachelor degree or above ☐ Advanced of Diploma	diploma /	☐ Bachelor degree or abov	/e Advanced diploma / Diploma			
☐ Certificate I to IV ☐ No non-sch (including trade certificate) qualification	nool	Certificate I to IV (including trade certificate)	☐ No non-school qualification			
 What is the occupation group of Adult 1 Please select the appropriate current parental group from the attached list at the end of the control of the person is not currently in paid work job in the last 12 months, or has retired in months, please use their last occupation the attached list. If the person has not been in paid work for the last 12 months, enter 'N'. 	occupation document. but has had a the last 12 to select from	group from the attached lis If the person is not cui job in the last 12 mont	ate current parental occupation at at the end of the document. Trently in paid work but has had a ths, or has retired in the last 12 eir last occupation to select from the paid work for			
What is the main		What is the main				
language spoken between the student		language spoken between the student				
and adult at home?		and adult at home?				
Preferred language of communications:		Preferred language of communications:				
Is Adult 1 interested in being involved in school group participation activities? (e.g., School Council, excursions)	□No	Is Adult 2 interested in being involved in school group participation activities? (e.g., School Council, excursions)	□Yes □No			

Home Phone: Home Phone: Home Phone: Home Phone:	2 usually home chool hours?	Yes	□No				
	none:						
Work Phone: Work Phone:	one:						
Mobile: Mobile:							
SMS Notifications: Yes No SMS Noti	ifications:	□Yes	□No				
Email Address: Email Ad	ldress:						
Email Notifications: Yes No Email No	tifications:	Yes	□ No				
method of contact:	preferred of contact:	Mobile	☐ Email				
	nall be used for ication that cannot ia phone)	☐ Home Phone	■ Work Phone				
special conditions or special c	any other conditions or ated to contact?						
Please provide emergency contacts in the event that the enrolling parents/carers are unavailable. Please ensure those listed as emergency contacts are aware that their information has been provided for this purpose. Name Relationship Neighbour, Relative, Friend or Other (please specify) Telephone Contact Write E for English							
1 2							
3 4							
Billing Details You are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extracurricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees . Send bills to: (select one)							
Name to be used for all billing correspondence:							
No. & Street or PO Box							
Suburb:							
State: Postco	ode:						
Billing Email:							
Note: If you would like to send bills to another person / address, please ensure Additional Parent/Carer details are completed on pages 13-15.							
* Note: If you would like to send bills to another person / address, please ensure Additional Parent/Ca							
* Note: If you would like to send bills to another person / address, please ensure Additional Parent/Ca							

Additional Parents/Carers

Are there additional par	rents/carers in the student's life?	☐Yes (provide details below)	□No	(move to next section)
Name of Adult 3:				
Name of Adult 4:				
may request a separate four further parents/care	ne Adult 3 and/or Adult 4 sections a form for additional parents/carers fors.			
♦ In which country was	s the student born?			
☐ Australia	Other (please specify	/):		
If born overseas, on wh	at date did the student arrive in Au	ıstralia? (dd-mm-yyyy)	_	
What is the student's re	esidency status? *			
☐ Australian citizen – ho	lds Australian Passport	Permanent Resident (pr	ovide visa	a details below)
☐ Australian citizen – eli	gible for Australian Passport	☐ Temporary Resident (pr	ovide visa	details below)
☐ New Zealand citizen				
Visa Sub Class:		Visa Expiry Date: (dd-mm-yy)	'y)	
Visa Statistical Code: (Required for some sub-classes)			
	cate does not guarantee Australian residency assport-how-it-works/documents-you-need/ci		ailable at	
Does the student hold a	a Bridging Visa?	☐Yes (provide further deta	ail below)	□No
If Yes, what was the stu	ident's previous visa?			
If Yes, what visa has th	e student applied for?			
International Student IE	o*: (Not required for exchange studen	ts)		
Note: If you are unsure of your international@education.vic.gov	International Student ID, please contact the I	nternational Education Division via pho	ne (03 9084	8497) or email
Does the student speak	English?		Yes	□No
❖ Does the student spe	eak a language other than English a	at home?		
■No, English only				
Yes (please specify th	e main language spoken at home): _			
♦ Is the student of Abo	original or Torres Strait Islander ori	gin?		
□No		☐Yes, Aboriginal		
☐ Yes, Torres Strait Islar	nder	☐Yes, Both Aboriginal &	Γorres Str	ait Islander
Is the student a young	carer (providing support/care for o	ther family member/s)? *	Yes	□No
A volume cores in a volume name				2 1 20 1

^{*} A young carer is a young person under 25 years of age who provides, or intends to provide care, assistance, or support to a family member with a-mental illness, physical illness, disability, chronic illness, or who is aged or has an addiction.

