



## ENROLMENT APPLICATION

\$50 non-refundable application fee must accompany this form.

### STUDENT DETAILS

Proposed Year of Entry: \_\_\_\_\_ Proposed Year Level: \_\_\_\_\_

Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Date of Birth: *(Please attach copy of Birth Certificate or Extract)* \_\_\_\_\_ Male  Female

Country of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Permanent Resident of Australia: Yes  No  Temporary Resident of Australia: Yes  No

Date of Arrival in Australia: \_\_\_\_\_ Visa Subclass: \_\_\_\_\_ Visa Expiry Date: \_\_\_\_\_

Aboriginal Descent: Yes  No

Torres Strait Islander Descent: Yes  No

South Sea Islander Descent: Yes  No

Aboriginal and Torres Strait Islander Descent: Yes  No

Is your child actively associated with a Christian church? Yes  No

Church name: \_\_\_\_\_ Denomination: \_\_\_\_\_

Does the child regularly attend: Church  Sunday School  Youth Group  Bible Study

Does the child occasionally attend: Church  Sunday School  Youth Group  Bible Study

## HEIGHTS COMMUNITY

Are parents past students of Heights?

Mother      Graduating Year \_\_\_\_\_

Father      Graduating Year \_\_\_\_\_

Does your child have any siblings who currently attend, may be enrolled in the future or are past students of the College?

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Current  Future  Past

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Current  Future  Past

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Current  Future  Past

## FAMILY DETAILS

It is appreciated that children's family backgrounds differ widely. The following information is sought as part of the College's duty of care and to avoid errors in the mailing of accounts and correspondence.

STUDENT RESIDES WITH:

Mother & Father     Mother only     Father only     Grandparents     Legal Guardians

Shared Custody  (*please provide details*) \_\_\_\_\_

PARENTS' MARITAL STATUS:

Married     Widowed     Single     Separated     Divorced     De Facto

## BIRTH PARENTS

MOTHER

Title: Mrs  Ms  Miss  Dr     Language other than English spoken at home  \_\_\_\_\_

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

Email address: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Postal Address (if different from above): \_\_\_\_\_

Current occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Birth Country: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Highest completed school education level?      Year 9     Year 10     Year 11     Year 12

Highest completed tertiary qualification?      Bachelor degree or above       Advanced Diploma/Diploma

   Certificate I to IV (Including trade certificate)       No non-school qualification

Are you actively associated with a Christian church?      Yes  No

Church name: \_\_\_\_\_ Denomination: \_\_\_\_\_

## FATHER

Title: Mr  Dr  Language other than English spoken at home  \_\_\_\_\_

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

Email address: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Residential Address: \_\_\_\_\_  
\_\_\_\_\_

Postal Address (if different from above): \_\_\_\_\_

Current occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Birth Country: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Highest completed school education level? Year 9  Year 10  Year 11  Year 12

Highest completed tertiary qualification? Bachelor degree or above  Advanced Diploma/Diploma

Certificate I to IV (Including trade certificate)  No non-school qualification

Are you actively associated with a Christian church? Yes  No

Church name: \_\_\_\_\_ Denomination: \_\_\_\_\_

## OTHER CARE-GIVERS/GUARDIANS

If your child resides in a permanent arrangement with care-givers who are not birth parents, please complete details:

### CARE-GIVER

Stepfather  Stepmother  Relationship (other than step-parent) : \_\_\_\_\_

Title: Mr  Mrs  Ms  Miss  Dr  Language other than English spoken at home  \_\_\_\_\_

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

Email address: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Residential Address: \_\_\_\_\_  
\_\_\_\_\_

Postal Address (if different from above): \_\_\_\_\_

Current occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Birth Country: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Highest completed school education level? Year 9  Year 10  Year 11  Year 12

Highest completed tertiary qualification? Bachelor degree or above  Advanced Diploma/Diploma

Certificate I to IV (Including trade certificate)  No non-school qualification

Are you actively associated with a Christian church? Yes  No

Church name: \_\_\_\_\_ Denomination: \_\_\_\_\_

## CARE-GIVER

Stepfather  Stepmother  Relationship (other than step-parent)  : \_\_\_\_\_

Title: Mr  Mrs  Ms  Miss  Dr  Language other than English spoken at home  \_\_\_\_\_

