61 Parer Drive Moil NT 0810
PO Box 40196 Casuarina NT 0811
2 08 8983 7300
8 08 8928 0020
□ csc.admin@education.nt.gov.au
casuarinaseniorcollege.com.au

Casuarina Senior College Checklist

Please ensure all areas of the form have been completed and required documents are provided to the College.

Student Name:		
Current School:		
Year level enrolling into:	Year 10	
	Year 11	
	Year 12	

Completed Enrolment Form

Please provide one of the following forms of suitable identification:

- Birth Certificate or Passport If born outside Australia, you must also provide proof of citizenship or a valid visa. International students must include a confirmation letter from International Services. For assistance, please contact: Phone: (08) 8999 5895 Email: internationalservice@nt.gov.au
- Immunisation History Statement You can obtain this by calling 1800 653 809 or downloading it from your Medicare online account via myGov.

Compass contact/s: PG1 or PG2 (please identify)

- Please ensure a valid email address is provided for Compass access.
- One or both Parent Guardians can have Compass access.

Copy of most recent Semester reports

- Parent/guardian contact 1 needs to obtain these reports from the previous school. CSC can not request reports from a school without written consent from contact 1.

Subject Selection form

Medical Details

Please complete Section 8 and provide any medical or health plans.

Special Family Circumstances

Please provide court orders, statuary declarations and/or other associated documents.

For all enrolment enquires contact Casuarina Senior College on (08) 8983 7309 or alternatively email csc.admin@education.nt.gov.au





Office use only					
Student UPN:					
(please use Student Master Index)					
Year:					
Form:					
Anticipated start date:					
Enrolment status:	Full-time	Part-time	FTE:		

Student Enrolment Form

Information and Privacy

School name:

Has the student ever attended an NT school?

The Department of Education is committed to providing Northern Territory students with quality education services. The department needs to ask for personal information from students, parents and guardians so it can plan, provide and report on its services, and to monitor compliance under the *Education Act*. Personal information will only be disclosed for these purposes as permitted by the *Information Act*.

The *Privacy Statement* attached is for your information. Please take the time to read this as it outlines in greater detail the use and disclosure of the information that you provide.

If you need help completing this form, including translation services, please contact your school.

☐Yes ☐No

What was the last school the student attended?	School name:		
	State/Territory:	Country: (if n	ot Australia)
	Year/grade/level attained:	Date of leavi	ng: /
Is this student residing in the NT due to a Defend	ce Force posting?	Yes	No
Proof of identity attached (e.g. birth certificate, passport)		Yes	No
Section 1 Student Details			
Surname:			
Legal surname on birth certificate: (if different from above)			
Previous surname: (if applicable)			
1st name: (given name)			
2nd name: (middle name)			
3rd name: (if applicable)			
Preferred first name:			
Has the student been known by any	Other surname/s:	Other first na	ame/s·



other names? (if not listed above)

Date of birth:			
Gender:	☐ Male ☐ Female		
Tribal grouping/clan name: (if applicable)			
Skin name: (if applicable)			
Student's residential address:			
Suburb/town/community:		Postcode:	
Student's postal address: (if different from above)		'	
Suburb/town/community:		Postcode:	
		·	
Senior secondary students only			
Student's contact details:	Phone:		
	Mobile:		
	Email:		
Student's car registration number: (if applicable)			
Is the student independent? (i.e. living without a parent/guardian)	☐ Yes (If yes, all correspondence will be sent to the student). ☐ No (If no, all correspondence will be sent to the parent/guardian).		
Section 2 Additional Student Is the student of Aboriginal or Torres Strait Island		□ No □ Yes, Aboriginal □ Yes, Torres Strait Islander	
		☐ Yes, both Aboriginal and Torres Strait Islander	
Does the student speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)		☐ No, English only ☐ Yes, other – please specify:	
Is the student an Australian citizen or permanent resident?		□Yes □No	
If no, what is the visa subclass number: (e.g. 457, 676) If you have any questions about the visa subclass, contact the department's			
International Services Branch on 8901 4905.		☐ Copy of visa attached?	
If born overseas, on what date did the student a	rrive in Australia?	1 1	
In which country was the student born?		□ Australia □ Other – please specify:	
		-	

