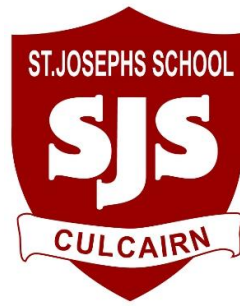


Meeting Date/Time:
Attended:
Offer sent:
Accepted:



Date Application Received: / /
Sacramental Certificates Sighted: Yes No
Baptism: _____ Date: / /
Reconciliation: _____ Date: / /
Eucharist: _____ Date: / /
Confirmation: _____ Date: / /
Birth Certificate Sighted: Yes No
Immunisation Certificate Sighted: Yes No

APPLICATION FOR ENROLMENT

Prep Enrolments

are only considered where the child turns 5 years of age **on or before 31 July** of the year of intended commencement at the School.

St Joseph's Primary School, Culcairn

For

(Students Full Name)

Child's Religion: _____

Parent/Guardian's Name/s: _____

Principal: Josh Gaynor

Address: 8 Blair Street, Culcairn, NSW, 2660

Phone: 02 6029 8577 Fax: 02 6029 8827

Email: sjcu-info@ww.catholic.edu.au

Website: web.sjcuww.catholic.edu.au

Parish: Culcairn/Henty/Walla Walla

| | | | | | | | |
|--|--------------------|---|---|---|---|---|---|
| Year Level into which admission is sought | K | 1 | 2 | 3 | 4 | 5 | 6 |
| Proposed date of commencement (if later than the beginning of Term 1) | | | | | | | |
| Office use only Family Code: | Student ID number: | | | | | | |

APPLICATION TO ENROL IN A CATHOLIC SCHOOL

DIOCESE OF WAGGA WAGGA

When you come to the school to enrol please bring each of these documents with you:

- **Proof of student's residential address** (eg. original copies of council rates notice, residential lease, electricity accounts, statutory declaration etc)
- **Birth certificate or identity documents**
- **Copies of any family law or other relevant court orders** (if applicable)
- **Immunisation history statement** (only required for students enrolling in primary schools for the first time).

In addition, if your Child is a permanent resident but not an Australian citizen, you will need to provide:

- **Passport or travel documents**
- **Current visa and previous visas** (if applicable).

In addition, if your child is a temporary visa holder you will also need to provide:

- **Evidence of the visa the student has** (if the student holds a bridging visa).
- **Passport or travel documents.**

Your privacy is protected

The school and the Catholic Schools Office are subject to the Privacy and Personal Information Protection Act 1998 (NSW) and the Health Records and Information Privacy Act 2002.

The information you provide will be used to process your child's application for enrolment, which may include a risk assessment. It will only be used or disclosed for the following purposes:

- General student administration relating to the education and welfare of the student
- Communication with students and parents or carers
- To ensure the health, safety and welfare of students, staff and visitors to the school
- State and National reporting purposes
- For any other purpose required by law

The information will be stored securely. You may access or correct any personal information by contacting the school. If you have a concern or complaint about the way your personal information has been collected, used, or disclosed, you should contact the school.

The health-related information collected is subject to the *Health Records and Information Privacy Act 2002*. It is being collected for the primary purpose of ensuring the health and safety of all students, staff and visitors to the school. It may be used and disclosed to medical practitioners, health workers, other government departments and/or schools for this primary purpose, or for other, related purposes.

Do parents have to answer the questions?

We are required by law to ensure the health and safety of students, staff and visitors on our premises. It is therefore necessary for you to answer all questions on this form except those about your occupation and education.

The information you provide will assist the school to communicate with you and to care for your child while at school. Should you choose to submit an incomplete form, processing your application may be delayed and the quality of our service to you may be affected.

Giving false or misleading information is a serious offence. In the event that statements made in this application later prove to be false or misleading, any decision made as a result of this application may be reversed.

Why have we asked for information about your occupation and education?

All Australian Education Ministers have agreed on National Goals for Schooling in the 21st Century. The National Goals specifically state that the achievement of students in schools should not be affected by discrimination based on sex, language, culture and ethnicity, religion or disability; or by differences arising from social and economic background or geographic location. The goals also state that 'the learning outcomes of educationally disadvantaged students [should] improve and, over time, match those of other students'.