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

Email address: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Postal Address (if different from above): \_\_\_\_\_

Current occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Birth Country: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Highest completed school education level? Year 9  Year 10  Year 11  Year 12

Highest completed tertiary qualification? Bachelor degree or above  Advanced Diploma/Diploma

Certificate I to IV (Including trade certificate)  No non-school qualification

Are you actively associated with a Christian church? Yes  No

Church name: \_\_\_\_\_ Denomination: \_\_\_\_\_

## FAMILY MATTERS

*(Copies of Parenting Court Order / Parental Agreement must be supplied. Please attach.)*

**Please inform the College in writing of any changes to Court Orders/Parenting Agreement.**

Is there a current Child Protection Order for this child?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there a Family Law Order in place for your family?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there a current Domestic Violence Order for your family?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there a Parenting Plan in place? (eg. child residential arrangements.)	Yes <input type="checkbox"/> No <input type="checkbox"/>

## LOCAL EMERGENCY CONTACTS (other than parents)

NAME	ADDRESS	PHONE	RELATIONSHIP
1.			
2.			

## IMMUNISATION DETAILS

Has your child been immunised: Yes  No  (If no, please attach an objection to immunisation declaration)

## AUTHORISATION TO COLLECT CHILD FROM KINDERGARTEN, AND AUTHORISE MEDICAL TREATMENT OR MEDICATION (if applicable)

The following people are authorised to collect my child from Kindergarten, and/or are authorised to consent to medical treatment of, or to authorise administration of medication to my child.

NAME	ADDRESS	PHONE	RELATIONSHIP	AUTHORISE ADMINISTRATION OF MEDICATION (Please tick)
1.				
2.				
3.				

### LANGUAGE

Main language SPOKEN at home by your child: \_\_\_\_\_

Language/s other than English HEARD at home? \_\_\_\_\_

Language/s other than English WRITTEN at home? \_\_\_\_\_

### EDUCATIONAL HISTORY

For entry to Year 1 and above, please list all previous schools/pre-schools. *(Please attach or forward copies of previous two years' school reports if possible).*

SCHOOL	YEAR	YEAR LEVEL

Have you advised your present school that you are leaving? (if applicable) Yes  No

Has the applicant repeated a year at school? Yes  No  If yes, year level repeated): \_\_\_\_\_

Reason: \_\_\_\_\_

Have there been behavioural/social concerns at another school? Yes  No

If yes, please specify: \_\_\_\_\_

Has the applicant received any of the following?  
(Please tick (✓), give details and note when and where)

Gifted and Talented Assistance: \_\_\_\_\_

Remedial Assistance: \_\_\_\_\_

ESL Assistance: \_\_\_\_\_

Professional Assessment for Learning Difficulties: \_\_\_\_\_

Personal Counselling: *(please provide details)*

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Does this child have any impairment that may require special consideration? Yes  No

Hearing  Eyesight  Speech/Language  Psychological  Behavioural

Physical (specify)  \_\_\_\_\_

Other (specify)  \_\_\_\_\_

*(Copies of all professional reports must be provided.)*

Has this child received a formal Verification level in the past? Yes  No

Review date of current Verification: \_\_\_\_\_ School: \_\_\_\_\_

*(Copies of reports must be provided.)*

I/we \_\_\_\_\_ give permission for Heights College to contact schools previously attended by my/our child \_\_\_\_\_ to request the release and forwarding of files and information pertaining to my child. A Headmaster's Reference may be obtained for my child.

Signature/s \_\_\_\_\_ Date \_\_\_\_\_

## CHILD'S INTERESTS AND OTHER ACTIVITIES

SPORTS	
MUSIC Instrumental <input type="checkbox"/> Vocal <input type="checkbox"/>	Currently Learning <input type="checkbox"/> Length of Time: _____ years/months Instrument/s: _____
ACADEMIC/CULTURAL	

## COLLEGE INFORMATION (Please tick (✓) and sign where indicated)

### Privacy – Collection Notice (Privacy Act 1988 & Privacy Amendment (Enhancing Privacy Protection) Act 2012)

This notice is to be read together with the College's Privacy Policy available at [www.heights.qld.edu.au/college-policies](http://www.heights.qld.edu.au/college-policies).