		rangements?						
	_	ers together at the	☐ Student lives	with each parent/carer at different times				
same residence Student lives v	vith one parent/	carer only	<u>_</u>	ed Out of Home Care*				
☐ Informal care a		·	_	☐ Student is independent				
☐ Homeless			_					
If the student has	s a Case Mana	ner nlease provide	their contact details below:					
ii the student na	s a case mana,	ger, piedae provide	their contact details sciow.					
relatives or friends (kins	hip care), living wit	h non-relative families (fo	oster care or adolescent community p	ordered care arrangements include living with placements) and living in residential care units.				
_		= -	s of those orders to the school with th	s Statutory Declaration, which must be completed. is form.				
How will the stud	dent primarily t	ravel to and from s	chool?					
Walking	School Bus	Train	☐ Driven by parent/carer	☐Taxi / Ride Share				
Bicycle	Public Bus	Tram	Self-Driven	Other:				
If the student cat		ansport to school,						
what station/stop If the student dri		urney commence: o school, what is						
their Car Registr	ation Number:							
SCHOOL DETAILS								
			Life Water 2					
Are you seeking	to enrol the st	udent at this schoo	I full-time? Yes (move to	next section) No				
Are you seeking	to enrol the st	udent at this schoo	e attending this school?	next section) No				
Are you seeking	to enrol the st	udent at this schoo	e attending this school?	next section)				
Are you seeking	to enrol the st	udent at this schoo	e attending this school?	next section)				
Are you seeking	to enrol the st days a week w ason you are s	udent at this schoo rould the student be eeking part-time en	e attending this school?	next section) No				
Are you seeking If No, how many If No, provide rea	to enrol the str days a week w ason you are so	udent at this schoo rould the student be eeking part-time en	e attending this school? rolment: Days /	Has enrolment □Yes □No				
Are you seeking If No, how many If No, provide rea	to enrol the structure days a week we ason you are setails for other structure.	udent at this schoo rould the student be eeking part-time en	Days / week: Days /	Has enrolment been accepted? Has enrolment □Yes □No				
Are you seeking If No, how many If No, provide rea If No, provide de Other school nan Other school nan	to enrol the str days a week we ason you are se tails for other s me:	udent at this schoo rould the student be eeking part-time en schools:	Days / week: Days / week:	Has enrolment been accepted? Has enrolment been accepted? Yes No				
Are you seeking If No, how many If No, provide rea If No, provide de Other school nan Other school nan	to enrol the str days a week we ason you are se tails for other s me:	udent at this schoo rould the student be eeking part-time en schools:	Days / week: Days /	Has enrolment been accepted? Has enrolment been accepted? Yes No				
Are you seeking If No, how many If No, provide rea If No, provide de Other school nan Other school nan Previous Edu	to enrol the structure days a week we ason you are so tails for other some: ne: ucation - S	eeking part-time en	Days / week: Days / week:	Has enrolment been accepted? Has enrolment been accepted? Yes No For the First Time				
Are you seeking If No, how many If No, provide rea If No, provide de Other school nan Other school nan Previous Edu Is the student att	to enrol the structure days a week we ason you are setails for other structure. The control of the structure days a week week week week week week week we	eeking part-time en	Days / week: Days / week: Days / week:	Has enrolment been accepted? Yes No Has enrolment yes No Has enrolment yes No For the First Time				
Are you seeking If No, how many If No, provide rea If No, provide de Other school nan Other school nan Previous Edu Is the student att Name of kinderg	to enrol the structure days a week we ason you are so tails for other structure. The control of	ed kindergarten prochildhood service:	Days / week: Days / week: Days / week: Days / week:	Has enrolment been accepted? Has enrolment been accepted? Has enrolment been accepted? Yes No For the First Time undation? Yes No				
Are you seeking If No, how many If No, provide rea If No, provide de Other school nan Other school nan Previous Edu Is the student att Name of kinderg Note: A kindergarten p	to enrol the structure days a week we ason you are so tails for other structure. The control of	eeking part-time en schools: Students Enro ed kindergarten prochildhood service: ded and approved by the grams can be found at w	Days / week: Days / week: Days / week: Days / week: Use in Foundation for the year before For Victorian Government, has a play-ba	Has enrolment been accepted? Has enrolment been accepted? Has enrolment been accepted? Yes No For the First Time undation? Yes No				
Are you seeking If No, how many If No, provide rea If No, provide de Other school nan Other school nan Previous Edu Is the student att Name of kinderg	to enrol the structure days a week was a week was a son you are so tails for other some: Italis for o	eeking part-time en schools: Students Enro ed kindergarten prochildhood service: ded and approved by the grams can be found at w	Days / week: Days / week: Days / week: Days / week: Uling in Foundation for pagram* in the year before For pagram* in the year before For the pagram of the year before For the year befo	Has enrolment been accepted? Has enrolment been accepted? Has enrolment been accepted? Yes No For the First Time undation? Yes No				

