



Application to Enrol at Sydney Catholic Schools

All information provided in this application is treated in accordance with the Sydney Catholic Schools Privacy Policy (available www.sydcaholicsschools.nsw.edu.au) and the Standard Collection Notice found at **page 15** of this form.

Proposed school:

Please list below any schools you have applied to attend

1.	Suburb:
2.	Suburb:
3.	Suburb:

A. STUDENT DETAILS

First name:	Commencement year/start date:	
Middle name:	Year level e.g. Kindergarten, Year 7:	
Surname:	Previous school (or preschool if applicable):	Year level:
Preferred name:	Date arrived in Australia (if applicable):	
Sex (please tick one): <input type="checkbox"/> Male <input type="checkbox"/> Female	First Australian school year (e.g. 2013):	
Date of birth:	Religion:	
Country of birth:	Main language spoken at home:	
Nationality:	Other language(s) spoken at home:	
Ethnic origin:	Does your child attend a Community Language School: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Contact/Mailing Details

Family surname:		
Name to be used for all correspondence: e.g. Mr and Mrs Smith		
Student residential address: e.g. 1 Black Street	Suburb:	Postcode:
Correspondence address: e.g. PO Box 123	Suburb:	Postcode:
Current Parish:		

Children in family at Sydney Catholic Schools

Please list below all children in the family attending Sydney Catholic Schools

Birth order	Full Student Name	School they attend (current year)	Year level
Child 1			
Child 2			
Child 3			
Child 4			

Sacramental Details

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

Indigenous Identifier

Is the student of Aboriginal or Torres Strait Islander origin?: ☐ Yes ☐ No (If Yes, please tick one box below)

<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Torres Strait Islander	<input type="checkbox"/> Both Aboriginal and Torres Strait Islander
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Student's Residency Status

What is the student's residency status? (Evidence must be provided)

<input type="checkbox"/> Australian Citizen	<input type="checkbox"/> New Zealand Citizen (ETV)	<input type="checkbox"/> Permanent Resident (PRS)	<input type="checkbox"/> Temporary Visa Holder (ETV)
<input type="checkbox"/> Bridging Visa (BRVS)	<input type="checkbox"/> Tourist or Visitor Visa (RSVS)	<input type="checkbox"/> Full Fee Paying Overseas Student (OS)	

For students born overseas, on what date did the student last arrive in Australia? (dd/mm/yyyy)

If the student is a visa holder please provide the following information

Current visa sub-class:	Visa expiry date: (dd/mm/yyyy)
Passport number:	Passport expiry date: (dd/mm/yyyy)

Previous Schools

Please provide details of any school where the student has previously been enrolled (NSW, interstate or overseas) starting with the most recent. If more space is needed, please attach a page marked 'Previous Schools.'

Name of School(s) attended (start with most recent)	Location of School(s)	Dates of Attendance
		From: To:
		From: To:
		From: To:
		From: To:

For enrolments in Year 7 or Year 11, please provide the name of the school where the student is currently enrolled.

Kindergarten Students ONLY

In the year before school, has the student been in non-parental care on a regular basis and/or attended any other educational programs?
☐ Yes ☐ No

If yes, indicate any of the following that apply and show if this was part time (less than 15 hours per week) or full time (15 hours or more per week).

<input type="checkbox"/> Preschool	<input type="checkbox"/> Part time <input type="checkbox"/> Full time	Postcode:
<input type="checkbox"/> Long Day Care (with a preschool program)	<input type="checkbox"/> Part time <input type="checkbox"/> Full time	Postcode:
<input type="checkbox"/> Long Day Care (without a preschool program)	<input type="checkbox"/> Part time <input type="checkbox"/> Full time	Postcode:
<input type="checkbox"/> Family Day Care	<input type="checkbox"/> Part time <input type="checkbox"/> Full time	Postcode:
<input type="checkbox"/> Grandparent	<input type="checkbox"/> Part time <input type="checkbox"/> Full time	
<input type="checkbox"/> Other formal or informal care (e.g. occasional care, playgroup, other relative, nanny, friend, neighbour)	<input type="checkbox"/> Part time <input type="checkbox"/> Full time	

Name of preschool/long day care centre or other formal care service:

Preschools usually operate on school days and in school terms, and provide structured early learning to children in the year or two before school.