To help us to make sure we are achieving these goals, all parents across Australia, no matter which school their child attends, are being asked to provide information about family background. The main purpose of collecting this information is to promote an education system which is fair for all Australian students regardless of their background.

We use the information to evaluate whether our policies are effective and to ensure that no group is experiencing undue disadvantage because of their economic or social background.

Providing information about your occupation and education is voluntary but your information will help us to ensure that all students are being well served by Australian schools.

The four groups listed on page '11' are used by the Australian Bureau of Statistics to classify occupations. Please choose the group that you think best describes you. If you have retired or stopped work in the past year please choose the group in which you used to work.

You will need to use this table to answer the questions on pages '8-9'.

Secure Internet Access and Email

Students are provided with an Internet and email account to enable learning opportunities in a protected and secure environment. Students must abide by the school's policy when using the schools Internet and email services.

Parents will need to inform the school in writing if they do not want their child to have access to the school's Internet and email facility.

Photographs at School

Taking photographs of students can constitute a collection of their personal information. Occasionally photographs are taken of individual students and classes of students at school.

If you **do not wish** your child to be photographed under any circumstances, please make sure you have specified this on page '10' of this form.

A Standard Collection Policy is distributed to all pupils' parents. This notice is in the enrolment Pack. It outlines why information is collected by the school and for the purpose it is collected.



St Joseph's Primary School

APPLICATION FOR ENROLMENT

| | | |
|--|---|---|
| Name of Student: | | Office Use Only Student Code: Family Code: |
| Current school or Pre School: | | |
| Family Mailing Details | | |
| Family Surname | | |
| Mail to [eg Mr & Mrs Smith] | Greeting Names [eg John & Mary] | |
| Address | Suburb/City | Post Code |
| Family Phone Number | Other | |
| Relationship: Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single <input type="checkbox"/> Other <input type="checkbox"/> | Current Parish | |
| Health Fund (if applicable) | Health Fund Number | Expiry Date : __/__/____ |
| Health Care Card No. (if applicable) | Ambulance Subscription <input type="checkbox"/> No. | |
| Medicare Number | | |

| Children in your Family at other Schools | | | | |
|---|-------------------|-------------|-------------|--------------------------|
| Please list below all the children in your family attending other Schools | | | | |
| | Full Student Name | School Year | Birth Order | Current School Attending |
| Child | | | | |
| Child | | | | |
| Child | | | | |
| Child | | | | |

| Student Details | |
|--|--|
| First Name | Previous School: Year Level: |
| Middle Name | Was the Student born overseas Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Surname | If Yes <input checked="" type="checkbox"/> Please complete the section below - |
| Preferred Name | Date Arrived in Australia: __/__/____ |
| Gender <input type="checkbox"/> Male <input type="checkbox"/> Female (please tick one) | Date attended first Australian School: __/__/____ |
| Date of Birth | First Australian School Year (eg: 2001): |
| Country of Birth | Religion |
| Nationality | Does the student speak a language(s) other than English at home? |
| Commencement Year | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please List Below: |
| Start Date | 1. 2. |
| School Year Start [eg: Prep, Year7] | Special Needs: |
| | Office Use Only: FFlag RIS |

| Parish/Sacramental Details | | | |
|-----------------------------------|---------------|-----------------|--|
| Sacrament | Date Received | Parish Received | Copy of Certificate supplied |
| Baptism | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Reconciliation | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Eucharist | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Confirmation | | | Yes <input type="checkbox"/> No <input type="checkbox"/> |

| | Visa Sub Class | Visa Number |
|---|--------------------|-----------------|
| Office Use Only: | | |
| Passport Number | Visa Expiry Date | |
| OSHC Membership Number | OSHC Expiry Date | |
| Confirmation of Enrolment – Course Code | Course Description | |
| Confirmation of Enrolment Number | Course Start Date | Course End Date |

Declaration

In dealing with this application, it may be necessary for the school or the Catholic Schools Office, to look at documents held by previous educational institutions, health care professionals or other agencies. This information will be collected, used and stored consistent with legislative requirements. The consent of the owner of the information, while not always necessary, is appreciated and will speed up the assessment of the application.