1. The College collects personal information including sensitive information about students and parents/guardians before and during the course, and after the course of a student's enrolment at the College. The primary purpose of collecting this information is to enable the College to provide schooling for the student.
2. Some of the information the College collects is to satisfy the College's legal obligations, particularly to enable the College to discharge its duty of care.
3. 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 students is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. The College asks you to provide medical reports and information about students at enrolment and from time to time.
5. If the College does not obtain the information referred to above, the College may not be able to enrol or continue the enrolment of your son/daughter.
6. The College, from time to time, discloses personal and sensitive information to others for administrative and educational purposes. This includes other schools, government departments, medical practitioners, and people providing services to the College including specialist visiting teachers, sports coaches, counsellors and volunteers.
7. Personal information collected from students is regularly disclosed to their parents/guardians. On occasions information such as academic and sporting achievements, student activities and other news is published in College newsletters, magazines and Annual Reports and on the College website.
8. The Privacy Act does not differentiate between adults and minors. While parents generally have the right to provide consent for their children, children of sufficient mental capacity may also have the ability to provide or withdraw their consent. We will assume that notifications provided to parents/guardians have also been provided to their children. We will assume that notifications provided to parents/guardians will act as notification to students, and consents received from parents/guardians will act as consents given by students, unless we are satisfied otherwise.
9. Parents may seek access to personal information collected about them and their son/daughter by contacting the College. Students may also seek access to personal information about themselves. 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 College's duty of care to the student, or where students have provided information in confidence.
10. The College's Privacy Policy sets out how you may complain about a breach of privacy and how the College will deal with such a complaint.
11. In some circumstances, personal information may reside in the data storage 'cloud' which may mean that it resides on servers which are situated outside Australia.
12. The College 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 College's fundraising activities solely for that purpose.) The College will not disclose your personal information to third parties for their own marketing purposes without your consent. Individuals may opt-out of disclosure of information to third parties, either as noted in the Application Form (below) or by informing the Privacy Officer in writing.
13. If you provide the College with the personal information of others, such as doctors or emergency contacts, the College encourages you to inform them that you are disclosing that information to the College and why, that they can access that information if they wish, and that the College does not usually disclose this information to third parties.

### College Infolink (Newsletter)

I prefer the College Infolink to be sent to my Email Address  or

Other Address or email address  \_\_\_\_\_

### Publicity

I/we give permission for my child to be included in media publicity for the Heights College community including newspaper articles/ television/audio/photos/website and College newsletter:

Yes  No

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Contact Details

I/We give permission for my/our contact details to be used in a class contact lists, including emails and SMS messages.

Yes  No

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Marketing

Parents' contact details may be disclosed to organisations that assist in the College's fundraising activities (solely for that purpose.) I/We give permission for my personal information to be disclosed to third parties solely for marketing purposes.

Yes  No

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Sports and Excursion Approval

- I/we give consent for my child to participate in sporting activities and excursions which may occur away from the Heights College campus.
- I/we agree to delegate my authority to the staff and instructors involved. Such teachers and instructors may take appropriate disciplinary action which is deemed necessary to ensure the safety, well-being and successful conduct of the students as a group, or individually in any activity.
- I/we also authorise the teachers and instructors to obtain medical assistance that they deem necessary should an accident occur, and agree to pay all medical expenses incurred on behalf of the above-mentioned student. I/We further authorise qualified practitioners to administer anaesthetic if such an eventuality arises. (Each class teacher will notify students and parents when an excursion or sporting activity is planned.)
- I/we will notify the College if I/we do not wish my child to participate in any such activity.

