

|  |
| --- |
| DOCUMENTS TO BE RETURNED TO BELLFIELD COLLEGE |
| STUDENT FULL NAME: |  **YEAR & LEVEL APPLYING TO:**  |
| 1. Student Enrolment Application Form
 |  |
| 1. Birth Certificate OR Passport
 |  |
| 1. Immunisation Record
 |  |
| 1. Pre-School / School Reports
 |  |
| 1. NAPLAN Results (if applicable)
 |  |
| 1. Copy of Visa (if applicable)
 |  |
| 1. Student Medication Plan (e.g. Asthma Plan, Anaphylaxis Plan) (if applicable)
 |  |
| 1. Specialist Reports (if applicable)
 |  |
| 1. Direct Debit Form
 |  |
| 1. Passport Photo
 |  |



**[Bellfield College](http://www.bellfield.nsw.edu.au/%22%20%5Ct%20%22_blank)**
29-31 Rossmore Avenue West
Rossmore NSW 2557
**Telephone:** 02 9606 2666

**Email:** enrolment@bellfield.nsw.edu.au

**BELLFIELD**

**COLLEGE**

ABN 75 116 583 834

STUDENT ENROLMENT FORM

Is the student Aboriginal or Torres Strait Islander origin?

No Yes, Torres Strait Islander

Yes, Aboriginal Yes, both Aboriginal and Torres Strait Islander

***LANGUAGES SPOKEN AT HOME***

***STUDENT DETAIL***

Is the student an Australian citizen or permanent resident?

 CITIZEN PERMANENT RESIDENT NEITHER

If neither, please state Visa number.

 COPY OF VISA ATTACHED

DATE OF BIRTH: GENDER:

COUNTRY OF BIRTH: CITY:

NATIONALITY: CULTURE/ETHNICITY:

STUDENT’S RELIGION:

PROPOSED YEAR OF ENTRY: FOR YEAR LEVEL:

FAMILY NAME: GIVEN NAME/S:

PREFERRED NAME:

Does the student speak a language other than English at home?

 No, English only

 Yes, other (Please specify)

Main language spoken at home:

Special family circumstances include a single parent, dual custody, foster care, court orders, access restrictions etc. Please provide details of the circumstances.

Are supporting documents attached? Yes No

***SPECIAL FAMILY CIRCUMSTANCES***

NAME FOR CORRESPONDENCE:

e.g. Mr & Mrs Smith

RESIDENTIAL ADDRESS

RMB/P.O. BOX

HOME PHONE STUDENT MOBILE

 Postcode:

Postcode:

***STUDENT’S HOME ADDRESS***

|  |  |  |
| --- | --- | --- |
| Name of School | Years Attended | Location of School |
|  |  |  |
|  |  |  |

Please provide the name and details of any school where the student has previously been enrolled (NSW interstate or overseas) starting with the most recent. If more space is required, please attach a page to the back of this enrolment form and mark as “Previous schools attended”.

***PREVIOUS SCHOOLS ATTENDED***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Gender (M/F) | Date of Birth | Name | School Attending |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |

***CHILDREN IN THE FAMILY (include student being enrolled)***



**PARENTAL POST-SCHOOL EDUCATION**

What is the level of the highest qualification the student’s Parent / Guardian 1 has completed?

 Bachelor’s Degree or above Certificate I to IV (including Trade Certificate)

 Advanced Diploma/ Diploma No non-school qualification

**PARENTAL SCHOOL EDUCATION**

What is the highest year of primary or secondary school the student’s Parent / Guardian 1 has completed?

 Year 12 or equivalent Year 10 or equivalent

 Year 11 or equivalent Year 9 or below

**EMPLOYMENT DETAILS**

 Employed Unemployed Self Employed

**OCCUPATION:**

Please specify business type if self-employed

What is the Occupation Group of the student’s Parent / Guardian 1.

(write 1, 2, 3, 4 , or 8) (See Parental Occupation Groups at the last page of this form ) :-

Please select the appropriate parental occupation group from the list provided on the last page. If the person is not currently in paid work but has a job or 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, please write “8” in the box above.