I/we consent to the school and the Catholic Schools Office gaining access to relevant information about the student to be enrolled held by previous educational institutions, health care professionals or other agencies. I/we understand that the school or the Catholic Schools Office may approach these bodies directly. The information they request may include information related to any of the questions I have answered in this Application for Enrolment.

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 declare that the information provided in this application to enrol is to the best of my/our knowledge and belief, accurate and complete. I/we understand that if any misleading information has been provided, or any omission of significant, relevant information made in this application for enrolment, acceptance will not be granted, or if discovered after acceptance the enrolment may be withdrawn.

I/we agree jointly and severally to pay all school fees, levies and charges incurred while my child is enrolled (including any expenses incurred by the school as a result of late or non-payment). (Note: No student will be refused enrolment because of an inability, as distinct from an unwillingness, of a parent/guardian to meet their school fee commitments. Please contact the Principal or Secondary Bursar to discuss your particular circumstances.

SIGNED:
Parent/Carer 1

DATE:

And / Or

SIGNED:
Parent/Carer 2

DATE:

Additional Needs

Please indicate whether the student applying for enrolment has any known or suspected **additional needs**
(please tick Yes or No for **each** of the following)

| | | | | | |
|--|---|---|---|---|--|
| Physical Needs Yes <input type="checkbox"/> No <input type="checkbox"/> | Medical Needs Yes <input type="checkbox"/> No <input type="checkbox"/> | Educational Needs Yes <input type="checkbox"/> No <input type="checkbox"/> | Behavioural Needs Yes <input type="checkbox"/> No <input type="checkbox"/> | Sensory Needs (vision and/or hearing impairment) Yes <input type="checkbox"/> No <input type="checkbox"/> | Any other additional needs Yes <input type="checkbox"/> No <input type="checkbox"/> |
|--|---|---|---|---|--|

If you have answered **Yes** to any of the above, please complete the section below: **(Supporting documentation MUST be provided)**

Is your child a young person with: (please tick as applicable)

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> autism spectrum disorders | <input type="checkbox"/> acquired brain injury | <input type="checkbox"/> behaviour disorders | <input type="checkbox"/> difficulties in the basic areas of learning |
| <input type="checkbox"/> a hearing impairment | <input type="checkbox"/> an intellectual disability | <input type="checkbox"/> a language disorder | |
| <input type="checkbox"/> mental health issues | <input type="checkbox"/> a physical disability | <input type="checkbox"/> special abilities | <input type="checkbox"/> vision impairment |

Other (please specify):

Legislation and CSO policy recognise that learning adjustments may be required for students with additional needs. These are provided through alternative teaching and learning strategies and special provisions including oral interpreting, Braille, a reader or scribe, access to technology, modifications to equipment, furniture and learning spaces, personal carer support

What was provided for your child in his/her previous school/pre-school/educational setting? (please tick as applicable)

- | | | |
|--|---|---|
| <input type="checkbox"/> access to technology | <input type="checkbox"/> alternative teaching and learning strategies | <input type="checkbox"/> Braille/Large Print |
| <input type="checkbox"/> English language support | <input type="checkbox"/> modification to equipment, furniture and learning spaces | <input type="checkbox"/> personal carer support |
| <input type="checkbox"/> a reader or scribe | <input type="checkbox"/> special provisions for assessments | <input type="checkbox"/> oral interpreting |
| <input type="checkbox"/> early intervention services eg: speech therapy, occupational therapy, other therapies | | |

Other (please specify):

Is there anything that you **do or modify at home** that may help us at school to meet your child's needs?

What may be required for your child in this school? (please tick as applicable)

- | | | |
|---|---|---|
| <input type="checkbox"/> access to technology | <input type="checkbox"/> alternative teaching and learning strategies | <input type="checkbox"/> Braille/Large Print |
| <input type="checkbox"/> English language support | <input type="checkbox"/> modification to equipment, furniture and learning spaces | <input type="checkbox"/> personal carer support |
| <input type="checkbox"/> a reader or scribe | <input type="checkbox"/> special provisions for assessments | <input type="checkbox"/> oral interpreting |

Other (please specify):

You must also advise the school of any new conditions or needs as soon as you are aware of them.

