Enrolment Application

Student Name: ________________
Academic Year: ________________
For the Year: ________________

Information regarding our school (i.e. School Policies, Newsletters, Canteen Menu, Curriculum, Sport) can be locate on our school website, www.kngplism.catholic.edu.au

Office Use Only

Birth Certificate ☐ ☐Both Parents Signed
Immunisation Certificate ☐ ☐Application Loaded into SAS
Sacramental Certificate ☐ ☐Reports
This form is to be completed by parents seeking to enrol their child at St Anthony's Primary School. However, completion of this form in no way guarantees enrolment. An interview with the Principal must occur before offers of enrolment are made.

**ENROLMENT POLICY**

In considering enrolments of students at St Anthony’s Primary Kingscliff, the following will be taken into consideration:

- To enter kindergarten the child must turn five before the 31\textsuperscript{st} July in that year of school.

- Priority for enrolments will be given in the following order:
  2. Siblings of those already enrolled in the school.
  3. Children of Catholic families yet to be baptised.
  5. Other applications may be considered after discussions with the Principal and Parish Priest.

Enrolment at St Anthony’s Primary, Kingscliff, does not necessarily guarantee future enrolment to our feeder High School, St Joseph's College nor to any other Catholic School in the region.

**ENROLLING YOUR CHILD INTO KINDERGARTEN**

- Fill out and return application form to school including copies of birth, baptism and immunisation certificates.

- Enrolment interviews for prospective kinder enrolments are held with the Principal. Children will be sent a personal invitation to meet with the principal.

- Orientation days will occur during the final school term prior to the commencement of Kindergarten when you will be notified of arrangements for the start of the new school year.

- Parents of kindergarten students will be sent a letter with information about “Best Start Kindergarten” at the end of Term 4.

- Enrolments for children in other grades may be accepted throughout the year dependent upon class vacancies.
# ENROLMENT APPLICATION

**Office use only** | **Family code:** | **Student ID number:**

## FAMILY INFORMATION

**Family Surname:**

**Mail to (eg Mr & Mrs A Smith):**

**Parent/s Christian Name/s:**

**Residential Address:**

<table>
<thead>
<tr>
<th>Suburb</th>
<th>Postcode</th>
</tr>
</thead>
</table>

**Postal address: (if different to residential):**

<table>
<thead>
<tr>
<th>Suburb</th>
<th>Postcode</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Home</th>
<th>Mobile</th>
</tr>
</thead>
</table>

## RESIDENTIAL STRUCTURE

**Married □** **Defacto □** **Divorced □** **Partner □** **Separated □** **Single parent □** **Widow □** **Widower □**

**Number of Children:**

<table>
<thead>
<tr>
<th>Boys</th>
<th>Girls</th>
</tr>
</thead>
</table>

**Parish: (eg St Anthony’s)**

**Medicare Number:**

**Expiry Date:**

**Health Fund:**

**Fund Number:**

**Main language spoken at home:**

**Other language:**

## STUDENT DETAILS

**First Name/s:**

<table>
<thead>
<tr>
<th>Preferred First Name</th>
</tr>
</thead>
</table>

**Surname:**

**Sex:**

| Male □ | Female □ |

**Religion:**

**Date of Birth:**

**Commencement Year (eg 2009):**

**Entry Year/Grade (eg Yr 7):**

**Country of Birth:**

## NATIONALITY

**Student Nationality:**

**Country which student was born?**

| Australia □ |

**Other, please specify:**

**Is the student of Aboriginal or Torres Strait Islander origin?**

| Yes □ | No □ |

(If “Yes” tick one box below)

**Aboriginal but not Torres Strait Islander origin □**

**Torres Strait Islander but not Aboriginal origin □**

**Both Aboriginal and Torres Strait Islander □**

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

| Yes □ | No □ |

If yes, please specify
RESIDENTIAL STATUS (original documents to be sighted and copies to be retained by school)

Australian citizen (Naturalisation Certificate or Australian passport if country of birth is not Australia) □
Permanent resident (passport if country of birth is not Australia) □ Temporary resident (passport and visa) □
Foreign National without residential status (passport and visa) □ Other/Visitor/Student/Passport/Other/Visa (passport and visa) □