If Yes, name of last school attended:					
If Yes, location of last school attended: (suburb/town/state/country)					
If Yes, date of attendance: (dd-mm-yyyy)		to / _			
If Yes, year levels of previous education:					
If the student studied overseas, what age start school?	did the student first				
What was the language of the student's pr	revious education?				
Period of interruption to education: (months/years)		Is the student repeat a year level?	ating \	Yes	□No
STUDENT MEDICAL DE	ETAILS				
Schools require the health information request	ed in this section to plan f	or and support the hea	alth and wellb	eing needs	s of
students. <u>Please note</u> : If there is a situation or incident w	vhich requires first aid to b	e administered to your	r child, schoo	l staff will a	dminister
first aid that is reasonably necessary and approattention for your child if it is considered reason	opriate to their level of train	ining. School staff will a	also seek em	ergency m	edical
unless the Department of Education is liable in attention, school staff will contact you as soon	n negligence (liability is not				
	as practically possible.				
Medical Conditions					
Does the student have an allergy? If yes, please provide the school with an ASC www.allergy.org.au/hp/ascia-plans-action-and		es (available at:	Yes	□No	
Is the student at risk of anaphylaxis?		_			
If yes, please provide the school with an ASC at: www.allergy.org.au/hp/anaphylaxis/ascia-at:			⁄es	□No	
Does the student have asthma?	 ⁄es	□No			
Has a current Asthma Action Plan been provide an Asthma Action Plan to the School		, please ☐Yes		ПNо	
www.asthma.org.au/treatment-diagnosis/asth					
Does the student have any other medical school needs to know about? If Yes, pleas be completed by the treating medical practition	se ask the school for the a	ppropriate medical adv		Yes	□No
If Yes to any of the above, please specify:		oi.			
Medication					
Does the student take medication?			□Yes	□No	
Is the medication required during school		1	-	= 1.1	
If Yes, please ask the school for a <u>Medication</u> treating medical practitioner and returned to s		mpleted by the	Yes	□No	
Name of medications taken:					

Student Doctor

Doctor's Name:							
Medical Centre:							
Street Address:							
Suburb:				Postcode:			
State:				Telephone Num	nber:		
ADDITIONAL LEARNING AND SUPPORT NEEDS The Department of Education recognises that adjustments may be required for students with additional needs, including students with disability, so that they can participate at school. School personnel and parents or carers work together to identify the adjustments that may be needed to meet the student's learning and support needs.							
Does the student have a	additional n	eeds and rec	quire support	for learning?	Yes	□No	
Hearing: Vision: Does the student have additional needs in any of the following areas? Physical: Cognitive/Learning: Social/Emotional:			☐ Yes (please specify): ☐ Yes (please specify):				
Has the student had a dassessment before?	lisability	□ No □ Yes (specify outcome):					
Has the student receive individualised disability before?		□No □Yes (plea	ease specify):				
Has any previous education provider prepared a documented plan to support the student's additional learning needs?		rovide details):					
Please indicate any adju	ustments th	at may assis	it the student	to participate at	school:		

Allied Health Support

Has the student previo	usly accessed	support from an allied h	nealth profession	al?			
Occupational therapy:	1	Exercise physiology		Speech pathol	ogy		
☐Yes ☐ No	0 [⊒Yes □N	No	□Yes	□No		
Name and contact deta	ails:	Name and contact detail	s:	Name and con	tact details:		
Physiotherapy	1	Behaviour support		Other			
☐Yes ☐ No	0 [□Yes □N	No	□Yes	□No		
Name and contact deta	ails:	Name and contact detail	s:	Name and con	tact details:		
STUDENT SAFETY, ACCESS AND SPECIAL CIRCUMSTANCES Student Risk The Department of Education has a responsibility to assess and manage risk of harm to its staff and students. By providing information about your child, you will help facilitate their transition to school and ensure their safety. This may involve preparing a behaviour management plan or other appropriate strategies to meet the particular needs of the student.							
		in the student's history a risk of any type to this					
□Yes	<u> </u>	, , , , , , , , , , , , , , , , , , ,	☐ No (move to				
If Yes, please provide further detail:							
Court Orders and	Court Orders and Other Care Arrangements (previously referred to as an Access Alert)						
Is there an intervention	n order, parent	ing order or any other co	ourt order impact	ing the student	?		
□Yes			☐ No (move to	the next section)			
If Yes, then complete the f	following question	ons and present a curre n	t copy of the doc	ument to the so	chool.		
Court Order or other	☐ Family Law	V Order / Parenting Order	☐ Parenting Pla	n / Agreement	☐Intervention Order		
access document type:	☐Child Prote	ection Order	☐ DFFH Author	isation	□Other:		
		Court Order or other acc			–		
End Date (if applicable):				, 5	,		

Activity Restrictions and Considerations

Are there any activities (organised by the school and/or third parties) that the student cannot participate in?				
□Yes	☐ No (move to the next section)			
If Yes, please provide further detail: (e.g. sport, excursions)				

Privacy Statement

The personal and health information collected in this form, and any attachments, is required for enrolment at all Victorian Government Schools. The information is collected to ensure accurate enrolment, and to plan for and support the educational needs of students. The information will be managed securely and accessed only by staff, on a need-to-know basis, and in accordance with the Department of Education Schools' Privacy Policy which applies to all government schools (available at: www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx) or where mandated or allowed by law.

Please also refer to the Victorian Government School Privacy Collection Notice for details on handling of personal and health information in schools: www.education.vic.gov.au/Pages/Schools-Privacy-Collection-Notice.aspx

DECLARATION

Thank you for completing this Student Enrolment form. The information provided is required to enable staff to properly enrol your child at our school as such it is important that it is accurate and up to date.

I/We confirm that:

- I am/We are the person/people named as completing this form.
- The information in this form is true and correct.
- I/We agree to authorise this form by electronic means with an electronic signature.