Student's History Relevant to Risk Assessment

The school has a legal responsibility under the relevant section of the Education Act 1990 to assess and manage any risk of harm to its staff and students. This application gives you the opportunity to provide information that will help facilitate the smooth transition of students into our school setting. This may include preparing a behaviour management plan, risk assessment and risk 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 to safety support students in our school and contribute to ensuring the safety of your child, other students and staff.

To your knowledge, is there anything in the student's history or circumstances (including medical history) which might pose a risk of any type to the student, other students or staff at this school? **Yes** **No**

If yes please complete the information below and provide a brief description of 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.

| |
|--|
| |
| |
| |

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

| |
|--|
| |
| |
| |

Does your child have any past history of violent behaviour, including self-harm? Yes No

If yes please provide details (including any Apprehended Violence Orders issued against the student)

| |
|--|
| |
| |
| |

Has your child ever been suspended, transferred or excluded from any previous school, pre-school or other educational institution?

Yes No

If yes was this for: (please tick)

- Actual Violence to any person?
Yes No
- Possession of a weapon or any item 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 your child has been involved outside of the school setting?

Yes No

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

| |
|--|
| |
| |
| |

If the student is enrolled it is essential that the school has all information about the needs of a student in order to make REASONABLE ADJUSTMENTS to meet those needs. The school MUST be advised promptly of any changes to the needs of the student.

Contact Details

| Details | Parent/Carer 1 Residing at the Same Address | Parent/Carer 2 Residing at the Same Address |
|---|--|--|
| Title | | |
| First Name | | |
| Middle Name | | |
| Surname | | |
| Relationship | | |
| Gender | | |
| Address - Street | | |
| Suburb & Post Code | | |
| Residential Guardian Y/N? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Home Phone Number | | |
| Work Phone Number | | |
| Fax | | |
| Mobile Phone Number | | |
| Email Address | | |
| Occupation | | |
| Occupational Group <small>(Refer to list of occupations codes on the insert)</small> | Group 1 <input type="checkbox"/> Group 2 <input type="checkbox"/> Group 3 <input type="checkbox"/> Group 4 <input type="checkbox"/> Group 8 <input type="checkbox"/> | Group 1 <input type="checkbox"/> Group 2 <input type="checkbox"/> Group 3 <input type="checkbox"/> Group 4 <input type="checkbox"/> Group 8 <input type="checkbox"/> |
| Employer | | |
| Employer Address - Street | | |
| Employer Suburb & Post Code | | |
| Country of Birth | | |
| Nationality | | |
| Ethnic Origin | | |
| Religion | | |
| Highest Year of School Education: | Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below <input type="checkbox"/> | Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below <input type="checkbox"/> |
| Do you speak a language(s) other than English at home? | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please list below: 1. _____ 2. _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please list below: 1. _____ 2. _____ |
| Level of Highest Qualification | Bachelor degree or above <input type="checkbox"/> Diploma/Advanced Diploma <input type="checkbox"/> Certificate I to IV (incl trade cert) <input type="checkbox"/> No non-school qualification <input type="checkbox"/> | Bachelor degree or above <input type="checkbox"/> Diploma/Advanced Diploma <input type="checkbox"/> Certificate I to IV (incl trade cert) <input type="checkbox"/> No non-school qualification <input type="checkbox"/> |
| Medicare Number | | |
| SIGNATURE | | |
| Office Use Only: FP | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Office Use Only: CPD | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Contact Details
(2) Emergency Contact Details MUST be completed