Long day care services offer all-day care for most of the year for children aged 0 to 6. They may also offer 'preschool programs' specifically for children in the year or two before school.

B. FAMILY AND RELATIONSHIPS

This section is for the parents/legal guardians/primary carers who have parental responsibility and with whom the student usually lives.
Are there any Family Law Orders, other court orders or Parenting Plans that have been issued in relation to the enrolling student?
☐ Yes ☐ No – if Yes supporting documentation is required to be provided.

Parent 1 with whom the student normally lives (residential parent/guardian)

Title: <i>e.g. Mr/Mrs/Ms/Dr</i>		Surname:	
First given name:		Other given name/s:	
Relationship to student: <i>e.g. Mother/Father</i>		Date of birth: <i>(dd/mm/yyyy)</i>	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Home phone:		Home mobile:	
Email:		Work phone:	Work mobile:
Residential address: <i>e.g. 1 Black Street</i>		Suburb:	Postcode:
Correspondence address: <i>e.g. PO Box 123</i>		Suburb:	Postcode:
Occupation:			
<p>Occupation Group – Please choose the group that best describes your occupation. Mark one box only and see page 13 for more info and examples</p> <p><input type="checkbox"/> Group 1 – Senior management in large business organisation, government administration and defence, and qualified professionals</p> <p><input type="checkbox"/> Group 2 – Other business managers, arts/media/sportspersons and associate professionals</p> <p><input type="checkbox"/> Group 3 – Tradespeople, clerks and skilled office, sales and service staff</p> <p><input type="checkbox"/> Group 4 – Machine operators, hospitality staff, assistants, labourers and related workers</p> <p><input type="checkbox"/> Group 8 – Have not been in paid work in the last 12 months</p>			
School Education – What is the highest level of schooling completed? (If never attended school, tick 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	
Educational Qualifications –What is the highest qualification completed?		<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	
Do you speak a language other than English at home?		<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , please list below: 1. _____ 2. _____	
Country of birth:		Nationality:	
Ethnic origin:		Religion:	

Parent 2 with whom the student normally lives (residential parent/guardian)

Title: <i>e.g. Mr/Mrs/Ms/Dr</i>		Surname:	
First given name:		Other given name/s:	
Relationship to student: <i>e.g. Mother/Father</i>		Date of birth: <i>(dd/mm/yyyy)</i>	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Home phone:		Home mobile:	
Email:		Work phone:	Work mobile:
Residential address: <i>e.g. 1 Black Street</i>		Suburb:	Postcode:
Correspondence address: <i>e.g. PO Box 123</i>		Suburb:	Postcode:
Occupation:			
<p>Occupation Group – Please choose the group that best describes your occupation. Mark one box only and see page 13 for more info and examples</p> <p><input type="checkbox"/> Group 1 – Senior management in large business organisation, government administration and defence, and qualified professionals</p> <p><input type="checkbox"/> Group 2 – Other business managers, arts/media/sportspersons and associate professionals</p> <p><input type="checkbox"/> Group 3 – Tradespeople, clerks and skilled office, sales and service staff</p> <p><input type="checkbox"/> Group 4 – Machine operators, hospitality staff, assistants, labourers and related workers</p> <p><input type="checkbox"/> Group 8 – Have not been in paid work in the last 12 months</p>			
School Education – What is the highest level of schooling completed? (If never attended school, tick 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	
Educational Qualifications –What is the highest qualification completed?		<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	
Do you speak a language other than English at home?		<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , please list below: 1. _____ 2. _____	
Country of birth:		Nationality:	
Ethnic origin:		Religion:	