TITLE: Mr Mrs Ms Other

RELATIONSHIP TO CHILD

FAMILY NAME: GIVEN NAME:

DATE OF BIRTH: COUNTRY/CITY OF BIRTH:

CULTURE/ETHNICITY: RELIGION:

MOBILE TELEPHONE NO: WORK TELEPHONE NO:

EMAIL ADDRESS:

(Please provide personal email address ONLY)

Does the parent speak a language other than English at home? No, English only

 Yes other (Please specify)

Main language spoken at home:

***PARENT / GUARDIAN 1 DETAILS (Residing at the same address as the student)***

*This must be the legal guardian of the child residing at the same address as the child*

**PARENT/GUARDIAN DETAILS**



**PARENTAL POST-SCHOOL EDUCATION**

What is the level of the highest qualification the student’s Parent / Guardian 2 has completed?

 Bachelor’s Degree or above Certificate I to IV (including Trade Certificate)

 Advanced Diploma/ Diploma No non-school qualification

**PARENTAL SCHOOL EDUCATION**

What is the highest year of primary or secondary school the student’s Parent / Guardian 2 has completed?

 Year 12 or equivalent Year 10 or equivalent

 Year 11 or equivalent Year 9 or below

**EMPLOYMENT DETAILS**

 Employed Unemployed Self Employed

**OCCUPATION:**

Please specify business type if self-employed

What is the Occupation Group of the student’s Parent / Guardian 2.

(write 1, 2, 3, 4 , or 8) (See Parental Occupation Groups at the last page of this form ):-

Please select the appropriate parental occupation group from the list provided on the last page. If the person is not currently in paid work but has a job or 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, please write “8” in the box above.

TITLE: Mr Mrs Ms Other

RELATIONSHIP TO CHILD

FAMILY NAME: GIVEN NAME:

DATE OF BIRTH: COUNTRY/CITY OF BIRTH:

CULTURE/ETHNICITY: RELIGION:

MOBILE TELEPHONE NO: WORK TELEPHONE NO:

EMAIL ADDRESS:

(Please provide personal email address ONLY)

Does the parent speak a language other than English at home? No, English only

 Yes other (Please specify)

Main language spoken at home:

***PARENT / GUARDIAN 2 DETAILS (Residing at the same address as the student)***

*This must be the legal guardian of the child residing at the same address as the child*



**PARENTAL POST-SCHOOL EDUCATION**

What is the level of the highest qualification the Student’s Parent/Guardian 3 has completed?

 Bachelor’s Degree or above Certificate I to IV (including Trade Certificate)

 Advanced Diploma/ Diploma No non-school qualification

**EMPLOYMENT DETAILS**

 Employed Unemployed Self Employed

**OCCUPATION:**

Please specify business type if self-employed

What is the Occupation Group of the Student’s Parent/Guardian 3?

(write 1, 2, 3, 4 , or 8) (See Parental Occupation Groups at the last page of this form):

Please select the appropriate parental occupation group from the list provided on the last page. If the person is not currently in paid work but has a job or 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, please write “8” in the box above.

**PARENTAL SCHOOL EDUCATION**

What is the highest year of primary or secondary school the Student’s Parent/Guardian 3 has completed?

 Year 12 or equivalent Year 10 or equivalent

 Year 11 or equivalent Year 9 or below

TITLE: Mr Mrs Ms Other

RELATIONSHIP TO CHILD:

FAMILY NAME: GIVEN NAME:

DATE OF BIRTH: COUNTRY/CITY OF BIRTH:

CULTURE/ETHNICITY: RELIGION:

MOBILE TELEPHONE NO: WORK TELEPHONE NO:

EMAIL ADDRESS:

(Please provide personal email address ONLY)

Does the parent speak a language other than English at home? No, English only

 Yes other (Please specify)

Main language spoken at home:

***PARENT / GUARDIAN 3 DETAILS (Residing at the same address as the student)***

*This must be the legal guardian of the child residing at the same address as the child*

Emergency Contact Name:

Home Telephone Number:

Work Telephone Number:

Mobile Telephone Number:

Relationship to Student:

(**Grandparent, older brother or sister, uncle, aunt, neighbour)**

Does this emergency contact have a provisional or unrestricted driver’s license? Yes No

Consent to pick up student if parents cannot be contacted or are unable to pick up the student: Yes No

***ALTERNATIVE EMERGENCY CONTACT (CANNOT BE THE PARENTS / GUARDIANS)***

Please nominate a person who may be contacted in the event of an emergency if the parent/s cannot be contacted.

Ideally the contact person should be someone who lives in the neighbourhood of the school.