Signature of Enrolling Adult:	Date:	/	_/			
Signature of Enrolling Adult (if applicable):	_ Date:	/	/			
Please select the category that best describes who has signed and completed this form with the enrolment process.	. This will a	assist th	e school			
☐Both parents/carers have completed and signed this form.						
☐Parents/carers are completing separate forms (schools can provide additional forms on req	uest).					
One parent has completed and signed this form on behalf of both parents. Contact details for	or the other	parent h	ave been			
provided in the form for the school's use as required.						
☐One parent has completed and signed this form and the contact details for the other parent are unknown to the enrolling						
parent/carer and not provided.						
☐There is only one parent/carer with legal responsibility for the child and that person has completed and signed this form.						
Other, please specify: (for instance, where the contact details for the other parent are know safe to contact them)	n but it is no	ot approp	riate or			

If there are any court orders about the child, please provide copies of those orders to the school with this form.

WHO CAN SIGN THIS FORM?

- A person with parental responsibility: a parent of a child under 18 years of age, subject to relevant court orders
 (including parenting orders made under the Family Law Act 1975 and protection orders made under the Children, Youth
 and Families Act 2005 by the Children's Court, or other person granted parental responsibility under a relevant court
 order).
- A carer formally authorised by Child Protection to enrol the student: the Department of Families, Fairness and Housing (DFFH) can issue a written authorisation to the carer of a child in out of home care to make decisions about the child. In some circumstances this will include specific authorisation to enrol the child at school.
- Informal carer: an Informal Carer is a relative or other responsible adult with whom the child lives, and who has day to
 day care of the child. The informal carer should provide an Informal Carer Statutory Declaration to confirm their status as
 an informal carer. A copy of this statutory declaration can be obtained from www.education.vic.gov.au/PAL/informal-carer-statutory-declaration-template.pdf
- Students living independently: If the student is an adult or a mature minor for the purpose of enrolment and they live
 independently. These students will need to be considered in accordance with the www.education.vic.gov.au/pal/decision-making-responsibilities-students/policy policy.
- Adult Students: a student 18 years of age or older is considered an adult and can sign their own consent form.

ATTACHMENT 1 – PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. Please indicate your current occupation – not your qualification. This information is used for determining funding allocations to schools.

Group A: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation

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:

- Health, Education, Law, Social Welfare, Engineering, Science, Computing professional
- Business (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)
- Air/sea transport (aircraft / ship's captain / officer / pilot, flight officer, flying instructor, air traffic controller)

Group B: 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, proofreader, sportsman/woman, coach, trainer, sports official)

Associate Professionals - generally have diploma / technical qualifications and support managers and professionals:

- Health, Education, Law, Social Welfare, Engineering, Science, Computing technician / associate professional
- Business / administration (recruitment / employment / industrial relations / training officer, marketing / advertising specialist, market research analyst, technical sales representative, retail buyer, office / project manager)
- Defence Forces senior Non-Commissioned Officer

Group C: Tradespeople, clerks and skilled office, sales and service staff

Tradespeople generally have completed a 4-year Trade Certificate, usually by apprenticeship. All tradespeople 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, stores / inventory clerk, purchasing / order clerk, freight / transport / shipping clerk, bond clerk, customs agent, customer services 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 / childcare worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

Group D: 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, nurseryman, 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

ATTACHMENT 2 – ADDITIONAL PARENT/CARER DETAILS

Enrolling Adult 3

Enrolling Adul	t 3	1	Enrolling Adult	4			
Title			Title				
First Given Name			First Given Name				
Surname			Surname				
Gender	Male Fen		Gender	■ Male ■ Female ■ Self-described:			
Adult 3 Relationsh	in to student:		Adult 4 Relationsh	in to student:			
Parent	Relative		Parent	Relative			
— ☐Host Family	— ☐Friend		☐ Host Family	Friend			
Foster Parent	Other:		☐Foster Parent	Other:			
Step Parent	_		Step Parent				
Student lives with	Adult 3:		Student lives with	Adult 4:			
Always	■ Mostly		□Always	Mostly			
☐Balanced (50%)	Occasionally		Balanced (50%)	Occasionally			
No. & Street Address:			Address is the same as Enrolling Adult 3	Yes No (complete below)			
			No. & Street Address:				
Suburb:			Suburb:				
State:	Postcode		State:	Postcode			
Adult 3 Job Title:			Adult 4 Job Title:				
Adult 3 Employer:			Adult 4 Employer:				
		_					
In which country w	as Adult 3 born?		In which country was Adult 4 born?				
Australia Ot	her (please specify):		Australia Other (please specify):				
Does Adult 3 spendome?	eak a language other than E	English at	Does Adult 4 spending	eak a language other than English at			
☐ No, English only			☐No, English only				
Yes (please spec	ify):		☐Yes (please spec	ify):			
Please indicate any additional languag spoken by Adult 3:	es		Please indicate any additional languag spoken by Adult 4:	es			
Is an interpreter required?	□Yes	□No	Is an interpreter required?	☐Yes ☐No			