Section 3 Speci	al Family Circumstances	
-	s include a single parent, dual custody, for ide details of the circumstances.	ster care, court orders, access
Are supporting legal docume	ents attached? ☐ Yes ☐ No	
	t/Guardian Information student (living without a parent or gua	rdian) please go straight to Section 7
you are an inapprison		
	Parent/guardian 1	Parent/guardian 2
Title: (Mr/Ms/Mrs/Miss)	Parent/guardian 1	Parent/guardian 2
Title: (Mr/Ms/Mrs/Miss) Surname:	Parent/guardian 1	Parent/guardian 2
	Parent/guardian 1	Parent/guardian 2
Surname:	Parent/guardian 1	Parent/guardian 2
Surname: First name:	Parent/guardian 1	Parent/guardian 2
Surname: First name: Middle name: Relationship to student:	Parent/guardian 1	Parent/guardian 2
Surname: First name: Middle name: Relationship to student: (e.g. father, grandmother)		
Surname: First name: Middle name: Relationship to student: (e.g. father, grandmother) Responsible for parenting*	□Yes □No	□Yes □No
Surname: First name: Middle name: Relationship to student: (e.g. father, grandmother) Responsible for parenting* Lives with student*	□Yes □No □Yes □No	□Yes □No □Yes □No
Surname: First name: Middle name: Relationship to student: (e.g. father, grandmother) Responsible for parenting* Lives with student* Receive reports etc* Contact this person in	□Yes □No □Yes □No □Yes □No	☐Yes ☐No ☐Yes ☐No ☐Yes ☐No ☐Yes ☐No ☐Yes ☐No ☐Yes ☐No ☐(If all the No boxes above are ticked,

*Tick all boxes that apply

Mobile:

Email:

Postcode:

Postcode:

Postal address: (if different from above)

Residential address:

Suburb/town/community:

Suburb/town/community:

Section 5	Parent/Guardian E	Backg	round Information
Australia are bein authorities in ensu	g asked to provide this option	nal inform	r national reporting purposes. All parents across nation. It will be used to assist school education are appropriately allocated to Territory schools as
	juardian speak a language ot uage, indicate the one that is spoke		
I	Parent/guardian 1		Parent/guardian 2
□ No, English onl □ Yes, other – ple	-		☐ No, English only ☐ Yes, other – please specify
	est year of primary or secondar e never attended school, mark Year		ol the parent/guardian has completed? alent or below.
1	Parent/guardian 1		Parent/guardian 2
☐ Year 12 or equi☐ Year 11 or equi☐ Year 10 or equi☐ Year 9 or equiv	valent valent		☐ Year 12 or equivalent ☐ Year 11 or equivalent ☐ Year 10 or equivalent ☐ Year 9 or equivalent or below
What is the level of	of the highest qualification th	e parent/	/guardian has completed?
I	Parent/guardian 1		Parent/guardian 2
☐ Bachelor degre ☐ Advanced diplo ☐ Certificate I to I ☐ No non-school	ma/Diploma V (including trade certificate)		 □ Bachelor degree or above □ Advanced diploma/Diploma □ Certificate I to IV (including trade certificate) □ No non-school qualification
Please select the		ion group	p below (for more details refer to Appendix 2). the last 12 months, please use the person's last occupation.
☐ Group 1 Senior manage	Parent/guardian 1 ment in large business organis ministration, and qualified	sation,	Parent/guardian 2 Group 1 Senior management in large business organisation, government administration, and qualified professionals
	managers, arts/media/ and associate professionals		☐ Group 2 Other business managers, arts/media/ sportspersons, and associate professionals
☐ Group 3 Tradesmen/wor and service staf	men, clerks and skilled office, s f	sales	☐ Group 3 Tradesmen/women, clerks and skilled office, sales and service staff
☐ Group 4 Machine operat labourers and re	ors, hospitality staff, assistants elated workers	5,	☐ Group 4 Machine operators, hospitality staff, assistants, labourers and related workers
□ Other Not in paid work	c in the last 12 months		☐ Other Not in paid work in the last 12 months