Emergency Contact Name:

Home Telephone Number:

Work Telephone Number:

Mobile Telephone Number:

Relationship to Student:

**(Grandparent, older brother or sister, uncle, aunt, neighbour)**

Does this emergency contact have a provisional or unrestricted driver’s license? Yes No

Consent to pick up student if parents cannot be contacted or are unable to pick up the student: Yes No

***EMERGENCY CONTACT ( CANNOT BE THE PARENTS / GUARDIANS)***

Medicare Number: Expiry date:

**Ambulance**:

I give permission for Bellfield College to phone the Ambulance in case of an emergency, bearing in mind that all costs associated must be paid by the parent/guardian. Yes No

**MEDICAL CONDITIONS:**

Please specify any Medical Conditions the school should be aware of including any daily medication to be taken by the student.

*Please provide the name, address and phone number of any other doctor or medical specialist who may currently be treating your child for any allergy or other medical condition you may list when completing this section. Attach an additional page if required.*

|  |  |  |  |
| --- | --- | --- | --- |
| Allergy/medical condition | Doctor’s name | Address | Telephone |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

***If your child has a documented plan to support any health or medical needs from a previous school or organisation (e.g. preschool, occasional care, etc) please provide it to the school as an attachment to this form.***

**ALLERGIES – these can include allergies to insect stings, drugs, latex, food (e.g. nuts, eggs, peanuts) or other.**

*If your child has an allergy, please specify in the box below. For this allergy, answer the 11 questions that follow (where applicable).*

*If there is insufficient space, please attach additional pages clearly marked ‘ALLERGIES’.*

*For any* ***additional allergies*** *your child has****, please answer each of the 11 questions*** *(where applicable) on a separate page for each allergy. Attach this additional information (clearly marked ‘ALLERGIES) to the back of this form.*

**Allergy to**

1. Has a doctor diagnosed this allergy? Yes No
2. Is this a severe allergy (anaphylaxis)? Yes No

***Anaphylaxis is a severe, potentially life-threatening, allergic reaction.***

1. Has your child been hospitalized with a severe allergic reaction (anaphylaxis) or any other allergy?

 Yes No

1. If yes, which hospital?
2. Does your child have an ASCIA Action Plan for Anaphylaxis? Yes No
3. If yes, is this plan attached? Yes No

Practice Name: Doctor’s Name:

Practice Address:

Practice Phone: Consent to contact Doctor/Practice Yes No

***STUDENT’S MEDICAL AND WELLBEING DETAILS***

1. Has your child been prescribed an adrenaline autoinjector (ie EpiPen®)? Yes No

***If your child has been prescribed an adrenaline autoinjector, you will need to provide the school with one (and renew prior to expiry date).***

***Each time your child is prescribed a new adrenaline autoinjector the doctor should issue an updated ASCIA Action Plan for Anaphylaxis. It is important that any updated plan is provided to the school.***

1. What is the expiry date of the adrenaline autoinjector that will be provided to the school? /

***If not known at the time of completing this form, the school will require this information on enrolment.***

1. Does your child have an ASCIA Action Plan for Allergic Reactions? Yes No
2. If yes, is this plan attached? Yes No

***It is important that any updated plan is provided to the school.***

1. Please list any other medication prescribed for this allergy

***The school will require further details in relation to prescribed medication on enrolment.***

***Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form. Information is also available on the Department’s website.***

**MEDICAL CONDITIONS OTHER THAN ALLERGIES AND ANAPHYLAXIS**

**(eg asthma, severe asthma, diabetes, epilepsy)** Yes No

*Please identify and provide details below of any other medical condition for which your child is being treated. (If more than one condition or insufficient space, please attach additional pages and include answers to all 7 questions that follow).*

**Medical condition**

1. Has a doctor diagnosed this condition? Yes No

2. Has your child been hospitalized with this condition? Yes No

3. If yes, which hospital?

4. Does your child have a documented action plan from a doctor (e.g. asthma action plan)? Yes No

5. If yes, is this plan attached? Yes No

6. Is your child taking prescribed medication for this condition? Yes No

7. If yes, what is the prescribed medication?

The school will require further details in relation to prescribed medication on enrolment.

**Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form.**

*Bellfield College has a responsibility to assess and manage any risk of harm to its staff and students. This application gives you the opportunity to provide the school with information that will help facilitate the smooth transition of the student into the school setting. This may include preparing a behavior management plan or other appropriate strategies directed at meeting the particular needs of the student. The action taken in response to the information you provide will help ensure the safety of this student, other students and staff.*

To your knowledge, is there anything in the student’s history or circumstances (including medical history not listed in the previous section) which might pose a risk of any type to this student, other students, or staff at this school?

 Yes No

*If yes, please provide a brief description of the student’s medical or other history which might pose a risk of any type to him or her, other students, or staff at this school.*

*Please provide names and contact details of health professionals or other relevant bodies that have knowledge of these issues.*

Does the student have any history of violent behavior? Yes No

If yes, please provide details.

Has the student ever been suspended or expelled from any previous school? Yes No

*If yes, was this for:*

Actual violence to any person? Yes No

Possession of a weapon or any item used to cause harm or injury? Yes No

Threats of violence or intimidation of staff, students, or others at the school? Yes No

Illegal drugs? Yes No

Are you aware of any other incidents of the kind listed above in which the student has been involved outside of the school setting?

 Yes No

If yes, please provide a brief outline of these incidents.

***STUDENT’S HISTORY RELEVANT TO RISK ASSESSMENT***



**BELLFIELD**

**COLLEGE**

Terms and Conditions of

Enrolment at Bellfield College

Effective 16th April 2021

If offered a place, parents will be required to agree to the Terms and Conditions of Enrolment applicable at the time. The current Terms and Conditions are:

**Age Requirement**

1. Students enrolling at our College will be required to provide proof of age (indicating that they have turned 5 years of age by the **1st of May** of that year) an immunisation certificate, and proof of any previous Schooling. This will be checked and may apply to students enrolling up to Year 3.
2. No students over the age of 18 are permitted to enrol in grades below Year 10.

**Fees**

1. The Enrolment Fees is payable upon acceptance of the student and are non-refundable whether or not a student takes up a position at the School.
2. The School requires the Enrolment Fee to be paid for the first child in a family for the amount of $400 and subsequent children will pay $200.00 (Total $600 per family)
3. If amendments are made to the date of a student’s enrolment, two amendments will be permitted by the School free of charge, if a place in the requested Year Group is available. Any additional amendments will incur an Amendment Fee of $220 per amendment, payable at the time of amendment.
4. All fees are due on receipt of account. All signatories to the original Acceptance of Offer of a Confirmed Place are jointly and severally liable for the payment of fees and disbursements incurred on behalf of their children.
5. Parents must pay:
	1. all fees for tuition, activity fees, elective subjects, co-curricular sport, and other activities as determined by the School
	2. Enrolment Fees
	3. School Bus Fees
6. The School may incur expenditure on behalf of the parents from time-to-time as the School considers necessary. These charges may be added to the parents’ School account and will be payable as the invoice falls due.
7. All medical and ambulance expenses incurred on behalf of the student must be reimbursed to the School.
8. For students whose parents reside outside Australia, and who are not full fee-paying students on a 500 Student Visa, a Tuition Bond equivalent to 25% of the annual Tuition Fee is payable. The prepaid Bond will be credited towards the final term’s fees. If parents return

to live in Australia during their child’s time at Bellfield College, the Bond will continue to be held until the end of that current term.

1. If fees and/or charges are not paid in full within 30 days of the due date, an Administration Fee is charged, based on the loss suffered by the School as the result of late payment. The rate of the Administration Fee as it applies from time-to-time, may be obtained from the Finance Department.
2. If an account for fees and/or charges is not paid in full within 60 days from its due date, the student’s enrolment may be suspended unless formal arrangements for payment have been approved by the School. The School may subsequently, without further notice, refuse entry to the student or terminate thier enrolment.
3. A Tuition Fee discount on tuition fees apply for students of current fee paying students and for the children of the approved account. The Sibling Discount does not apply to families in receipt of Clergy discount. The Scholars Discount is subject to application and approval by the School.
4. A full school term’s notice in writing must be given to the Principal before any student is removed, or their status changed. The notice must be given no later than one week prior to the end of the preceding term. If this notice is not given, 25% of the annual Tuition Fee will be charged.
* For students in Year 6 and Year 10, the required notice period is two full school terms. Should this notice not be given in writing, 50% of the annual Tuition Fee, will be payable, other than in exceptional circumstances.
1. No remission of fees, either in whole or in part, will be made if the student is absent due to illness, leave or suspension.
2. If a student is expelled from the School following disciplinary action, fees will be refunded pro rata.