VISA STUDENT

Is the student a Visa student? Yes □ No □
First Australian school: ____________________________
First Australian school year: ____________________________
Former name (if applicable): ____________________________

Office Use Only

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passport number:</td>
<td></td>
</tr>
<tr>
<td>Passport nationality:</td>
<td></td>
</tr>
<tr>
<td>Passport expiry date:</td>
<td></td>
</tr>
<tr>
<td>Visa number:</td>
<td></td>
</tr>
<tr>
<td>Visa type:</td>
<td></td>
</tr>
<tr>
<td>Visa expiry date:</td>
<td></td>
</tr>
<tr>
<td>OSHC number:</td>
<td></td>
</tr>
<tr>
<td>OSHC expiry date:</td>
<td></td>
</tr>
<tr>
<td>Confirmation of enrolment</td>
<td></td>
</tr>
<tr>
<td>Course code:</td>
<td></td>
</tr>
<tr>
<td>Course description:</td>
<td></td>
</tr>
<tr>
<td>Confirmation of enrolment start date:</td>
<td></td>
</tr>
<tr>
<td>Confirmation of enrolment end date:</td>
<td></td>
</tr>
</tbody>
</table>

PREVIOUS SCHOOL/PRE-SCHOOL PERMISSION

Name of previous school/pre-school: ____________________________

I/We give permission for school to contact previous school/pre-school Yes □ No □

SACRAMENTAL INFORMATION

Baptism Date: ____________________________ Parish: ____________________________
Confirmation Date: ____________________________ Parish: ____________________________
Reconciliation Date: ____________________________ Parish: ____________________________
Communion Date: ____________________________ Parish: ____________________________

MEDICAL INFORMATION

Doctor’s Name: ____________________________ Phone: ____________________________
Medicare Number: ____________________________ Expiry Date: ____________________________

Medical Conditions: (Specify any medical conditions the student suffers from, eg asthma, diabetes or any prescribed medication taken by student):

Operations: (Specify any significant operations the student has had that the school should be aware of):

Allergies: (List any known allergies the student has, eg allergy to nuts, penicillin, bee stings including specific details):

Has the student been diagnosed as being at risk of anaphylaxis? Yes □ No □

If yes, does the student have an EpiPen? Yes □ No □

Immunisation: (please indicate if the student has been immunised against the following)

<table>
<thead>
<tr>
<th>Disease</th>
<th>Yes □</th>
<th>No □</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diphtheria/Tetanus/Whooping Cough</td>
<td>Yes □</td>
<td>No □</td>
</tr>
<tr>
<td>Measles/Mumps/Rubella</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Haemophilus Influenza type b (Hib)</td>
<td>Yes □</td>
<td>No □</td>
</tr>
<tr>
<td>Meningoccal C disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polio</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chickenpox</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumococcal disease</td>
<td>Yes □</td>
<td>No □</td>
</tr>
<tr>
<td>Last Tetanus injection</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Dentist’s name: ____________________________ Phone: ____________________________

Dental Conditions: (please specify any significant conditions the student has had that the school should be aware of):
**SPECIAL NEEDS**

Does your child have:

- [ ] Autism
- [ ] Behaviour disorders
- [ ] A hearing impairment
- [ ] An intellectual disability
- [ ] A language disorder
- [ ] Mental health issues
- [ ] A physical disability
- [ ] A vision impairment
- [ ] ADD/ADHD
- [ ] Giftedness
- [ ] Difficulties in the basic areas of learning
- [ ] Acquired brain injury
- [ ] Other please specify
- [ ] None of the above

What accommodations and/or learning adjustments, if any, were provided for your child in his/her previous school/pre-school?

- [ ] Alternative teaching and learning strategies
- [ ] Signing
- [ ] A reader or scribe
- [ ] Access to technology
- [ ] Modifications to equipment, furniture and learning spaces
- [ ] Personal carer support
- [ ] Other please specify

**HEALTH AND SAFETY**

To your knowledge, is there anything in your child’s history or circumstances (including medical history) which might pose a risk of any type to him or her, other students, or staff at this school?  