Section 6 Sibling I	nformation				
Does the student have ☐ Yes ☐ No If yes, provide details below					
any brothers or sisters at this school?	Sibling's given names	Surname	Date of birth		
			/ /		
			/ /		
			/ /		
			/ /		
Section 7 Addition	al Emergency Co	ntacts			
For an emergency where the pa For independent students this is			ride alternative contacts.		
	Contact	1	Contact 2		
Title: (Mr/Ms/Mrs/Miss)					
Name:					
Relationship: (e.g. aunt, friend)					
Phone 1:					
Phone 2:					
		1			
Section 8 Medical	Details and Conse	ent			
Does your child suffer from any (Tick all the boxes that apply)	of the following?				
□Allergies	□Asthma	□ Diabetes			
☐ Seizure disorder (e.g. epilepsy)	☐ Hearing impairment	☐ Physical disability			
☐ Speech impairment	□ Visual impairment	☐ Intellectual/learning	impairment (e.g. dyslexia)		
☐ Acquired brain impairment	☐ Mental health or beha	aviour issue (e.g. depression	n, ADHD)		
☐ Other, please specify:					
If you have ticked any of the box student has any special needs of assessments undertaken by a se	or requires support in school				

NOTE: School staff will administer first aid, seek medical assistance or call an ambulance for the student being enrolled if they judge this to be necessary.

☐ Medication required. Please supply details of any treatments, care or med (contact school for relevant forms)	lication re	equired.
Relevant medical consent forms completed and attached:	☐ Yes	☐ No, not required
Immunisation certificate/record provided:	☐ Yes	□ No
I give consent to the sharing of health information between schools and Department of Health and Families (DHF) as stated in the privacy statement (for more details see Appendix 1). Health information may be shared with DHF, which offers student health services including nursing, dental, audiology and general health advice. DHF provides feedback to the schools after health checks (e.g. vision or hearing results.)	□ Yes	□ No
I give consent to a school health surveillance check when my child is in Transition and/or Year 1 (if applicable).	☐ Yes	□ No
I give consent to my primary school child having a dental examination (if applicable).	□ Yes	□ No
Parents/guardians will be notified of the result and asked to give consent for any treatment or referrals. No treatment will be carried out without a current signed consent. Parents/guardians are encouraged to accompany their child to appointments.		
More information available on website www.health.nt.gov.au/oral_health NB: Eligibility for public oral health services is restricted to defined client groups and excludes some visa subclass numbers. Information regarding eligibility can be found at www.health.nt.gov.au/Oral_Health/Child_and_Adolescent_Services/index.aspx		
Section 9 Additional Consents		

Consent for publication of a student's Photo and Work

DoE may record sound and/or vision of a student and their work while they are at school or taking part in school related activities or performances. Photographs of students involved in activities, and work by students, are often published to enable the students to share their experiences and to enable parents and others to be informed about the school or college's work. This does not mean that the student loses ownership of the works.

Please provide consent for the following:

	Use of Student Photograph	Use of Work by Student	Publishing Student First Name	Publishing Student Surname
School/College Newsletter	□Yes □No	□Yes □No	□Yes □No	□Yes □No
School/College Yearbook	□Yes □No	□Yes □No	□Yes □No	□Yes □No
School/College/Department Website	□Yes □No	□Yes □No	□Yes □No	□Yes □No

^{*} Consent for all other media usage should be sought as and when required.