**Change of Status**

1. Temporary Long Absence is leave for a period of 12 months or less. Written requests for Temporary Long Absence must be approved by the Principal. Full fees are applicable for the time the student is absent or her / his place may be forfeited, unless the Principal, in his/ her absolute discretion, agrees otherwise.
2. Long Absence is leave for a period of 12 months or more. A full term’s notice in writing is required for Long Absence and must include a statement of intent to return. Full fees are payable to the end of the current year of departure. If a place is to be held by the School, then half fees are payable until the beginning of the year of return, when full fees will apply. If a place is not held, parents must contact the School in writing requesting the calendar year and school year of return. If a place is available, an Application Fee is charged. Full fees will be payable from the beginning of the school year of re-entry.

**Students’ Obligations**

1. Students are required to have high standards of behaviour and:
2. Always behave courteously and considerately to each other and to staff
3. Support the goals and values of the School
4. Attend and, if required, participate in:
5. Illuminations Services and Assemblies
6. the School sports program
7. important School events such as the Presentation Ceremony or other events determined by the Principal
8. camps and excursions that are an integral part of the School curriculum (School camps compulsory)
9. wear the School uniform as prescribed and follow conventional standards of appearance in accordance with the School’s guidelines and the expectation of the School community
10. attend the School during school hours, except in the case of sickness or where leave not to attend has been given.

**Parents’ Obligations**

1. **BOTH** parents are obligated to sign the enrolment form.
2. The parents:
3. must accept and abide by the requirements directions of the School Board and the Principal relating to the student or students generally and not interfere in any way with the conduct, management, and administration of the School
4. are required to support the goals, values and Islamic ethics and activities of the School
5. both parents/guardians are required to view the School’s Parent Portal on a regular basis and read the Weekly Newsletter
6. must advise the School in writing of any change of home, mailing, email address or contact details or other information on the Enrolment Application Form, within one month of such change. Applications and Reserved or Confirmed Offers may be cancelled if the School loses contact with the parent or has mail returned to it
7. must ensure the student has each item of officially required uniform, clean and in good repair, and all other requirements such as textbooks and stationery
8. should communicate with students, parents, visitors, and staff members in a courteous manner, and follow the communication guidelines laid down by the School from time-to-time
9. should use their reasonable endeavours to attend parent-teacher interviews and parent forums and participate in courses offered by the school which are relevant to the student’s education. ( Parent Information Evening – PIE Night )

**Parental Code of Conduct**

1. Parents must adhere to the School’s Parental Code of Conduct in force from time-to-time.

**Content of Courses**

1. The School determines which courses and activities are offered and/or provided at any time and which of these courses and activities are compulsory. These may be changed without notice.

**Leave**

1. Leave from School activities, including academic and cocurricular programs, and for early departure at the end of term and/or late return from breaks, is only granted in the most extreme cases and an Application for Exemption Attendance Form is to be submitted to the Principal.
2. Short Term Leave can be approved only for a maximum of 10 days per child per year. The Short-Term Leave needs to be pre-approved before any travel arrangement is confirmed. Parents must complete the Short-Term Leave Application Form one month prior to travel.

**Exclusion of Students**

1. The Principal may in his/her absolute discretion but subject to affording the student procedural fairness, suspend or dismiss the student:
2. for breaches of rules or discipline
3. for behaviour prejudicial to the welfare of the School, its staff or students
4. where parents have failed to comply with these Terms and Conditions of Enrolment.
5. The Principal also may exclude the student if the Principal considers that a mutually beneficial relationship of trust and cooperation between the parents and the School has broken down to the extent that it adversely affects that relationship.
6. The Principal may, upon giving reasonable notice, ask the parents to remove the student from the School at the end of a school year where the student has, in the Principal’s opinion, failed to meet the requirements of the NSW Education Standards Authority, or has otherwise failed to make satisfactory progress in her academic work.
7. If a parent fails to observe the Parental Code of Conduct after being warned about a breach, the School may terminate the enrolment of the student/s.