Non-residential Parent/Guardian

Title: <i>e.g. Mr/Mrs/Ms/Dr</i>		Surname:	
First given name:		Other given name/s:	
Relationship to student: <i>e.g. Mother/Father</i>		Date of birth: <i>(dd/mm/yyyy)</i>	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Home phone:		Home mobile:	
Email:		Work phone:	Work mobile:
Residential address: <i>e.g. 1 Black Street</i>		Suburb:	Postcode:
Correspondence address: <i>e.g. PO Box 123</i>		Suburb:	Postcode:
Occupation:			
Occupation Group – Please choose the group that best describes your occupation. Mark one box only and see page 13 for more info and examples <input type="checkbox"/> Group 1 – Senior management in large business organisation, government administration and defence, and qualified professionals <input type="checkbox"/> Group 2 – Other business managers, arts/media/sportspersons and associate professionals <input type="checkbox"/> Group 3 – Tradespeople, clerks and skilled office, sales and service staff <input type="checkbox"/> Group 4 – Machine operators, hospitality staff, assistants, labourers and related workers <input type="checkbox"/> Group 8 – Have not been in paid work in the last 12 months			
School Education – What is the highest level of schooling completed? (If never attended school, tick 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	
Educational Qualifications –What is the highest qualification completed?		<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	
Do you speak a language other than English at home?		<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , please list below: 1. 2.	
Country of birth:		Nationality:	
Ethnic origin:		Religion:	

C. ADDITIONAL CONTACTS

Emergency Contact (must be provided)

Title: <i>e.g. Mr/Mrs/Ms/Dr</i>		Surname:		Given Name/s:	
Relationship to student: <i>e.g. Aunt/grandfather</i>		Date of birth: <i>(dd/mm/yyyy)</i>		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Address:		Suburb:		Postcode:	
Email:		Phone:		Mobile:	
Do you speak a language other than English at home?		<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , please list below: 1. 2.			

D. STUDENT DETAILS – ADDITIONAL INFORMATION

Medical Details

Parent/Carer Permission

I give my **permission** for the school to seek information from the doctor/medical centre named below regarding any allergy or medical condition experienced by the student. ☐ Yes ☐ No

Doctor/Medical Centre name:

Phone number:

Student's Medicare number:

Medicare expiry date:

Immunisations: Is the student's immunisation up to date? ☐ Yes ☐ No

If no, the student will be considered 'at risk' and may be excluded if there is an outbreak of an infectious disease in line with the SCS Childhood Infectious Diseases Policy available at www.syd catholicschools.nsw.edu.au.

Date of last Tetanus injection/booster:

It is essential that you inform the Principal before your child starts school if he or she has any allergies/medical alerts, including ANAPHYLAXIS, or other medical conditions (e.g. allergies to nuts, penicillin, bee stings, asthma, diabetes, epilepsy management etc.). You must also advise the school as soon as you are aware of any new allergies or other medical conditions.

Anaphylaxis condition
e.g. peanuts, insect stings

☐ Action Plan Included

Carries EpiPen: ☐ Yes ☐ No

EpiPen expiry date:

Allergies e.g. hayfever

Other medical condition (s)
e.g. asthma, diabetes, epilepsy

Medication – Please list any prescribed medication to be taken by the student

Special Circumstances

Are there any circumstances regarding the student seeking to be enrolled that the school should know prior to the enrolment? (e.g. mature age, living apart from parental supervision, subject of a court order, out-of-home care arranged by the state).

If there are any court orders, please attach a copy of current court orders.

☐ Yes ☐ No If Yes, please provide a brief description of the circumstances.

Diverse Learning Needs

Indicate whether the student applying for enrolment has any known or suspected exceptional abilities, disability, complex social and emotional needs or other additional needs. Please indicate by ticking the boxes below.
Please note if you have answered yes to any of the descriptors below, supporting documentation **MUST** be provided.

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

<input type="checkbox"/> Acquired permanent injury	<input type="checkbox"/> Autism Spectrum Disorder	<input type="checkbox"/> Complex social and emotional needs	<input type="checkbox"/> Exceptional abilities (giftedness in any domain)
<input type="checkbox"/> Hearing impairment	<input type="checkbox"/> Intellectual disability/developmental disorder	<input type="checkbox"/> Mental health disorder	<input type="checkbox"/> Mobility/physical disability
<input type="checkbox"/> Receptive and/or expressive language disorder	<input type="checkbox"/> Specific learning disorder	<input type="checkbox"/> Vision impairment	<input type="checkbox"/> None of the above

☐ **Other** (please specify):

In accordance with current legislation and educational best practice, Sydney Catholic Schools recognises that specific adjustments may be required to support students with exceptional abilities, disability, complex social and emotional needs or other additional needs. It is imperative that when applying for enrolment, parents provide copies of all current assessments, records of clinical interventions and contact details of treating professionals to assist the school in discerning the level of adjustments required for the prospective student.