Consent for library use I give consent to authorised access of the student's contact details and library borrowings by LINNet (Libraries in the Northern Territory) and associated libraries. School libraries use the contact details to provide library borrowing services to students, and may share this information with LINNet and associated libraries. Only authorised library personnel will have access to this information. Please note failure to provide the information in full or part may result in limiting or preventing the student from borrowing from the school library.	□Yes □No
Consent for attending religious instruction I give consent for the student to attend religious instruction. Name of religious instruction you wish the student to attend:	□Yes □No
It is your responsibility to notify the school in writing of any changes to the information on this enrolment form. Name of parent/guardian/independent student enrolling the student and providing consents:	provided
(Please print)	
Relationship to student:	
Signature: Date: / /	
Name of school witness:(Please print)	

Signature: _____ Date: / /

APPENDIX 1 Privacy Statement

For more information regarding the Department of Education (DoE) obligations in relation to protecting your privacy, visit http://www.education.nt.gov.au/about-us/foi or contact a DoE Information Officer on (08) 8901 4907. We need enrolment details for the following purposes:

Student Details

- This information is required to discuss matters regarding the student's education, for contact in an emergency or for other educational purposes.
 These other educational purposes may include:
 - the determination of the number of school aged children in a region, allowing DoE to plan resourcing for schools;
 - to assist in the provision of transport to and from schools;
 - to determine whether all school-aged children are enrolled in an educational facility as required by the NT *Education Act*;
 - any requirements under relevant laws of either the Northern Territory or Australian Government; and
 - students' names and demographic information may be verified against health records.

Student and Parent Background Information

 Some of this information is a standard requirement on all enrolment forms Australia wide as part of the National Education Agreement. The information you provide will assist school education authorities in ensuring funding and teaching resources are appropriately allocated to Territory schools.
 Some of this information will be forwarded to the Australian Government as required under the appropriate legislation.

Additional Emergency Contacts

 This is required in the event that the school is unable to contact parents/guardians. Please ensure that the people named have agreed to their details being provided to the school.

Special Family Circumstances

- Additional information about parents/guardians.
 This is needed so that we are aware of family arrangements e.g. foster care, dual custody, access restrictions. Please provide any relevant Court Orders including access restrictions and parenting plans, and inform the school as soon as possible about any changes to your family arrangements.
- Contact your school principal if you would like to discuss, in strict confidence, any matters relating to these arrangements.

Medical Details and Consents

- Health information is required so that our staff can properly care for your child. Please ensure this is up-to-date, as incomplete or inaccurate health information may put your child's health at risk.
- Contact information may be shared with staff of the Department of Health and Families (DHF) should nurses, dentists, audiology staff and health workers need to contact parents/ guardians.
 The school may need to disclose personal and sensitive information to medical practitioners, and people providing services to the school, including specialist visiting teachers and counsellors.
- We require details of student medical conditions and/or disabilities, and medication they may need while at school. If possible, please provide medication to the school in an authorised pharmacy packet.
- Please inform the school if your child develops a medical condition that may require regular or emergency treatment by school staff.
- Medical information will be shared with school staff on a "need to know" basis. Relevant sections of your child's medical records may be held at the school in suitable locations to ensure that appropriate action is taken in emergencies.
- Health information may also be shared with DHF, which offers student health services including nursing, dental, audiology and general health advice. DHF provides feedback to the schools after health checks (e.g. vision or hearing results) to ensure the student is properly cared for at school.
- DHF may provide medical information back to the school to assist in planning appropriate health interventions and to assist in classroom curriculum activities.

Please contact the school if you require further information or clarification regarding the DoE Medications Policy.

Access to Your Child's Record Held by the School

In most circumstances you are able to access your child's records. Please contact the Principal to do so. If you have any concerns about the privacy of this information please contact the Principal.

APPENDIX 2 List of Parent or Guardian Occupation Groups

Group 1

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

Senior executives/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 a 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 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

Group 3

Tradesmen/ women, clerks and skilled office, sales and service staff

Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.

Clerks [bookkeeper, bank clerk/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 desk, admissions clerk]

Skills office, sales and service staff

Office [secretary, personal assistant, desktop publishing operator, switchboard]
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 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, kitchenhand, porter, housekeeper] **Office assistants, sales assistants and other assistants.**

Office staff [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 are 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]