**Health and Safety**

1. Any special needs of a student or prospective student (including but not limited to, any medical, physical, learning or psychological needs) must be disclosed to the School. Where any disclosed special needs change or where any special needs arise, they must be advised to the School immediately.
2. Parents must accurately complete the student’s medical form prior to the commencement of enrolment and provide updates to the Administration Office as required by the School. Up-to-date immunisation records must also be provided.
3. The Principal or his/her delegate may search the student’s bag, locker or other possessions where there are reasonable grounds to do so, in order to maintain a safe environment for all students.
4. If the student is ill or injured, necessitating urgent hospital and/or medical treatment (for example injections, blood transfusions, surgery) and parents are not readily available to authorise such treatment, the Principal or, in his/her absence, a member of the Senior Executive Team, may give the necessary authority for such treatment. The parents indemnify the School, its employees and agents in respect of all costs and expenses arising directly or indirectly out of such treatment.
5. Parents must observe School security procedures for the protection of students.
6. The School does not accept any responsibility for loss or damages of the student’s personal property.

**Privacy**

1. In accepting these Terms and Conditions of Enrolment, the parents acknowledge that the School may from time-to-time collect personal information about parents and students, which may be necessary for the School’s function or activities and acknowledge having read the School’s Privacy Policy.
2. In order to facilitate the effective operation of the School, the participation of the student in School life and recognition of student activities and achievements, the School may take photographs and videos of the student for:
3. the school’s records
4. display from time to time around the school
5. publication in school magazines and newsletters, educational material, promotional material including social media and the school’s website.

If you **DO NOT** give permission for your child’s image to be used, please notify the school by ticking the No Box at the end of this Enrolment Form.

**Overseas Students on a 500 Student Visa**

1. If the student is an Overseas Student on a 500 Student Visa, the School requires payment of:
2. a Tuition Bond equivalent to 25% of the annual Tuition Fee prior to confirmation of enrolment
3. 25% of the annual Tuition Fee prior to commencement and then pre-pay (25% of the annual Tuition Fee in advance) throughout the student’s enrolment. The pre-payments are credited towards the final invoice.
4. If the parents do not reside in Australia, a suitable relative or guardian in Metropolitan Sydney must be appointed to act as a guardian for the student. The guardian must:
5. be at least 25 years old
6. speak English
7. be contactable by the School
8. be able to give support to the School in meeting the needs of the student
9. attend enrolment interviews, parent-teacher interviews, and other events at the School’s request
10. exercise a duty of care to the student when she is on leave with them
11. sign the Notice of Official Guardian Form before the student enters the School
12. agree to have the Principal or his or her delegate of member of the Senior Executive Team visit their home and to have regular contact.
13. In accordance with the Educational and Training Services to Overseas Students ESOS Act 2000 and the National Code of Practice, the following refund policy applies to all Overseas Students on a 500 Student Visa:
14. The Application Fee, Reserved Place Fee and Enrolment Fee are non-refundable
15. Tuition Fees, Tuition Bond and for Overseas Students will be refunded in full if a visa application is rejected (provided that written notification is received from the Australian Embassy) and/or the course is not offered
16. Refunds, where applicable, will be made in accordance with ESOS Act 2000.
17. The withdrawal of an Overseas Student paying full fees and on a 500 Student Visa must not take place prior to the student completing six months of the course in which she is enrolled (National Code Standard 7) unless a release letter has been authorised by the School.

**Supervision Before And After School**

1. Supervision commences at 8.10 am in the morning and ends at 3.50pm in the afternoon.
2. Failure to pick up your child / children at the designated time will incur an additional cost of $30 per day per family and this amount will be invoiced to your account.

**Provision of Information and Reports by the School and Court Orders**

1. The School will provide School and student information via the Parent Portal and send academic reports to the address or addresses notified by the parents. Where parents are separated or divorced, School and student information will be communicated via the School’s



[**Bellfield College**](http://www.bellfield.nsw.edu.au/)
29-31 Rossmore Avenue West, Rossmore NSW 2557
**Telephone:** 02 9606 2666

**Email:** enrolment@bellfield.nsw.edu.au

Parent Portal and reports will be sent to both parents on request, to the address notified by each parent, unless there is an Order of the Court or an agreement

that School and student information and reports are to be sent to only one parent.

1. All parents are required to provide promptly to the School, any Orders of the Family Court or any other Court, which are relevant to the education and welfare of the student.
2. Amendment of Terms and Conditions, The School may change these Terms and Conditions of Enrolment upon giving not less than two terms’ notice of such changes.