What is the highest year of primary or secondary school that Adult 3 has completed?			What is the highest year of primary or secondary school that Adult 4 has completed?				
Year 12 or equivalent	Year 11	or equivalent		Year 12 or equivalent	☐ Year 1	1 or equiv	alent
Year 10 or equivalent	Year 9 o	r equivalent or schooling		Year 10 or equivalent	☐Year 9 obelow / no	-	
What is the level of the h 3 has completed?	nighest qualifi	cation that Adult		What is the level of the h 4 has completed?	ighest qualifi	cation th	at Adult
☐Bachelor degree or above	Advance Diploma	ed diploma /		Bachelor degree or above	Advance Diploma	ed diplom	ıa /
Certificate I to IV (including trade certificate)	☐No non-s qualification			Certificate I to IV (including trade certificate)	☐No non- qualificatio		
 What is the occupation group of Adult 3? Please select the appropriate current parental occupation group from the attached list at the end of the document. 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 their last occupation to select from the attached list. If the person has not been in paid work for the last 12 months, enter 'N'. 			 What is the occupation group of Adult 4? Please select the appropriate current parental occupation group from the attached list at the end of the document. 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 their last occupation to select from the attached list. If the person has not been in paid work for the last 12 months, enter 'N'. 				
			1 1				
What is the main language spoken between the student and adult at home?				What is the main language spoken between the student and adult at home?			
Preferred language of communications:				Preferred language of communications:			
Is Adult 3 interested in being involved in school group participation activities? (e.g., School Council, excursions)	□Yes	□No		Is Adult 4 interested in being involved in school group participation activities? (e.g., School Council, excursions)	□Yes		No
Con una contrat Adult 2			1	Con via contact Adult 4			
Can we contact Adult 3 during school hours?	Yes	□No		Can we contact Adult 4 during school hours?	Yes	□No	
Is Adult 3 usually home during school hours?	Yes	□No		Is Adult 4 usually home during school hours?	Yes	□No	
Home Phone:				Home Phone:			
Work Phone:				Work Phone:			
Mobile:				Mobile:			
SMS Notifications:	Yes	□No		SMS Notifications:	Yes	□No	
Email Address:				Email Address:			
Email Notifications:	Yes	□No		Email Notifications:	Yes	□No	
Adult 3's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	☐ Mobile ☐ Home Phone	□ Email □ Work Phone		Adult 4's preferred method of contact: (Email shall be used for communication that cannot be sent via phone)	Mobile Home Phone	□ Ema	ail k Phone
Specify any other special conditions or times related to contact?				Specify any other special conditions or times related to contact?			

Billing DetailsYou are not required to make payments or voluntary financial contributions to your school. Schools may request payments for extracurricular items and activities. For more information, please refer to www.vic.gov.au/school-costs-and-fees.

Send bills to: (select one)	Adult 3	Adult 4	Another person / address* (co	mplete details below)
Name to be used for all billin	g correspondence:			
No. & Street or PO Box				
Suburb:				
State:			Postcode:	
Billing Email:				
* Note: If you would like to send bills to	another person / address,	please ensure Additional	Parent/Carer details are completed on	pages 16-17.
Correspondence Deta	ails			
Send correspondence addre	ssed to: (select one)	Adult 3	Adult 4 Both Adu	ılts Neither

ATTACHMENT 3 - TRAVEL ASSISTANCE AND PROGRAMS

Conveyance Allowance Program

The Conveyance Allowance Program supports eligible families attending mainstream schools in rural and regional Victoria, and special schools (state-wide) with financial assistance towards the cost of transporting students to and from school.

Is the student applying	g for the Conveyance Allow	ance Program?				
□Yes	☐Yes ☐No (proceed to next question)					
further information, inclu	Your school can provide the applicable application form and advice on the different types of conveyance available. For further information, including the conveyance allowance policy and application forms, refer to the Department's Policy and Advisory Library (PAL) here: www.education.vic.gov.au/pal/conveyance-allowance/policy					
School Bus Prog	ram					
have access to public trar Travel by bus to special s	assists families in rural and rasport. The program supports chools is provided through the rest will pay a fare to travel. Y	s travel to student e Students with D	s nearest government and Disabilities Transport Progra	non-government school. am (see below). Travel to a		
Is the student applying	g for the School Bus Progra	am?				
☐Yes (see text below)			No (proceed to next quest	tion)		
further information, inclu	Your school can provide the relevant application form and advice on travel type (free travel, pre-school, fare payer etc.) For further information, including the School Bus Program policy refer to the Department's PAL here: www.education.vic.gov.au/pal/school-bus-program/policy					
appropriate government s	ities Transport Program assis pecial school. The program s conveyance allowances that i	supports travel for	students within Designate	ed Transport Areas. Families		
Is the student applying	g to travel on a school bus	or other travel a	ssistance?			
☐Yes (read below text)			□No			
Students with Disabilitie	the relevant application form s Transport Program policy, I au/pal/transport-students-disa	refer to the Depar		information, including the		
First date of travel?	☐ Next school year	☐ Alternate d	ate: (dd-mm-yyyy)/	/		
Type of travel assistar	nce requested?					
☐Access to School Bus	S		☐Conveyance Allowance	e		
If applicable, specify the	he student's mode of assis	ted mobility.	Wheelchair	□Walker		
Comments relevant to	travel:					