Yes  No

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## PAYMENT OF FEES

- In order to keep fees at a modest level, and at the same time provide much needed facilities for the future, it is an expectation that parents will honour their fee obligations promptly.
- Should you ever need to discuss financial issues, please contact the Business Manager.
- I/we understand that all costs incurred from any debt recovery actions will be paid by me/us.
- I/we consent to the College obtaining a financial report about my/our credit worthiness from relevant credit agencies and former schools attended by/our child/children.
- Upon acceptance of application, a once only application fee of \$50.00 per child is due and payable. The payment of this fee does not guarantee enrolment, and is non-refundable.
- Written notice of not less than four weeks, or payment of four weeks fees in lieu of notice, is required if your child leaves the College (e.g. not less than 4 full school weeks).

*Please note:* College fees include all tuition, all textbooks, camps, day excursions and events, weekly sport and some stationery items.  
Extra-curricular sports and activities, music tuition and instrument hire, OSHC, some senior subject levies and bus fares are charged separately to regular College fees.

## FEE PAYER DETAILS

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Signature/s \_\_\_\_\_

If fees will be paid by more than one party, please include details below:

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Signature/s \_\_\_\_\_

### Payment Options available:

Yearly (discount applies if paid by end March)

Per Term

Monthly

Fortnightly

Weekly

### Payment Methods available:

B-Pay

Direct Debit

Credit Card

Cash

## CONDITIONS OF ENROLMENT

Enrolment at Heights College is subject to the following terms and conditions:

1. That the parents will agree to allow the child to share fully in the life and program of the College, including the devotional activities and Christian faith lessons.
2. That the parents will support the aims of the College and order their own lives and home so that the child will be given every opportunity to grow up into Christ.
3. That the parents undertake to provide the child with all necessary equipment of a personal nature that may be required to enable the child to benefit from the education offered.
4. That the parents undertake to provide the child with the correct uniform approved by the College and to ensure that the child is always sent to school neatly dressed in the required uniform and abides by the Dress Code.
5. That the parents accept the right of the College to employ such discipline as it deems wise and expedient for the child and agree to uphold the College's authority and right to administer appropriate discipline in accordance with College policies.
6. That all fees are payable by the last Friday of each term.
7. That the parents will give at least four weeks' notice of termination of enrolment and failure to do so may render them liable for four weeks fees from date of termination.
8. That the College may suspend, or withdraw enrolment at its discretion for failure to comply with these conditions, for serious or persistent breaches of the College rules and regulations or for involvement in any illegal or immoral activity.
9. The terms and conditions of the Enrolment Contract are attached and must be signed and returned with this Application Form.

Please note that when a student applies for enrolment in Preparatory, present regulations provide that a child must attain the age of five (5) years on or before the last day of June in the year of enrolment.

### DECLARATION

I/We have read the Conditions of Enrolment and I/we understand and agree to accept them in full in relation to the enrolment of our child named herein.

I/We agree to co-operate with the College authorities in all matters of College discipline, according to the College Behaviour Management Policy.

The signature of both parents or legal guardians is required.

Signature of Mother/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Father/Guardian \_\_\_\_\_

Date: \_\_\_\_\_

## PARENT'S CHECKLIST

- Application Fee paid
- Signed Enrolment Contract attached
- Copy of Birth Certificate attached
- Latest two years of School reports attached
- Latest NAPLAN report attached
- Any visa and passport details attached
- Any current Family Law orders or plans attached
- Any Specialist reports attached
- Any Verifications and Individual Education Plan attached

### How did you hear about Heights College?

- Family/Sibling  Word of Mouth  Internet  Public Event  Newspaper  Television  Radio
- Other: \_\_\_\_\_

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## OFFICE USE ONLY

Parent Code: \_\_\_\_\_ Bus Requested: \_\_\_\_\_

Student code: \_\_\_\_\_

Application Fee Receipt No. and date received: \_\_\_\_\_

- Birth Certificate copy received  Reports received  Enrolment Contract signed
- Visa/passport details received
- IT Contract/iPad Contract signed  Medical form received
- Secondary subject choices received House allocated: \_\_\_\_\_

Date Interviewed by Registrar: \_\_\_\_\_

Date Interviewed for Assessment / Support: \_\_\_\_\_

Date Interviewed by Headmaster: \_\_\_\_\_

Date place offered: \_\_\_\_\_ Commencement date: \_\_\_\_\_