What was provided for your child in his/her previous school/preschool/educational setting? (Please tick as many as applicable).

<input type="checkbox"/> Access to assistive technology	<input type="checkbox"/> Adjusted teaching and learning strategies	<input type="checkbox"/> Hearing or vision supports
<input type="checkbox"/> English language proficiency support	<input type="checkbox"/> Adjustments to the educational environment (equipment, furniture and learning spaces)	<input type="checkbox"/> Personal care support
<input type="checkbox"/> Reader or scribe	<input type="checkbox"/> Special provisions for learning tasks/assessments	<input type="checkbox"/> Oral interpreting
<input type="checkbox"/> Early intervention services, e.g. speech therapy, occupational therapy, other therapies, targeted teacher assistant support.		

☐ **Other** (please specify):

Please add any additional information that may assist the school to plan adjustments to meet your child's particular needs. The development of a Personalised Plan for students is an imperative component of school support for students with particular needs.

Does your child have an existing Personalised Plan (developed in their previous school setting)? ☐ Yes ☐ No

Is the student under the care of a specialist practitioner/s? ☐ Yes ☐ No

Specialist name:

Contact number:

Specialist name:

Contact number:

It is essential that the school has all the information about the needs of a student in order to assess what REASONABLE ADJUSTMENTS are required to meet those needs.

The school MUST be advised promptly of any changes to the needs of the student.

Student's History Relevant to Risk Assessment

This 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 safely 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, preschool 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 used 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

☐ **Other** (please specify):

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.

E. SCHOOL FEE ADMINISTRATION

The collection of school fees will be in accordance with the SCS School Fee Collection Policy available at www.sydcatholicschools.nsw.edu.au.

Please complete as appropriate	Parent/Guardian/Carer	Parent/Guardian/Carer
Billing title to be used on correspondence <i>e.g. Mr & Mrs Smith</i>		
First name and surname		
Billing address		
Suburb and postcode		
Billing email address		
Preferred payment method	<input type="checkbox"/> BPay <input type="checkbox"/> Eftpos <input type="checkbox"/> Cash <input type="checkbox"/> Cheque If you require one of the following please tick: <input type="checkbox"/> Standing Authority <input type="checkbox"/> CentrePay	<input type="checkbox"/> BPay <input type="checkbox"/> Eftpos <input type="checkbox"/> Cash <input type="checkbox"/> Cheque If you require one of the following please tick: <input type="checkbox"/> Standing Authority <input type="checkbox"/> CentrePay
Preferred payment frequency	<input type="checkbox"/> Annual (start of year) <input type="checkbox"/> Fortnightly <input type="checkbox"/> Standard (first 3 terms) <input type="checkbox"/> Monthly	<input type="checkbox"/> Annual (start of year) <input type="checkbox"/> Fortnightly <input type="checkbox"/> Standard (first 3 terms) <input type="checkbox"/> Monthly
<input type="checkbox"/> I confirm that any fees due at the student's previous school have been paid.		

F. DOCUMENTATION CHECKLIST

When you submit this application please provide copies of the following documentation:

- ☐ Birth Certificate
- ☐ Baptismal Certificate
- ☐ Parents photo identification
- ☐ Immunisation Certificate (primary school applicants only)
- ☐ Most recent previous school reports, NAPLAN results and other external test results (where applicable)

In addition, if your child is the subject of family law matters you will need to provide:

- ☐ Any relevant family court orders or other relevant court orders particularly Apprehended Violence Orders (AVOs) applicable to this student

In addition, if your child has health, disability or other support needs you will need to provide:

- ☐ Relevant medical information including clinical/educational assessments where applicable
- ☐ All current assessments, records of clinical interventions related to exceptional abilities, disability, complex social and emotional needs or other additional needs as named in the section on diverse learning

In addition any of the following documents applicable to the enrolling student:

- ☐ Evidence of residency status eg: Citizenship documentation, Visa Grant Notice, Passport
- ☐ Evidence of time out of country for trips longer than 10 weeks e.g. passport, plane tickets, overseas school reports
- Please note a student born in Australia is only automatically an Australian citizen if at least one parent was an Australian citizen or permanent resident when the student was born.
- Evidence of a student's residency status must be provided with this application

G. OFFICE USE ONLY

Student first name:	Student surname:
Student code:	Family code:
Current school USIN code:	Current school USIN searched:
Student fee flag:	Family fee flag:
Student identity document supplied: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Other	
Residency status evidence supplied: <input type="checkbox"/> Passport <input type="checkbox"/> Visa Grant Notice	
Visa status verified: <input type="checkbox"/> OS <input type="checkbox"/> BRVS <input type="checkbox"/> RSVS <input type="checkbox"/> ETV <input type="checkbox"/> PRS	English Language Proficiency: <input type="checkbox"/> LBOTE <input type="checkbox"/> EAL/D <input type="checkbox"/> ESLASSIST <input type="checkbox"/> New Arrivals Program
Parent/Guardian 1	Fee-payer: <input type="checkbox"/> Yes <input type="checkbox"/> No Child Protection Declaration (WWCC): <input type="checkbox"/> Yes <input type="checkbox"/> No
Parent/Guardian 2	Fee-payer: <input type="checkbox"/> Yes <input type="checkbox"/> No Child Protection Declaration (WWCC): <input type="checkbox"/> Yes <input type="checkbox"/> No
Non-Residential Parent (if applicable)	Fee-payer: <input type="checkbox"/> Yes <input type="checkbox"/> No Child Protection Declaration (WWCC): <input type="checkbox"/> Yes <input type="checkbox"/> No

H. DECLARATION

Please sign to acknowledge the following:

1. I/we consent to the school and/or the Sydney Catholic Schools Office gaining access to relevant information about the student on whose behalf this application for enrolment is made, held by previous educational institutions, healthcare professionals or other agencies as required, for the purposes of determining whether or not to accept this Application for Enrolment.
I/we understand that this may include visits to preschools or prior educational settings.
I/we understand that the information sought may include information related to any of the questions I/we have answered in this Application for Enrolment.
2. I/we understand that the school and/or the Sydney Catholic Schools Office may approach previous educational institutions, healthcare professionals or other agencies directly to request information related to any of the questions I/we have answered in this Application for Enrolment.
3. I/we declare that the information provided in this Application for Enrolment is to the best of my/our knowledge and belief, accurate and complete.
4. I/we agree to notify the school and/or Sydney Catholic Schools of any change in circumstances including parental circumstances, care arrangements, financial circumstances and special needs of the student applying to enrol, that require amendment/s to the information provided in this Application for Enrolment.
I/we understand that I/we or another person may be requested to complete a new Application for Enrolment on behalf of the student and provide relevant documents.
5. I/we understand that if any misleading information has been provided, or any omission of significant, relevant information made in this Application for Enrolment, an Enrolment Offer will not be made, or if discovered after acceptance of the Enrolment Offer, Sydney Catholic Schools reserves its rights to withdraw the offer.

6. I/we consent to the disclosure of information provided in this Application for Enrolment as described in the Standard Collection Notice.

☐ Personnel from Sydney Catholic Schools may contact me from time-to-time regarding system initiatives, for my feedback on educational improvements as well as other related topics or offers.

Signature of enrolling parent/guardian/carer

PRINT NAME:	SIGNATURE: X	Date:
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Signature of enrolling parent/guardian/carer

PRINT NAME:	SIGNATURE: X	Date:
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Please note:

- This Application for Enrolment is to register the parent/guardian's interest in their child/dependent attending a Sydney Catholic School.
- The purpose of this Application for Enrolment is to provide information required by the enrolment committee so that it can assess the information, make relevant enquiries and determine whether an Enrolment Offer will be made.

Parent Occupation Groups

<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 	<ul style="list-style-type: none"> • 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]
<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, proof reader, sportsman/woman, coach, trainer, sports official] 	<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 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 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, 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] 	<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 Forces 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]

Please note:

- 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 tick the Group 8 box.