ATTACHMENT 4 – OFFICE USE ONLY SECTION

Child's Name sighted:	OFFICE USE ONLY						
Student Email Address: Australian residency confirmed:	Child's Name sighted:	□Yes	□No	Enrolment Date:			
Student Email Address: Australian residency confirmed: Yes No Not sighted / provided	1101110		House:	Campus:			
Date of birth confirmed:							
Does the student have a Disability ID	Australian residency confirmed:	□Yes	□No	☐ Not sighted / provided			
Does the student have a Victorian Student Number (VSN)? Yes, please specify:	Date of birth confirmed:						
Yes, please specify:							
Yes, please specify:	Does the student have a Victorian Stu	dent Number (VSN)?					
Learning and Development Statement been	☐Yes, please specify:	Yes, but th	e VSN is unknown				
Are there any Notice/s on the Immunisation History Statement: Does the student have asthma, allergies or anaphylaxis? Does the student need to take medication during school hours? *Have the required medical forms been provided to the school? *Note: Additional forms including student medical advice and condition forms can be found here: Medical Advice Forms Can the student Individual Education Plan include travel training? Is the student attending their nearest school? Does the student reside in Designated Transport Area (if attending special school)? Can the student be accommodated on an existing route (if applicable)? Pick-up Point: Map Ref: Time AM: Set Down Point: Current Court Order or other access document placed on student file? Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet	Learning and Development Statement	hoon Li Yes, via in					
Immunisation History Statement:	Immunisation Certificate received:	☐Yes – Up to date	Yes – Not up to dat	te			
allergies or anaphylaxis? Does the student need to take medication during school hours? *Have the required medical forms been provided to the school? *Note: Additional forms including student medical advice and condition forms can be found here: Medical Advice Forms Can the student Individual Education Plan include travel training? Is the student attending their nearest school? Does the student reside in Designated Transport Area (if attending special school)? Can the student be accommodated on an existing route (if applicable)? Pick-up Point: Map Ref: Time AM: Set Down Point: Map Ref: Time PM: Current Court Order or other access document placed on student file? Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet		□Yes	□No				
*Have the required medical forms been provided to the school? *Note: Additional forms including student medical advice and condition forms can be found here: Medical Advice Forms Can the student Individual Education Plan include travel training?		□Yes	es				
provided to the school? *Note: Additional forms including student medical advice and condition forms can be found here: Medical Advice Forms Can the student Individual Education Plan include travel training? Is the student attending their nearest school? Does the student reside in Designated Transport Area (if attending special school)? Can the student be accommodated on an existing route (if applicable)? Pick-up Point: Set Down Point: Map Ref: Time AM: Map Ref: Time PM: Current Court Order or other access document placed on student file? Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet	Does the student need to take						
*Note: Additional forms including student medical advice and condition forms can be found here: Medical Advice Forms Can the student Individual Education Plan include travel training?	*Have the required medical forms bee	n Yes	□No	□N/A – no medical conditions			
Is the student attending their nearest school? Does the student reside in Designated Transport Area (if attending special school)? Can the student be accommodated on an existing route (if applicable)? Pick-up Point: Set Down Point: Map Ref: Time AM: Map Ref: Time PM: Current Court Order or other access document placed on student file? Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet							
Does the student reside in Designated Transport Area (if attending special school)? Can the student be accommodated on an existing route (if applicable)? Pick-up Point: Set Down Point: Map Ref: Time AM: Map Ref: Time PM: Current Court Order or other access document placed on student file? Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet	Can the student Individual Education Plan include travel training? ☐ Yes ☐ No						
School)? Can the student be accommodated on an existing route (if applicable)? Pick-up Point: Set Down Point: Map Ref: Time AM: Map Ref: Time PM: Current Court Order or other access document placed on student file? Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet	Is the student attending their nearest	school?	□Yes	S □No			
Pick-up Point: Set Down Point: Map Ref: Time AM: Map Ref: Time PM: Current Court Order or other access document placed on student file? Yes No Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet		I Transport Area (if atte	nding special Yes	S □No			
Set Down Point: Map Ref: Time PM: Current Court Order or other access document placed on student file? Yes No Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet	Can the student be accommodated or	an existing route (if ap	plicable)?	S □No			
Current Court Order or other access document placed on student file? Yes No Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet	Pick-up Point:		Map R	Ref: Time AM:			
Additional notes regarding the student's enrolment: (e.g., note if student information or documentation is missing and yet	Set Down Point:		Map R	Ref: Time PM:			
	Current Court Order or other access of	locument placed on stu	dent file? Yes	□No			
		t's enrolment: (e.g., not	e if student information or	documentation is missing and yet			



Information and Communication Technologies

Information and Communication	Technologies are a priority at	BMPS as we value our students being

able to use the digital and interactive tools of today's society. Students need to be taught how to make critical choices about the media and tools best suited to particular situations.

BMPS has formulated an Acceptable Use Policy, in line with the Department of Education and Training requirements, which are attached for you to read through.

Also attached is a computer user agreement and permission forms. Please read and discuss this with your child, sign where appropriate, and return with your enrolment.

If you have any queries about this permission form please contact our office.

Thank you in anticipation of your co-operation.