| Details | (1) Non Residential Parent (if applicable) | (2) Emergency Contact |
|---|--|---|
| | Please only complete if there is a Parent who does not reside at the Student's Home Address | Please nominate a person other than a parent who may be contacted in the event of an emergency, if parents cannot be contacted |
| Title | | |
| First Name | | |
| Middle Name | | |
| Surname | | |
| Relationship | | |
| Gender | | |
| Address - Street | | |
| Suburb & Post Code | | |
| Home Phone Number. | | |
| Work Phone Number. | | |
| Mobile Phone Number. | | |
| Email Address | | N/A |
| Employer | | |
| Employer Address - Street | | |
| Employer Suburb & Post Code | | |
| Occupation | | |
| Occupational Group <small>(Refer to list of occupations codes on the insert)</small> | Group 1 <input type="checkbox"/> Group 2 <input type="checkbox"/> Group 3 <input type="checkbox"/> Group 4 <input type="checkbox"/> Group 8 <input type="checkbox"/> | |
| Employer | | |
| Employer Address - Street | | |
| Employer Suburb & Post Code | | |
| Country of Birth | | |
| Nationality | | |
| Ethnic Origin | | |
| Religion | | |
| Highest Year of School Education: | Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below <input type="checkbox"/> | |
| Do you speak a language(s) other than English at home? | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please list below: 1. _____ 2. _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes <input checked="" type="checkbox"/> Please list below: 1. _____ 2. _____ |
| Level of Highest Qualification | Bachelor degree or above <input type="checkbox"/> Diploma/Advanced Diploma <input type="checkbox"/> Certificate I to IV (incl trade cert) <input type="checkbox"/> No non-school qualification <input type="checkbox"/> | N/A |
| Are there any Family Court Orders/Parenting Plans that have been issued in relation to the enrolling student? | Yes <input type="checkbox"/> No <input type="checkbox"/> (If Yes Supporting documentation must be provided.) | |
| SIGNATURE | | |
| Office Use Only: FP | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Office Use Only: CPD | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Agreement

Please tick the following boxes and sign below

1. I/we have read and agree to the conditions outlined in the following documents (please tick all boxes as read):

- a) School Enrolment Policy
- b) School Pastoral Care Policy
- c) Schedule of Fees and Charges
- d) Special Needs Enrolment Protocols
- e) School Internet Use Policy
- f) School Privacy Policy/ Standard Collection Notice/ Use of Student Images Policy
- g) Child Protection Policy / Volunteer requirements
- h) Suspension and Exclusion Policy

2. I/we have included copies of the following documents with this application for enrolment (please tick appropriate boxes):

- Birth Certificate
- Baptismal Certificate
- Citizenship documentation (where applicable)
- Evidence of time out of the country eg passport, plane tickets, overseas school reports (where applicable).
- Most recent previous school reports and external test results (where applicable)
- Relevant Family Court Orders (where applicable)
- Relevant medical and/or special needs information including clinical/educational assessments (where applicable)
- Immunisation Certificate (primary school applications only)

- 3. 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.
- 4. 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, sacramental programs).
- 5. If this enrolment application is successful, I/we agree to **jointly and severally honour** the financial commitments required by the school as per the Schedule of Fees and Charges.
- 6. I/we are not aware of any outstanding fees or charges, in relation to the student applying to enrol, that I/we are responsible for at another Catholic school.

DECLARATION

In dealing with this application, it may be necessary for the school or the Catholic Education Office, to look at documents held by previous educational institutions, health care professionals or other agencies. This information will be collected, used and stored consistent with legislative requirements. The consent of the owner of the information, while not always necessary, is appreciated and will speed up the assessment of the application.

I/we consent to the school and the Catholic Education Office gaining access to relevant information about the student to be enrolled held by previous educational institutions, health care professionals or other agencies. I/we understand that the school or the Catholic Education Office may approach these bodies directly. The information they request may include information related to any of the questions I have answered in this Application for Enrolment.

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 declare that the information provided in this application to enrol is to the best of my/our knowledge and belief, accurate and complete. I/we understand that if any misleading information has been provided, or any omission of significant, relevant information made in this application for enrolment, acceptance will not be granted, or if discovered after acceptance the enrolment may be withdrawn.

SIGNED _____ (Father/Carer)

and / or

_____ (Mother/Carer)

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).**

Parent/Carer occupation groups

| | | |
|---|--|--|
| <p>Group 4</p> <p>Machine operators, hospitality staff, assistants, labourers and related workers</p> | <ul style="list-style-type: none"> • 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 [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] | <ul style="list-style-type: none"> • 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 Force ranks below senior NCO not included below • 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] |
| <p>Group 3</p> <p>Tradesmen/women, clerks and skilled office, sales and service staff</p> | <ul style="list-style-type: none"> • Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women 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] | <ul style="list-style-type: none"> • 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/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor] |
| <p>Group 2</p> <p>Other business managers, arts/media/sportspersons and associate professionals</p> | <ul style="list-style-type: none"> • 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, | <p>proof reader, sportsman/woman, coach, trainer, sports official]</p> <ul style="list-style-type: none"> • 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 |
| <p>Group 1</p> <p>Senior management in large business organisation, government administration and defence, and qualified professionals</p> | <ul style="list-style-type: none"> • 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 | <p>applying this knowledge to design, develop or operate complete system; identify, treat and advise on problems; and teach others</p> <ul style="list-style-type: none"> • 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] |
| <p>Please note</p> | <ul style="list-style-type: none"> • If the person is not currently in paid work but had 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. | |

