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VSN Number: _____

Application for Enrolment

STUDENT DETAILS

Surname Given Name Male Female

Home address Postcode

Home Phone Email

Country of Birth Place of Birth Date of Birth/...../..... Age

If not born in Australia, does the student hold an Australian Permanent Residency Status? YES NO (A copy of the student's birth & immunisation certificates must accompany this application)

Visa No. Subclass (A copy of Visa documents must be attached)

Religious Denomination Nationality

Does your family have regular commitment to Church? YES NO (If Yes, please provide details)

Name of Congregation Suburb

Main Language Spoken at Home

Intended Year of Entry 20____

Year level at which student will commence on entry Prep 1 2 3 4 5 6 7 8 9 10 11 12
(please circle appropriate year level)

Present school/kindergarten Telephone

Student resides with: Both parents Mother Father Caregiver

Areas in which special needs/remedial help may be required

FAMILY DATA

Parent Details

Father or Caregiver (please circle)

Surname Given Name Title Mr / Dr / Rev / Other

Home address (if different from above) Postcode

Mailing address (if different to home) Postcode

Home Phone Mobile Business Phone

Religious Denomination Nationality

Occupation Type of Industry

Employer

Email (that you would like the College Newsletter / or notices sent to)

Mother or Caregiver (please circle)

Surname Given Name Title Mr / Dr / Rev / Other

Home address (if different from above) Postcode

Mailing address (if different to home) Postcode

Home Phone Mobile Business Phone

SIBLING DETAILS

Sibling 1 Name Date of Birth..... Male Female
(Surname) (Given Name)

Sibling 2 Name Date of Birth..... Male Female
(Surname) (Given Name)

Sibling 3 Name Date of Birth..... Male Female
(Surname) (Given Name)

PREVIOUS AFFILIATION

Any previous affiliation with a Lutheran School? YES NO

If YES, please state:

HOW DID YOU LEARN ABOUT GOOD NEWS LUTHERAN COLLEGE?

Word of mouth Media Website Other

OFFICE USE ONLY

Date received

Application fee \$.....

Receipt number

CHECK LIST

Please return:

- Completed Application for Enrolment form
- Copy of Birth Certificate or Extract (this will be retained by the College)
- For Junior School, if child is of required age (children must be 5 years of age by April 30th of the year of intended enrolment into the Prep class):
 - * School Entry Immunisation Certificate which states, "This child has received all vaccines required by 5 years of age"
- Application fee of \$75, which is non-refundable, is payable with each student's application form

Once the Application for Enrolment form has been submitted, the following will occur:

- An interview with the Principal will be arranged for both parents/caregivers and student
- A non-refundable Bond will be payable to secure your child's position at the time an enrolment is accepted. This acceptance Bond will be refunded when the child either graduates or is withdrawn from the College.

Payment Method

CASH CHEQUE (Made payable to Good News Lutheran College) VISA MASTERCARD BANKCARD

VISA/MASTERCARD (three-digit code required)

Name on Card (Please Print) Cardholder's Signature

Card Number || Expiry Date |

Amount \$.....

Name

Address Postcode Telephone

Data Collection Notice

The College collects personal information, including sensitive information about students' and parents' or caregivers' before and during 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 your son/daughter. This includes satisfying the needs of parents' and caregivers' and the needs of the student throughout the whole period he/she is enrolled.

Some of the information we collect is to satisfy the College's legal obligations, particularly to enable the College to discharge its duty of care. Certain laws governing or relating to the operation of schools require that certain information is collected. You may contact the College if you have a question about this.

Health information about students is sensitive information within the terms of the National Privacy Principles under the Privacy Act. We require medical reports about students, from time to time. If you do not consent to us obtaining this information, you must advise us in writing.

The College from, time to time, also has to disclose certain personal information and sensitive information to others. This includes other schools, government departments, Lutheran Church of Australia departments, medical practitioners, publications and people providing services to the College including specialist visiting teachers, sports coaches and volunteers.

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

Personal information collected from students is regularly disclosed to their parents and caregivers. On occasions, it is published in College newsletters and magazines, through group photographs and on our Website.

Parents' may seek access to personal information collected about them and their son/daughter by contacting the College. However, there will be occasions when access is denied. Such occasions would include where the release would have an unreasonable impact on the privacy of others or where release may result in a breach of the College's duty of care to the student.

As you may know, the College, from time to time, engages in fundraising activities. The 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.)

We may include your contact details in a class list and College directory (Yearbook). If you do not agree to this, you must advise us immediately.

If you provide the College with the personal information of others, such as doctors or emergency contacts, you should inform them that you are disclosing that information to the College and why. They can access this information if they wish and that the College does not usually disclose the information to third parties.

SIGNATURES OF BOTH PARENTS/CAREGIVERS

I/We warrant the truth and accuracy on the information provided. I/We have read and agree to the above Collection Notice terms and conditions. I/We also authorise for Good News Lutheran College staff to contact the previous school listed, if necessary.

Father/Caregiver Mother/Caregiver

Date ___ / ___ / 20___