Dear Parents and Carers,

Melinda Williams Daniel Morris

Principal eLearning Co-ordinator

56 Lerderderg Street, Bacchus Marsh 3340 – Ph: 03 5367 2745 – Fax: 03 5367 5757 Email: bacchus.marsh.ps@education.vic.gov.au – Web: www.bacchusmarshps.vic.edu.au





School profile statement

At Bacchus Marsh Primary School we support the right of all members of the school community to access safe and inclusive learning environments, including digital and online spaces. This agreement outlines the School's roles and responsibilities in supporting safe digital learning, as well as the expected behaviours and expectations we have of our students when using digital or online spaces.

At our School we:

- have a Student Engagement Policy that outlines our School's values and expected student behaviour. This Policy includes online behaviours;
- have programs in place to educate our students to be safe and responsible users of digital technologies within classroom discussions and whilst following Bacchus Marsh Primary School's eSafety scope and sequence;
- educate our students about digital issues such as online privacy, intellectual property and copyright;
- supervise and support students using digital technologies in the classroom;
- use clear protocols and procedures to protect students working in online spaces. This includes
 reviewing the safety and appropriateness of online tools and communities, removing offensive
 content at the earliest opportunity, and other measures;
 - See: <u>Duty of Care and Supervision</u> (www.education.vic.gov.au/about/programs/bullystoppers/Pages/prindutycare.aspx)
- provide a filtered internet service to block inappropriate content. We acknowledge, however, that full protection from inappropriate content cannot be guaranteed;
- use online sites and digital tools that support students' learning;
- address issues or incidents that have the potential to impact on the wellbeing of our students;
- refer suspected illegal online acts to the relevant Law Enforcement authority for investigation;
- support parents and care-givers to understand safe and responsible use of digital technologies and the strategies that can be implemented at home. The following resources provide current information from both the Department of Education & Training and The Children's eSafety Commission:
 - Bullystoppers Parent Interactive Learning Modules
 - o <u>iParent | Office of the Children's eSafety Commissioner</u>





Safe, responsible behaviour, Prep - Grade 6

When I use digital technologies I communicate respectfully by:

- always thinking and checking that what I write or post is polite and respectful;
- being kind to my friends and classmates and thinking about how the things I do or say online might make them feel;
- not sending mean or bullying messages or forwarding them to other people;
- creating and presenting my own work, and if I copy something from online, letting my audience know by sharing the website link to acknowledge the creator.

When I use digital technologies I **protect personal information** by being aware that my full name, photo, birthday, address and phone number is personal information and is not to be shared online. This means I:

- protect my friends' information in the same way;
- protect my passwords and don't share them with anyone except my parents/carers;
- only ever join spaces with my parents/carers or teacher's guidance and permission;
- never answer questions online that ask for my personal information;
- know not to post three or more pieces of identifiable information about myself.

When I use digital technologies I **respect myself and others** by thinking about what I share online. This means I:

- stop to think about what I post or share online;
- use spaces or sites that are appropriate, and if I am not sure, I ask a trusted adult for help;
- protect my friends' full names, birthdays, school names, addresses and phone numbers because this is their personal information;
- speak to a trusted adult if I see something that makes me feel upset or if I need help;
- speak to a trusted adult if someone is unkind to me or if I know someone else is upset or scared;
- don't deliberately search for something rude or violent;
- turn off or close the screen if I see something I don't like and tell a trusted adult;
- am careful with the equipment I use.

I will use this knowledge at school and everywhere I use digital technologies.





BYOD Program, Grades 4-6

BRING YOUR OWN DEVICE (BYOD):

Year levels from Grade 4-6 participate in our school's BYOD program. As part of the program, all students in these year levels are expected to:

- bring their device into the classroom at the beginning of each day and ensure it is safely and securely stored;
- ensure their device is working correctly;
- ensure their device is charged every day and has sufficient battery power to work throughout the day;
- ensure their device does not contain any inappropriate, offensive or any other content which they
 would not be comfortable for a teacher or parent to see. Students are expected to show any content
 on their device to teachers if requested;
- only use their device for school-related educational purposes while at school;
- only use their device under the supervision of a teacher whilst at school;
- keep their device secured in the classroom's designated storage area when not in use;
- take full responsibility for the safety and security of their device at all times;
- use their device in accordance with the 'Using Technology' section of this policy (see below);
- fulfill the expectations of students outlined in the Information Booklet;
- allow the school to re-image their device for any reason (full memory, virus etc) This will involve the
 deletion of any personal files and downloads that have been added and re-installation of the school's
 software package only.

The school does not take any responsibility for the loss or damage of any personal items, including electronic devices (computers, phones, etc).

Devices can be purchased through the BMPS Order Portal: https://bmps.orderportal.com.au/

DAMAGED TECHNOLOGY:

In cases where the student has been responsible for damage to technology owned by the school or another student, the student and parents/carers may be asked to pay for the damage through associated repairs.