**Guardians**

1. The appointed relative or guardian must be available to care for the student at any time, reside in Metropolitan Sydney, be readily contactable by phone, speak English and be at least 25 years of age. The nominated guardian must complete and agree to the Notice of Official Guardian Form and provide any necessary documentation.

I,

Home Address:

Parent/Guardian of hereby:

1. Consent to my child participating in all activities organized by the school including any form of public or private transport as is necessary.
2. Consent to the school seeking medical or dental advice on behalf of my child in the event of an accident or illness.
3. Consent to treatment deemed necessary in the opinion of medical or dental practitioners including the administration of anesthetic, blood transfusion or the performance of any surgical operation.
4. Certify that the consent which I have given above is valid at all times while my child is in the custody of the school including school camps, work experience, excursions or functions.
5. Certify that my child does not to my knowledge suffer from any illness or disability which might interfere with or inhibit any medical or dental treatment.
6. Consent to the school using photographs of my child in print or electronic publicity material

 Yes No

1. Advise that my child suffers from the following illness or disabilities and/or takes medication which might interfere with any medical or dental treatment

Parent/Guardian 1 Signature: Parent/Guardian 2 Signature:

 Date: Date:

Parent/Guardian 3 Signature: Date:

*(if applicable)*

**I understand that Bellfield College will set high standards for me and will expect me to treat all members of the College community with respect, courtesy and consideration. I agree to co-operate with my teachers and to abide by the student code of conduct, College Uniform Policy and associated policies as set out in the College diary.**

**Student’s Signature Date:**

***STUDENT CONTRACT***

***PARENT/GUARDIAN AUTHORITY AND CONSENT FORM***

**I UNDERSTAND THAT THE SIGNING OF THIS ENROLMENT FORM CARRIES WITH IT MY SUPPORT OF THE AIMS AND VALUES OF THE COLLEGE, MY LIABILITY TO PAY SCHOOL FEES AND THE RESPONSIBILITY THAT THE INFORMATION ABOVE AND THE CONSENT FORM IS COMPLETE AND ACCURATE.**

Signature of Parent / Guardian 1 Date:

Signature of Parent / Guardian 2 Date:

And/Or

Signature of Parent / Guardian 3 Date:

*(if applicable)*

***AGREEMENTS***

**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, 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)

**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.
* **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 (NCO)

**Group 3: 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/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

**Group 1: 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)

***LIST OF PARENTAL OCCUPATION GROUPS***

**On the basis of the information provided in this form and gained from required assessments,**

I accept,

*or*

I decline

**Signature of Head of School**

**Name of Head of School**

**Date**

 *Grade Year*

*this application to enrol who has applied for*

*Student’s full name*

***HEAD OF SCHOOL‘s CERTIFICATION***

|  |  |  |
| --- | --- | --- |
| 1. **Enrolment interview conducted?**
 | Yes | No |
| 1. **Special circumstances, additional support needs and student history assessed?**
 | Yes | Not required |
| 1. **Risk assessment required**
 | Yes | No |
| If yes, risk assessment conducted | Yes |  |
| 1. **Is personalized learning and support required for this student?**
 | Yes | No |
| If yes:Consultation with parents/carers conducted | Yes |  |
| Planning to personalize learning and support completed? | Yes | Not required |
| Behaviour Management Plan (violence) developed? \* | Yes | Not required |
| Behaviour Management Plan (other) developed? \* | Yes | Not required |
| Individual Health Care Plan developed? \* | Yes | Not required |
| Emergency response plan developed? \*\* | Yes | Not required |
| 1. **Communication of documented provision/s and plan/s to relevant staff?**
 | Yes | Not required |
| **\*** It may be necessary to defer the finalization of enrolment until this action has been taken. This may require development of an interim plan until all relevant medical or other information has been obtained. Consideration must be given to all special needs when developing behaviour management or health care plans. Any deferral should be no more than reasonably necessary to collect the requires information.An emergency response plan must be included in the student’s individual health care plan where the student is diagnosed at risk of a medical emergency. |
| **\*\*** Where a student has been diagnosed at risk of anaphylaxis the emergency response plan must be the ASCIA Action plan for Anaphylaxis, which will be provided by the parent, completed and signed by the treating doctor. |

***HEAD OF SCHOOL CHECKLIST***

***OFFICE USE ONLY***