



FOR RUDOLF STEINER EDUCATION LTD.

MUMBULLA SCHOOL FOR RUDOLF STEINER EDUCATION ENROLMENT APPLICATION FORM/ ENROLMENT CONTRACT KINDERGARTEN TO CLASS 6	FOR OFFICE USE ONLY		STUDENT BARCODE:	
	Paid Application Fee		Entered student information—Database	
	Acknowledged Application Form & Fee		Copy of latest School Report if applicable	
	Teacher interview		Copy of Vaccination History Statements	
	Approved by Education Manager		Copy Court Orders/Parenting Plans if applic	
	Approved by Business Manager		Enrolment Offer letter sent	

Student and family details

*Please note items marked with an asterix are Government required data collection

STUDENT DETAILS

Surname				
Given Names				
Preferred				
Home Address				Postcode
Date of Birth	_____ 	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Country of Birth*	In which country was the student born? <input type="checkbox"/> Australia <input type="checkbox"/> Other—please specify: _____ Is the student an Australian citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Indigenous status*	Is the student of Aboriginal or Torres Strait Islander origin? <input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> Yes, Both Aboriginal and Torres Strait Islander			
Main language other than English spoken at home *	Does the student speak a language other than English at home? <i>(if more than one language is spoken at home, indicate the one that is spoken most often)</i> No, English only <input type="checkbox"/> Yes, Other—please specify: _____			

APPLICATION DETAILS

Proposed Year & Level of Entry	Current Level of Schooling		Proposed Term and Yr of Entry (eg T2, 2017)	Proposed Level of Entry (eg Class1)	
Schooling History	Has the student ever attended a Steiner School?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Previous school/s attended (include preschools)			Year Level	Calendar Year
	-Please attach a copy of most recent school report-				

**APPLICATION
DETAILS**
(continued)

Special Circumstances	Please provide details of any special circumstances of the student that may need to be considered by the school, including medical conditions, special gifts, talents, needs, behavioural issues, psychological and/or other relevant test results.
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Disclosure statement: The disclosure of all medical, behavioural, psychological and educational testing and information referring to a student seeking enrolment is a fundamental condition to the acceptance of that student for enrolment at Mumbulla School. This information is important in identifying the type and level of support required by the student to enable participation in all aspects of school life.

**SIBLING
DETAILS**

Does the student have siblings? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Name	Age	Current school	Class	Waitlist Yes/No	Proposed Class	Proposed Year of Entry

**FAMILY
DETAILS**

	MOTHER/PARENT/GUARDIAN 1		FATHER/PARENT/GUARDIAN 2	
Relationship to student				
Surname				
Given Names				
Email				
Address (Home)				
	P/code		P/code	
Mailing Address				
	P/code		P/code	
Phone numbers	Home		Home	
	Work		Work	
	Mobile		Mobile	
Nationality				
Main language other than English spoken at home *	Does the mother/parent 1/ guardian 1 speak a language other than English at home? <i>(If more than one language is spoken, indicate the one that is spoken most)</i> <input type="checkbox"/> No, English only <input type="checkbox"/> Other - please specify _____		Does the father/parent 2/ guardian 2 speak a language other than English at home? <i>(If more than one language is spoken, indicate the one that is spoken most)</i> <input type="checkbox"/> No, English only <input type="checkbox"/> Other - please specify _____	