[ ] Yes  [ ] No

If yes please provide a brief description:

[ ] Yes  [ ] No

Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues:

[ ] Yes  [ ] No

Does your child have any history of violent behaviour?  

[ ] Yes  [ ] No

Does your child have any history of behavioural problems (including verbal bullying)?  

[ ] Yes  [ ] No

Has your child ever been suspended or expelled from any previous school?  

[ ] Yes  [ ] No

If yes, was this for:

- [ ] Actual violence to any person?
- [ ] Possession of a weapon or any item used to cause an injury?
- [ ] Intimidation, bullying or harassment of students or staff at a school?
- [ ] Threats of violence?
- [ ] Illegal drugs?

[ ] Yes  [ ] No

Other, please specify:

[ ] Yes  [ ] No

I/We will provide written consent to the school on request to contact health professionals or other relevant agencies:

[ ] Yes  [ ] No

**COURT ORDERS**

Are there any current court orders relating to the student?  

[ ] Yes  [ ] No

If yes, copies of court orders eg AVOs, Family Court/Federal Magistrate Court Orders or other relevant court orders must be provided

Is there other information you wish the school to be aware of?

[ ] Yes  [ ] No

**SPECIAL CIRCUMSTANCES**

Are there any special circumstances about the student seeking to be enrolled that the school should know prior to enrolment? (living apart from parental supervision, out of home care arranged by the state)

[ ] Yes  [ ] No

If yes, please provide a brief description of the circumstances:

[ ] Yes  [ ] No

**SIBLINGS ATTENDING SCHOOL/PRE-SCHOOL**  
List all children in family attending school or pre-school (oldest to youngest),

<table>
<thead>
<tr>
<th>Name</th>
<th>School/Pre-school</th>
<th>Year/Grade (current year)</th>
<th>Date of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
**FEE BILLING**

Fees will be billed to the father/guardian. If you wish to change the way your account is billed please indicate below.

<table>
<thead>
<tr>
<th>Fees to be billed to:</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td></td>
</tr>
<tr>
<td>Father</td>
<td></td>
</tr>
</tbody>
</table>

**Fee to be billed to:**  %

Please provide details:

### MOTHER/GUARDIAN

<table>
<thead>
<tr>
<th>Title: <em>(Mrs/Ms/Dr)</em></th>
<th>First name/s:</th>
<th>Surname:</th>
</tr>
</thead>
</table>

Residential Address: *(leave blank if same as student address)*

Does the student reside at this address?  Yes ☐  No ☐

Mobile:  Work:  Email:  Occupation:  Religion:  Nationality:  Country of birth:  Australia ☐  Other, please specify:

#### Government requirement

<table>
<thead>
<tr>
<th>What is the occupation group? <em>(select from list of parental occupation groups on page 9)</em></th>
</tr>
</thead>
</table>

<table>
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<tr>
<th>Government requirement</th>
<th>What is the highest year of primary or secondary school the mother/guardian has completed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 9 or equivalent or below</td>
<td>☐  Year 10 or equivalent ☐  Year 12 or equivalent ☐</td>
</tr>
<tr>
<td>Year 11 or equivalent</td>
<td>☐  Year 12 or equivalent ☐</td>
</tr>
</tbody>
</table>

<table>
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<tr>
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<th>What is the level of the highest qualification the mother/guardian has completed? <em>(mark one box only)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>No non-school qualification</td>
<td>☐  Advanced diploma/Diploma ☐</td>
</tr>
<tr>
<td>Certificate I to IV <em>(including trade certificate)</em></td>
<td>☐  Bachelor degree or above ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Government requirement</th>
<th>Main language spoken at home:</th>
</tr>
</thead>
</table>

### FATHER/GUARDIAN

<table>
<thead>
<tr>
<th>Title: <em>(Mrs/Ms/Dr)</em></th>
<th>First name/s:</th>
<th>Surname:</th>
</tr>
</thead>
</table>