BYOD SPECIFIC SAFE AND RESPONSIBLE USE WHILE AT SCHOOL, STUDENTS MUST:

- fulfill their obligations under this policy and the BYOD Information Booklet;
- ensure no inappropriate or offensive digital content is downloaded or used at school;
- only take photos, sound or video recordings of people when they have received that person's consent and whilst under the direction of a teacher;
- handle technology with care and notify a teacher if any of the school's or their own technology is damaged or requires attention;
- never interfere with the school's network systems and security settings;
- not access the data of another user or attempt to login with a username or password that is not their own;
- avoid downloading or installing unauthorised software (including games) onto school/personal devices:
- Ensure online 'chat' facilities or social networking websites are only used under the direction and direct supervision of a teacher;
- not deliberately damage hardware or make changes to the configuration of a device.





Signature

I understand and agree to comply with the Terms of Acceptable Use and Expected Standards of Behaviour set out within this agreement.

I understand that there are actions and consequences established within the school's Student Engagement Policy if I do not behave appropriately.

Student name:	
Student signature:	
Parent/Guardian Name:	
Parent/Guardian Signature: _	
Date:	



Dear Parents,

To help make the transition to school a smooth one, we are asking all Prep parents to complete this information form and return it to school along with the enrolment for your child. This information is confidential and allows us to receive important information about your child. It is used by our Prep teachers to aid them in making the best possible placement for your child in their class.

Thank	you to	or your	co-ope	ration.

Melinda Williams

Principal

PREP - ENROLMENT INFORMATION

Child's Name:
Parent's Name/s:
Name of Pre-School or Day Care Centre attended:
Phone number of Centre:
Name of Pre-school Group or teacher:





Photographing, Filming and Recording students at Bacchus Marsh Primary School

Annual Consent Form and Collection Notice

During the school year there are many occasions and events where staff may photograph, film or record students participating in school activities and events. We do this for many reasons including to celebrate student participation and achievement, showcase particular learning programs, document a student's learning journey/camps/excursions/sports events and to communicate with our parents and school community in newsletters and on classroom blogs or apps.

This notice applies to photographs, video or recordings of students that are collected, used and disclosed by the school. We ask that any parents/carers or other members of our school community photographing, filming or recording students at school events (eg concerts, sports events etc) do so in a respectful and safe manner and that any photos, video or recordings ("images" of students are not publicly posted (eg to a social media account) without the permission of the relevant parent/carer.

If you do not understand any aspect of this notice, or you would like to talk about any concerns you have, please contact our school on (03) 5367 2745 or bacchus.marsh.ps@edumail.vic.gov.au.

A. Use or disclosure within the school community

<u>Unless you tell us otherwise below,</u> images of your child may be used by our school within the school community, as described below.

Photographs, video or recordings of students may be used within the school community in any of the following ways:

- in the school's communication, learning and teaching tools for example, emails, classroom blogs or apps that can only be accessed by students, parents/carers or school staff with passwords eg Compass, Seesaw, Google Classrooms, Class Dojo etc
- for display in school classrooms, on noticeboards etc
- documenting student's learning journey eg portfolios, camps, excursions, sports events etc
- to support student's health and wellbeing eg photographs of pencil grip to assist in OT assessments

B. Use or disclosure in publications/locations that are publicly accessible

<u>Unless you tell us otherwise below</u>, photographs, video or recordings of students may also be used in publications that are accessible to the public, including:

- on the school's website, including in the school newsletter which is publicly available on the website
- on the school's social media accounts

• in the school magazine

Your child may be identified by first name only in these images (or not named at all).

We will notify you individually if we are considering using any images of your child for specific advertising or promotional purposes.

Privacy

Photographs, video and recordings of a person that may be capable of identifying the person may constitute a collection of 'personal information' under Victorian privacy law. This means that any images of your child taken by the school may constitute a collection of your child's personal information. The school is part of the Department of Education and Training (**the Department**). The Department values the privacy of every person and must comply with the *Privacy and Data Protection Act 2014* (Vic) when collecting and managing all personal information. For further information see <u>Schools' Privacy Policy</u> (http://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx).

Ownership and Reproduction

Copyright in the images will be wholly owned by the school. This means that the school may use the images in the ways described in this form without notifying, acknowledging or compensating you or your child.

Opt Out

Bacchus Marsh Primary School understands that parents and carers have the right to withhold permission for our school to use photographs, video or recordings of your child (apart from circumstances where the school is not required to seek consent – see *our Photographing, Filming and Recording Students Policy*.

If you have read this notice and are comfortable with the school using photos, video or recordings of your child as described above, you do not need to take any further action.

However, if you have decided that you **do not** want images of your child to be collected or used by our school, **please complete the form below** and return it to the school office. Please note that it may not be possible for the school to amend past publications or to withdraw images that are already in the public domain.



2026 Photographing, Filming and Recording students at Bacchus Marsh Primary School

Annual Consent Form and Collection Notice

	I <u>do not consent</u> to Bacchus Marsh Primary School using photos, child (named below) to appear in the following ways:		
Use within the school community (eg in the school's communication, learning and teaching tools, on display around the school, documenting student's learning journey, to support student health and wellbeing)			
Use in publications/locations that are publicly accessible (eg on the school's website, on the school's social media accounts, in promotional material for the school)			
ote that you may	choose to opt out of both or only one type of use.		
	n is available in the Bacchus Marsh Primary School Photographing, ding Students Policy		
Student			
f parent/carer			
е			
	/		
	Use within the and teaching to journey, to sup Use in publicate website, on the school) ote that you may wither information		