



3 Year Old Pre-Kindergarten

2020 APPLICATION FORM

Today's Date _____

| CHILD'S DETAILS | |
|--|--|
| Surname | Given Name(s) |
| Date of Birth | Gender <input type="checkbox"/> M <input type="checkbox"/> F |
| Language(s) spoken at home other than English | |
| Australian Citizen: <input type="checkbox"/> Y <input type="checkbox"/> N | If No, Visa Type and Number: |
| Do you identify as an Aboriginal or Torres Strait Islander: <input type="checkbox"/> Y <input type="checkbox"/> N | |
| ALLERGIES/DIETARY REQUIREMENTS/SPECIAL NEEDS | |
| Does your child have any allergies, dietary requirements, behavioral or special needs? <input type="checkbox"/> Y <input type="checkbox"/> N | |
| If yes, please specify: | |
| | |

| SCHOOL HISTORY |
|---------------------------------------|
| Why have you chosen to apply at HRSS? |
| How did you hear about our School? |



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| APPLICATION DETAILS | | | |
|--|---------------------------------|--|---|
| Start Year: | <input type="checkbox"/> 2020 | <input type="checkbox"/> 2021 | <input type="checkbox"/> 2022 <input type="checkbox"/> 2023 |
| Start Term: | <input type="checkbox"/> Term 1 | <input type="checkbox"/> Term 2 | <input type="checkbox"/> Term 3 <input type="checkbox"/> Term 4 |
| I/WE ARE COMMITTED TO A STEINER EDUCATION FOR OUR CHILD FOR | | | |
| <input type="checkbox"/> Pre-Kindergarten Only | | <input type="checkbox"/> Up to Kindergarten / Pre-Primary Only | |
| <input type="checkbox"/> Primary School | | | |
| PARENT 1/GUARDIAN 1 DETAILS | | | |
| Relationship to Child | | | |
| Surname | | First Name | |
| Address | | | |
| Home / Mobile | | Work / Mobile | |
| Email | | Occupation | |
| Highest School Level | | Secondary Education | |
| Skills and other interests (eg for volunteer hours)? | | | |
| PARENT 2/GUARDIAN 2 DETAILS | | | |
| Relationship to Child | | | |
| Surname | | First Name | |
| Address | | | |
| Home / Mobile | | Work / Mobile | |
| Email | | Occupation | |
| Highest School Level | | Secondary Education | |
| Skills and other interests (eg for volunteer hours)? | | | |
| ADDITIONAL INFORMATION | | | |
| Family / Custody / Court / Restraining Order <input type="checkbox"/> Y <input type="checkbox"/> N (If Yes, please provide School with a copy) | | | |
| Child primarily resides with: | | | |
| Family Contact Person for School Communications: | | | |
| Family Contact Person Responsible for Payment of Fees (name, email and phone details required if not already listed above): | | | |



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| EMERGENCY CONTACT DETAILS/AUTHORITY TO COLLECT | | | |
|--|--|-----------------------|--|
| Name | | Relationship to Child | |
| Phone | | Address | |
| Name | | Relationship to Child | |
| Phone | | Address | |
| Name | | Relationship to Child | |
| Phone | | Address | |

| MEDICAL DETAILS | |
|--|--|
| Child's Medicare Number and Expiry Date | |
| Family Doctor / Clinic Name | |
| Address | |
| Phone No | |
| Has your child received all scheduled Immunisations? <input type="checkbox"/> Y <input type="checkbox"/> N <i>(Copy required with Application)</i> | |

| SIBLINGS | |
|---------------|--------|
| Name | |
| Date of Birth | School |
| Name | |
| Date of Birth | School |
| Name | |
| Date of Birth | School |

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PRIVACY NOTICE

INFORMATION COLLECTION NOTICE:

- 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. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the School to provide schooling to the pupil and to enable them to take part in all the activities of the School.
- Some of the information we collect is required to satisfy the School's legal obligations and compliance, particularly in enabling the School to discharge its duty of care.
- Laws governing or relating to the operation of a school require certain information to be collected and disclosed. These include relevant Education and Care Acts, Education Acts, Public Health and Child Protection laws.
- Health information about pupils is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. We may ask you to provide medical reports about pupils from time to time.
- The School may from time to time disclose personal and sensitive information to other parties for administrative and educational purposes, for example completing an Education Department census or facilitating the transfer of a pupil to another school. This may also include, government departments, medical practitioners, and people providing services to the School, including specialist visiting teachers, sports coaches, volunteers and counsellors.
- Personal information collected from pupils is regularly disclosed to their parents or guardians.
- The School's Privacy Policy sets out how parents or pupils may seek access to personal information collected 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 a breach of the School's duty of care to the pupil, or where pupils have provided information in confidence.
- The School Privacy Policy also sets out how you may complain about a breach of privacy and how the School will deal with such a complaint.
- As you may know the School from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the School's fundraising activities solely for that purpose. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
- On occasions, information such as academic and sporting achievements, pupil activities and similar news is published in School newsletters and magazines [and on our website]. Photographs of pupil activities such as festivals, school camps and school excursions may be taken for publication in School newsletters and magazines and on our website.
- We may include pupils' and pupils' parents' contact details in a class list and School directory.
- If you provide the School with the 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, that they can access that information if they wish and that the School does not usually disclose this information to third parties.



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PERMISSIONS

By signing below, I/we confirm that:

- details provided in this application form are true and correct. And that I/we will notify the school of any changes as soon as practicable.
- I/we understand and accept that the completion of this application/enrolment form does not guarantee an enrolment. Successful applicants will be determined in accordance with the school's enrolment criteria.
- I/we are committed to supporting the provision of Steiner education for our child, both financially and pedagogically and understand that continued enrolment is dependent on this support being provided.
- I/we acknowledge that Helena River Steiner School follows the Australian Steiner Curriculum Framework which has been recognized by the Federal and State Governments.
- I/we understand that the curriculum meets the same outcomes as the Australian Curriculum but there may be differences concerning when some content is covered which may have implications for our child if transferring from/to a Steiner school, particularly in the early years.
- I/we authorise Helena River Steiner School to seek medical, dental and ambulance treatment for my child in an emergency. I/we authorise Helena River staff to administer prescribed medication to my child supplied by me/us to the doctor's specifications.
- I/we give permission for Helena River to administer homeopathic remedies or paracetamol in the event my child presents with a fever and listed contacts are unreachable.
- I/we will advise Helena River of any allergies / additional needs / requirements / waivers / special permissions in writing or via email.
- I/we give permission for my child to go on regular walks in the local vicinity with the full supervision of staff.
- On acceptance of an enrollment I/we and/or our child may have our photo taken during sessions or festivals through the year. I/we agree for any photos taken to be used by Helena River Steiner School through the means of our website, newsletter, social media or promotional materials.
- I/we understand that once offered a place and enrolled, this enrolment will be ongoing for the remainder of the year. If I/we wish to withdraw our child, one full term's notice must be given or one term's equivalent fees will be charged in lieu. I/we agree to make term fee payments by the specified time and that failing to make those payments, will incur a higher rate. Furthermore, any costs incurred by chasing unpaid fees will be borne by us.

| | |
|-----------------------------|-----------------------------|
| Mother/Guardian's Signature | Father/Guardian's Signature |
| Date | Date |



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| PAYMENT | | | |
|---|--------------|---|---|
| In order to register a student for enrolment, an Application Form must be completed and a fee of \$50.00 paid (at time of lodgement) . This fee is non-refundable and covers the administration costs associated with enrolments and interviews. | | | |
| Account Details: Helena River Steiner School | BSB: 633-000 | Acct: 152498994 | Description: Child Surname and First Name |
| Receipt Number: | | <input type="checkbox"/> Cash <input type="checkbox"/> Bank Transfer | Payment made by: |
| OFFICE USE ONLY: | | | |
| Application received on: | | | |
| Amount Received: | | Receipt Number: | |
| Comments: | | | |
| CHECKLIST | | | |
| Application Fee Paid? Copy of receipt included? | | | <input type="checkbox"/> Y <input type="checkbox"/> N/A |
| Copy of Child's Birth Certificate provided (if not born in Australia, proof of Citizenship or Residency to be provided)? | | | <input type="checkbox"/> Y <input type="checkbox"/> N |
| Copy of Child's Passport and Visa if not Australian Citizen provided? | | | <input type="checkbox"/> Y <input type="checkbox"/> N/A |
| Copy of Child's Immunization Record or Conscientious Objection letter provided? | | | <input type="checkbox"/> Y <input type="checkbox"/> N |
| Copy of Family / Court / Order documents provided? | | | <input type="checkbox"/> Y <input type="checkbox"/> N/A |