Residential Address: *(leave blank if same as student address)*

Does the student reside at this address?  Yes ☐  No ☐

Mobile:  Work:  Email:  Occupation:  Religion:  Nationality:  Country of birth:  Australia ☐  Other, please specify:

#### Government requirement

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</tbody>
</table>

<table>
<thead>
<tr>
<th>Government requirement</th>
<th>Main language spoken at home:</th>
</tr>
</thead>
</table>
# EMERGENCY CONTACT INFORMATION
(used in the event of an emergency if parents cannot be contacted, eg grandparent or friend)

<table>
<thead>
<tr>
<th>Contact 1:</th>
<th>Contact 2:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name:</strong></td>
<td><strong>Name:</strong></td>
</tr>
<tr>
<td>Relationship to student:</td>
<td>Relationship to student:</td>
</tr>
<tr>
<td>Address:</td>
<td>Address:</td>
</tr>
<tr>
<td>Home:</td>
<td>Home:</td>
</tr>
<tr>
<td>Mobile:</td>
<td>Mobile:</td>
</tr>
<tr>
<td>Work:</td>
<td>Work:</td>
</tr>
</tbody>
</table>

## SOCIAL MEDIA

I/We agree not to communicate, or engage in social media activity, including, but not limited to Facebook, Myspace, Twitter, YouTube, Linkedin, Wikipedia or Second Life, and to appropriately supervise our children to ensure they do not communicate or engage in the above described social media which in any manner whatsoever is negative of the school, its administration, its teachers, the Catholic Schools Office, Parish Priest or his advisors, or The Trustees of the Roman Catholic Church for the Diocese of Lismore or bring any, or part, or all the above into disrepute.

In the event that this condition of the agreement is breached in any manner whatsoever, it shall be regarded as an essential term and condition and at the sole discretion of the school, or the other parties mentioned above, I/we acknowledge our child/children may be suspended or expelled from the school.

<table>
<thead>
<tr>
<th>Mother/Guardian Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Father/Guardian Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
AGREEMENT

In dealing with this application, it may be necessary for the school, or any part of the Catholic Education Office, to look at documents held by previous schools, health care professionals or other government agencies. This information will be collected, used and stored consistent with the Privacy and Personal Information Protection Act and Health Records and Privacy Act 2002. The consent of the owner of the information, while not always necessary, is appreciated and will speed up the assessment of the application.

Consent to Access Documents

1. I/We consent to St Anthony’s Primary School and the Catholic Education Office gaining access to relevant information about the student to be enrolled held by previous schools, health care professionals or other government agencies.

2. I/We have included copies of the following documents with this application for enrolment (please tick appropriate boxes):
   - Full Birth Certificate *
   - Sacramental Certificates to date
   - Passport, visa, citizenship documentation
   - Most recent previous school reports and external test results
   - Current Family Court Orders (if applicable) *
   - Relevant medical and/or special needs information (if applicable)
   - Immunisation Certificate
   - Reports of assessments your child has received for speech, hearing, cognitive (IQ), occupational therapy (if applicable).

   NOTE: * Originals will need to be produced during the enrolment process

3. I/We understand the school may approach these bodies directly. The information they request may include information related to any of the questions I have answered above.

Declaration

4. I/We understand and support the Catholic ethos of the school and agree to abide by the rules and regulations of the school including those pertaining to program of studies, sport, pastoral care, school uniform, discipline and the general operation of the school.

5. If this enrolment application is successful I/we agree to honour the financial commitments required by the school as per the Schedule of Fees and Charges.

6. I/We understand that if this application is successful the information that I/we have provided must be kept up to date throughout the period of enrolment, eg change of address, court orders.

7. If this enrolment is accepted I/we agree to support our child’s participation in the religious life of the school (eg school liturgies, retreat programs).

8. I/We agree, if my child should require urgent medical treatment, the school staff are authorised to seek medical attention. This may include transportation to the nearest hospital, medical centre or doctor by ambulance or private vehicle and I/we agree to meet all costs.