**FAMILY
DETAILS**
(continued)

	MOTHER/PARENT/GUARDIAN 1	FATHER/PARENT/GUARDIAN 2
Parental school education *	<p>What is the <i>highest</i> level of primary or secondary schooling the mother/ parent 1 / guardian 1 has completed? For persons who have never attended school mark 'Year 9 or equivalent or below'</p> <p style="text-align: right;">Mark one only</p> <p>Year 12 or equivalent <input type="checkbox"/></p> <p>Year 11 or equivalent <input type="checkbox"/></p> <p>Year 10 or equivalent <input type="checkbox"/></p> <p>Year 9 or equivalent or below <input type="checkbox"/></p>	<p>What is the <i>highest</i> level of primary or secondary schooling the father/parent 2/ guardian 2 has completed? For persons who have never attended school mark 'Year 9 or equivalent or below'</p> <p style="text-align: right;">Mark one only</p> <p>Year 12 or equivalent <input type="checkbox"/></p> <p>Year 11 or equivalent <input type="checkbox"/></p> <p>Year 10 or equivalent <input type="checkbox"/></p> <p>Year 9 or equivalent or below <input type="checkbox"/></p>
Parental non-school Education *	<p>What is the <i>highest</i> qualification the mother/parent 1/guardian 1 has</p> <p style="text-align: right;">Mark one only</p> <p>Bachelor degree or above <input type="checkbox"/></p> <p>Advanced diploma or Diploma <input type="checkbox"/></p> <p>Certificate I to IV (incl trade certificate) <input type="checkbox"/></p> <p>No non-school qualification <input type="checkbox"/></p>	<p>What is the <i>highest</i> qualification the father parent 2/guardian 2 has</p> <p style="text-align: right;">Mark one only</p> <p>Bachelor degree or above <input type="checkbox"/></p> <p>Advanced diploma or Diploma <input type="checkbox"/></p> <p>Certificate I to IV (incl trade certificate) <input type="checkbox"/></p> <p>No non-school qualification <input type="checkbox"/></p>
Parental Occupation group * <i>Refer to List of Parent Occupation Groups on back page</i>	<p>What is the occupation group of the mother/ parent 1/ guardian 1? Group <input type="checkbox"/></p> <p>Please select the appropriate parent occupation from the <i>List of Parental Occupation Groups on the back page</i></p> <p><i>-If the person is not currently in <u>paid</u> work but had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation</i></p> <p><i>-If the person has not been in paid work in the last 12 months, enter '8' above.</i></p>	<p>What is the occupation group of the father/ parent 2/ guardian 2? Group <input type="checkbox"/></p> <p>Please select the appropriate parent occupation from the <i>List of Parental Occupation Groups on the back page</i></p> <p><i>-If the person is not currently in <u>paid</u> work but had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation</i></p> <p><i>-If the person has not been in paid work in the last 12 months, enter '8' above.</i></p>
Working with Children check (WWCC)	<p>Do you have a current WWCC number? <input type="checkbox"/> No. <input type="checkbox"/> Yes Provide No. _____</p> <p>NOTE: The school requests all parents wanting to attend excursions to have a current working with children check. There is no cost to apply as a volunteer. Apply online at http://www.kidsguardian.nsw.gov.au/child-safe-organisations/working-with-children-check/apply</p>	<p>Do you have a current WWCC number? <input type="checkbox"/> No. <input type="checkbox"/> Yes Provide No. _____</p>

**FAMILY
RELATIONS**

Applicant Lives With:
<input type="checkbox"/> Both Parents <input type="checkbox"/> Mother only <input type="checkbox"/> Father only <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparents <input type="checkbox"/> Shared Care <input type="checkbox"/> Other (please describe)
Where parents are separated, divorced or both parents named above are not the natural parents of the student, please give details:(eg custody, step-parents, guardianship arrangements)

**COURT
ORDERS**

Are there any court orders concerning the welfare, safety or parenting arrangements of your child? Please provide a copy of any relevant current court order

FORMER STUDENTS IN THE FAMILY

Student's relatives who were former students of the school

Name at school	Dates attended Mumbulla	Relationship to student

Emergency Contact Details and Medical Information Form

It is the responsibility of parents/guardians to advise the School of any changes to contact or medical information

EMERGENCY CONTACT INFORMATION

Emergency contact details

OTHER THAN
Parents/guardians in case parents/guardians are unavailable

	FIRST EMERGENCY CONTACT	SECOND EMERGENCY CONTACT
Name		
Relationship to student		
Phone numbers	Work Home Mobile	Work Home Mobile

MEDICAL HISTORY AND INFORMATION

Please give full details and attach paper if space is insufficient. Please attach all supporting documentation

Current disabilities, medical conditions, illnesses or accidents	Does the student have any current physical, cognitive, social-emotional or sensory disabilities? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Please write details in next section & provide relevant documentation.</i> Does the student have any serious medical condition or illness (including childhood illnesses) <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Please write details in next section & provide relevant documentation</i>
Past disabilities, medical conditions, illnesses, accidents or hospitalisation	Has the student had any physical, cognitive, social-emotional or sensory disabilities? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Please write details in next section & provide relevant documentation</i> Has the student had any serious medical condition, illness (including childhood illnesses), accidents or hospitalisation in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Please write details in next section & provide relevant documentation</i>
Vaccination Status	Schools are required to keep records of the vaccination status of children enrolled Has the student been vaccinated? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Vaccination History Statement attached <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Conscientious Objection Form attached <input type="checkbox"/> Yes <input type="checkbox"/> No
Any dietary considerations	

**STUDENT
MEDICAL
INFORMATION
DETAILS**

Description of any <u>current</u> medical condition or allergy, symptoms & management	
Severity of symptoms	<input type="checkbox"/> Mild <input type="checkbox"/> Moderate —Self managed with medication <input type="checkbox"/> Severe —possibility of an emergency arising
Description of any <u>past</u> disability, medical condition or allergy, symptoms & management	
Severity of symptoms	<input type="checkbox"/> Mild <input type="checkbox"/> Moderate —Self managed with medication <input type="checkbox"/> Severe —possibility of an emergency arising

**DOCTOR'S
INFORMATION**

Doctor's Name		Phone:	
Medicare Number	Pos. _____	Expiry Date	
Ambulance cover	<input type="checkbox"/> Yes <input type="checkbox"/> No	Covered by	
Private Health Insurer		Insurer No.	