General Information Collection Notice in a Catholic School Dioceses of Wagga

This Collection Notice explains in general terms how we protect the privacy of the personal information you provide when you are enrolling your child or your child is enrolled at St Joseph's Primary School, Culcairn. In reviewing this Collection Notice and providing us with your personal information, you consent to our collection, use and disclosure of that information in the manner set out below, unless you tell us otherwise:

1. St Joseph's Culcairn collects personal information, including sensitive information about students and parents or guardians and family members before and during the course of a student'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 meet its educational, administrative and duty of care responsibilities to the student to enable them to take part in all the activities of the School.

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

3. Laws governing or relating to the operation of the School require certain information to be collected and disclosed. These include relevant Education Acts and Public Health and Child Protection laws.

4. The School may request medical reports and health information about students from time to time to discharge its legal duty of care to the student and to other students and staff. This includes a student's asthma and anaphylaxis action plans, as well as any other health or medical information which is reasonably likely to impact on the School's ability to provide educational, first aid and related services.

5. A student's health and medical information will be disseminated and used within the School to best meet the School's duty of care responsibilities. This may include the use of photographs with health action plans to facilitate the identification of students who may be at heightened risk. Health information about students is sensitive information within the terms of the Australian Privacy Principles (APPs) under the Privacy Act 1988.

6. The School may disclose personal and sensitive information for administrative, educational and support purposes (or may permit the information to be directly collected by third parties). This may include to:

- government departments;

- third party service providers that provide online educational and assessment support services or applications (apps), which may include email and instant messaging;
- another educational facility to facilitate the transfer of a student;
- medical practitioners, and people providing educational support and health services to the School, including specialist visiting teachers, sports coaches, volunteers, counsellors and providers of learning and assessment tools;
- assessment and educational authorities, including the Australian Curriculum, Assessment and Reporting Authority;
- people providing administrative and financial services to the School;
- anyone you authorise the School to disclose information to; and
- anyone to whom the School is required or authorised to disclose the information to by law, including under child protection laws.

7. If this information is not provided to us, the School; will not be able to fully discharge its duty of care to its students and staff.

8. The School will engage in fundraising activities from time to time. Information received from you may be used for these purposes. It may also be disclosed to St Joseph's School Council who assist in the fundraising activities of the School. We will not disclose your personal information to third parties for their own marketing purposes without your consent.

9. The School also uses cloud computing service providers to store personal information (which may include sensitive information) on their servers in the 'cloud'. These servers may be located in or outside Australia. This may mean that personal information may be stored or processed outside Australia. The School's Privacy Policy contains further information about its use of cloud and other third-party service providers and any of their overseas locations.

10. The School's Privacy Policy is accessible via the School website or from the School office. The policy sets out how parents, guardians or students may seek access to, and correction of their personal information which the School has collected and holds. However, access may be refused

in certain circumstances such as where access would have an unreasonable impact on the privacy of others, or may result in a breach of the School's duty of care to the student, or where students have provided information in confidence. Any refusal will be notified in writing with reasons if appropriate.

11. The School's Privacy Policy also sets out how parents, guardians, students and their family can make a complaint about a breach of the APPs and how the complaint will be handled.

12. On occasions information such as academic and sporting achievements, student activities and similar news is published in the school newsletters and magazines, on physical displays throughout the school and on our intranet. This may include photographs and videos of student activities such as sporting events, school camps and school excursions. The School will obtain separate permissions from the student's parent or guardian (and from the student if appropriate) prior to including such photographs or videos or other identifying material in our promotional material or otherwise making this material available to the public, such as on the internet.

The School will obtain separate permissions from the student's parent or guardian prior to including personal information on class lists or school directories.

13. If you provide the School with the personal information of others, such as other family members, doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the School and why, that they can request access to and correction of that information if they wish and to also refer them to the School's Privacy Policy for further details about such requests and how the School otherwise handles personal information it collects and complaints it receives.