9. I/We give permission for the publication of any school related material by or about our child, including photographs. It is acknowledged that such material is used regularly in publications by the school to communicate and promote events. Publications include school or diocesan publications, newsletters, prospectuses, magazines, media promotional materials, newspaper articles and the school website.

I/We have read all of the information in the enrolment package and understand the policies that we will need to abide by should this enrolment application be successful.

I/We have read the Standard Collection Notice about the collection and management of the personal information contained in this form.

I/We declare that the information provided in this Enrolment Application is, to the best of my/our knowledge and belief, accurate and complete. I/we recognise that, should statements in this application later prove to be false or misleading, any decision made as a result of this application may be reversed.

Mother/Guardian signature ___________________________ Date ______________

Father/Guardian signature ___________________________ Date ______________

Please note: Acceptance of this application for enrolment is subject to the approval of the school’s Enrolment Committee.

Acceptance to this school does not constitute acceptance into any other Catholic school (primary or secondary).

This application gives you the opportunity to provide information that will facilitate the smooth transition of your child into our school. It will assist the school to develop appropriate strategies to meet the particular needs of your child.

If the information is incomplete or misleading, any decision made as to enrolment may be revised.
<table>
<thead>
<tr>
<th>Government requirement</th>
<th>PARENTAL OCCUPATION DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parental Occupation</td>
<td>is defined as the main work undertaken by the parent/guardian. If a parent/guardian has more than one job, report their main job.</td>
</tr>
<tr>
<td></td>
<td>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 the person's last occupation.</td>
</tr>
<tr>
<td></td>
<td>If the person has not been in paid work in the last 12 months, enter '8' in the appropriate box.</td>
</tr>
</tbody>
</table>

**GROUP 1**

**Senior Management in large Business Organisation, Government Administration & Defence, & 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.


**Business** management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer.

**Air/sea transport** aircraft/ship’s captain/office/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/insurance/broker, credit/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.


**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.

**Clerk’s** bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/human resource clerk, betting clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, and admissions clerk.

**Skilled Office, Sales and Service Staff:**

**Office** secretary, personal assistant, desktop publishing operator, switchboard operator.

**Sales** company sales representative, auctioneer, insurance agent/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/brigadier.

**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.
1. The school (the Diocese both independently and through its schools) 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. The primary purpose of collecting this information is to enable the school to provide schooling for your son/daughter.

2. Some of the information we collect is to satisfy the school's legal obligations, particularly to enable the school to discharge its duty of care.

3. Certain laws governing or relating to the operation of schools require that certain information is collected. These include public health and child protection laws.

4. Health information about pupils is sensitive information within the terms of the National Privacy Principles under the Privacy Act. We may ask you to provide medical reports about pupils from time to time.

5. If we do not obtain the information referred to above we may not be able to enrol or continue the enrolment of your son/daughter.

6. The school from time to time discloses personal and sensitive information to others for administrative and educational purposes. This includes to other schools, government departments, the Catholic Education Office, the Catholic Education Commission of New South Wales, your local diocese and the parish, schools within other dioceses/other dioceses, medical practitioners and people providing services to the school, including specialist visiting teachers, (sports) coaches, volunteers and counsellors.

7. The school from time to time may also collect and disclose personal and sensitive information about current or prospective students to others if it is required to satisfy the school’s legal obligations under Part 5A of the Education Act 1990 (NSW).

8. Personal information collected from pupils is regularly disclosed to their parents or guardians. On occasions personal information disclosed to a school counsellor may be disclosed to others if the school considers it appropriate for the well being or development of the pupil who is counselled or other pupils at the school.

9. Schools may also disclose information under public health and child protection laws or in circumstances where there is a serious threat to an individual’s life, health or safety.

10. On occasion’s information such as academic and sporting achievements, pupil activities and other news is published in media articles, school newsletters, magazines and on our website.

11. Parents may seek access to personal information collected about them and their son/daughter by contacting the school principal. Pupils may also seek access to personal information 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.

12. 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.

13. We may include your contact details in a class list and school directory unless specifically requested (in writing) not to do so.

14. 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 the information to third parties.