Standard Collection Notice

The Privacy Act 1988 / Privacy Amendment (Enhancing Privacy Protection) Act 2012

This Notice is provided to you by the school (the School) and Sydney Catholic Schools Limited ACN 619 137 343 as trustee for the the Sydney Catholic Schools Trust ABN 26 158 447 082 (SCS). It specifically itemises the reason for collecting information about students and their families and the way in which information will be used by the school.

1. The School collects personal information, including sensitive information about students and parents or guardians before and during the course of a student's enrolment at the School. This may be in writing or in the course of conversations.
2. The primary purpose of collecting this information is to enable the School to provide schooling to the students enrolled at the school, to satisfy its legal obligations, particularly to exercise its duty of care, and perform necessary associated administrative activities, which will enable students to take part in all the activities of the School.
3. We are required by legislation to collect and/or disclose certain information. For example, under relevant Education, Public Health, Safety and Child Protection legislation.
4. We may ask you to provide medical reports about students from time to time. Health information about students is 'sensitive information' within the terms of the Australian Privacy Principles (APPs), under the Privacy Act 1988.
5. The School may use online or 'cloud' service providers to store personal information and to provide services to the School that involve the use of personal information, such as services relating to email, instant messaging and education and assessment applications. Some limited personal information may also be provided to these service providers to enable them to authenticate users that access their services. This personal information may reside on a 'cloud' service provider's servers which may be situated outside Australia. Further information about the School's use of online or 'cloud' service providers is contained in the School's Privacy Policy and related policies.
6. The School may disclose personal and sensitive information for educational, spiritual, social, administrative and support purposes. This may include to:
 - SCS
 - other schools and teachers at those schools
 - government departments
 - the Catholic Education Commission
 - the School's local diocese and the parish
 - the Archbishop
 - other related church agencies/entities
 - other Dioceses
 - schools within other Dioceses
 - medical practitioners
 - people providing educational, support and health services to the School, including specialist visiting teachers, coaches, volunteers, counsellors and providers of learning and assessment tools
 - assessment and educational authorities, including the Australian Curriculum, Assessment and Reporting Authority (ACARA) and NAPLAN Test Administration Authorities (who will disclose it to the entity that manages the online platform for NAPLAN)
 - people and organisations 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 child protection laws.
7. We will disclose information collected from students to their parents or guardians.
8. The School may engage in fundraising and marketing activities. From time to time we may contact you about fundraising and marketing activities. We may disclose personal information to organisations that assist in the School's fundraising and marketing activities solely for that purpose. Information received from you may be used to make an appeal to you. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
9. From time to time we will publish information such as academic and sporting achievements, student activities and similar news in School newsletters and magazines, on our intranet and on our website. Where consent has been provided, this may include photographs and videos of student activities such as sporting events, school camps and school excursions. The School will obtain permissions from the student's parent or guardian (and from the student if appropriate) if we would like to include such photographs or videos or other identifying material in our promotional material, or otherwise make this material available to the public such as on the internet.
10. We may include students' and parents' contact details in a class list and School directory where consent has been provided.
11. 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. We will treat any personal information that you provide us with, including personal information of others, in accordance with our Privacy Policy and legal obligations.
12. The Privacy Policy, accessible on the SCS website at <https://sydcatholicschools.nsw.edu.au/2016/03/06/privacy-policy/>, sets out how parents or students may seek access to and correction of personal information which the School has collected and holds. Please note, access may be refused in certain circumstances, such as 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 student, or where students have provided information in confidence. Any refusal will be notified in writing with reasons, if appropriate.
13. The Privacy Policy sets out how parents and students can make a complaint about a breach of the APPs and how the complaint will be handled.
14. The Standard Collection Notice may be updated to ensure compliance with legislative and regulatory changes, and to incorporate changes to SCS policies. The most recent version of the Standard Collection Notice is available on the SCS website at <http://sydcatholicschools.nsw.edu.au/>



Sydney Catholic Schools

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AS TRUSTEE FOR THE SYDNEY CATHOLIC SCHOOLS TRUST ABN 26 158 447 082