**MEDICAL
TREATMENTS
AND
EXCURSION
INFORMATION**

I give consent to the School, in the best interest of my child, and as it considers necessary or expedient (if reasonable attempts to contact the nominated emergency contacts have failed) to:

obtain medical advice and treatment; or

obtain medical advice and treatment except for the following treatments: (insert excluded treatments below)

If the School considers the excluded treatment is necessary, I request that the School take the following steps in its place:
(insert alternative treatments)

I give consent for Mumbulla School to administer Rescue Remedy to my child if necessary

Yes No

In the event my child discovers a tick on their person during an excursion or school day I consent to its removal using either, or both of, the following:

Spray containing ether Yes No

Lyclear (topical cream) Yes No

I give consent for my child to use sunscreen provided by the School as required. Yes No

I give consent for my child to use insect repellent provided by the School as required. Yes No

**GENERAL
CONSENT—
LOCAL AREA
EXCURSIONS**

I give consent for my child to participate in walking excursions around the Bega township accompanied by the Class teacher. Yes No

**PUBLICITY
CONSENT**

The school would like to be able to publish photos of children from Mumbulla School for publicity purposes. Photos of your child may be placed in the weekly Bulletin, local newspapers, Mumbulla School Facebook page and other media publications which the Public Relations group deem appropriate and in accordance with our policies. The School will only include photos of your child in an appropriate manner that is in line with the ethos of this school. Please mark in the boxes below your preferences. Please be aware that Bega District News publish all articles to their Facebook Page

I consent to my child’s photo being used for the Mumbulla School Bulletin Yes No

I consent to my child’s photo being used for media publication Yes No

**HEAD LICE
INSPECTION
CONSENT**

Throughout your child’s schooling at Mumbulla school will be arranging head lice inspections of students through our ‘Nit Busting’ program. The management of head lice infection works best when all children are involved in this program. The school is aware that this can be a sensitive issue and is committed to maintaining student confidentiality and avoiding stigmatisation. For more information on our Head Lice Policy and Nit Busting procedures you can visit our website on www.mumbullaschool.com.au

I hereby give consent for my child to participate in the school’s ‘Nit Busting’ program for the duration of their schooling at Mumbulla School. Yes No

Fee Payment Details and Parent/Guardian Signatures

**DETAILS OF
PERSON/S
RESPONSIBLE
FOR
PAYMENT OF
SCHOOL FEES,
CHARGES &
SUNDRY
COSTS**

	NAME 1	NAME 2
Relationship to Student		
Title (e.g. Mr, Ms, Mrs, Dr)		
Surname		
Given Names		
Mailing Address		
Telephone	Work:	Work:
	Home:	Home:
	Mobile	Mobile:
Split Fees	In circumstances where parent/guardians are living separately will a split invoice be required? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Signature	Date:	Date

**SEPARATED
FAMILIES
ONLY**

SIGNATURES

*Both parents or guardians **MUST** sign this application form, where applicable*

I/We hereby apply to Mumbulla School for Rudolf Steiner Education for the enrolment of the above student.

I/We understand that acceptance of this form by Mumbulla School does not constitute admission of the student nor guarantee an interview or the offer of a place.

I/We understand that we will be required to agree to the terms of the *Privacy Policy - Collections Notice, Enrolment Policy, and the School Fee Contract* at the time our child is offered a place at the School, and that these conditions of entry can be updated from time to time.

I/We declare that we support Mumbulla School's ethos and abide by the school's Policies, Procedures and Codes of Conduct.

I/We enclose our application fee of \$300. This fee is to cover administration costs and \$100 is non-refundable regardless of a place being available or not.

I/We give permission for the Education/Business Manager to seek information, including information about previous payment history from previous school/institutions attended by the student.

I/We hereby declare that the information provided by us is true and correct at the time of the application.

Signature of Mother/Parent 1/Guardian 1			
Print Name		Date	_____ _____ _____
Signature of Father/Parent 2/Guardian 2			
Print Name		Date	_____ _____ _____

APPLICATION FEE (\$200 is refundable as outlined in the Fee Policy)

Paying by	<input type="checkbox"/> I have already paid the one off family application fee for an older sibling <input type="checkbox"/> Cash <input type="checkbox"/> EFT <input type="checkbox"/> Cheque/Money Order (made payable to Mumbulla School for Rudolf Steiner Education)																	
Card Number														Expiry				
Name on Card													Amount Paid	\$300				
Mumbulla Bank Details for Direct Deposit	<i>Bank details: BSB - 062 505 Account No.- 2800 3092</i> <i>Note: Please use payer's name as the reference (not the student's name)</i>																	
Signed																	Date:	

SIGNED ON BEHALF OF Mumbulla School

_____EM Date: _____

_____BM Date: _____

List of Parental Occupation Groups

Group 1: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior executive/manager/department head in industry, commerce, media or other large organisation.

Public service manager (Section head or above), regional director, health/education/police/fire services administrator

Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]

Defence Forces Commissioned Officer

Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others.

Health, Education, Law, Social Welfare, Engineering, Science, Computing professional

Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]

Air/sea transport [aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller]

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/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/inventory clerk, purchasing/order clerk,

freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk]

Skilled office, sales and service staff.

Office [secretary, personal assistant, desktop publishing operator, switchboard operator]

Sales [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]

Service [aged/disabled/refugee/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 [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, green keeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]