

APPLICATION FOR ADMISSION



Santa Maria College

A Ministry of Mercy Education Ltd

Established in 1938 by the Sisters of Mercy Perth, Western Australia

ABN 69 154 531 870

OFFICE USE ONLY

Applic Rcd Receipt No Student Key
Sibling Mother OGA

STUDENT DETAILS

Name
(CHRISTIAN/GIVEN NAMES) (PREFERRED NAME) (FAMILY NAME)
Residential Address Postcode
Date of Birth/...../..... Country of Birth Visa Category
(IF APPLICABLE)
I would like my daughter to enter Year ____ in 20__ as a Day Girl/Boarder (PLEASE CIRCLE ONE)
Present Academic Year Present School
Religious Denomination Parish
Parish Priest/Minister Date of Baptism/...../.....
Nationality Language(s) Spoken at Home

MOTHER/FEMALE GUARDIAN

Title Name
(CHRISTIAN/GIVEN NAMES) (FAMILY NAME)
Residential Address Postcode
Postal Address Postcode
Contact Numbers Home () Mobile
Business () Email
Occupation Business Name
Old Girl of the College Yes No Years attended Class of Maiden Name
Religious Denomination
Nationality Country of Birth
Australian Permanent Resident Yes No

FATHER/MALE GUARDIAN

Title Name
(CHRISTIAN/GIVEN NAMES) (FAMILY NAME)
Residential Address Postcode
Postal Address Postcode
Contact Numbers Home () Mobile
Business () Email
Occupation Business Name
Religious Denomination
Nationality Country of Birth
Australian Permanent Resident Yes No

CUSTODY/GUARDIANSHIP

Parent/Guardian with whom student lives Both parents Mother Only Father Only

Name of person(s) with legal custody/guardianship of the student

Are there any custody conditions enforced by law? Yes No

If applicable, attach a copy of any parenting, protection or restraining orders. I agree to provide updated copies of any of these documents as appropriate.

SIBLINGS CURRENTLY ATTENDING OTHER SCHOOLS

(NAME)	(YEAR LEVEL)	(SCHOOL)
(NAME)	(YEAR LEVEL)	(SCHOOL)
(NAME)	(YEAR LEVEL)	(SCHOOL)

ASSOCIATION WITH SANTA MARIA COLLEGE

Names of other children at present attending/enrolled to attend or who are Old Girls of the College

(NAME)	(YEAR LEVEL)	(HOUSE)
(NAME)	(YEAR LEVEL)	(HOUSE)

Relatives who are Old Girls of Santa Maria College

ADDITIONAL INFORMATION

Please list below any health or education circumstances of which the College needs to be aware in order to provide maximum support to the student (eg medical, physical, learning or special needs). Please provide copies of relevant documents, including medical reports, therapy information, details of past school performance etc

BILLING INSTRUCTIONS - PERSON/S RESPONSIBLE FOR PAYMENT OF SCHOOL FEES

IS SPLIT BILLING REQUIRED YES NO If so, please fill in both names & addresses below. If not, fill in only one.

1. Name (as above if accounts are posted to parents jointly)

Address State Postcode

Telephone (.....) Mobile: Fax (.....)

2. Name (as above if accounts are posted to parents jointly)

Address State Postcode

Telephone (.....) Mobile: Fax (.....)

COMMENTS

Please state the reason you would like your daughter to attend Santa Maria College

AGREEMENT

The College is bound by the National Privacy Principles contained in the Commonwealth Privacy Act.

I/we apply for my/our child to be enrolled at Santa Maria College.

I/we understand and accept that the completion of this application/enrolment form does not guarantee an enrolment interview. Successful applicants will be determined in accordance with the College's Enrolment Policy.

I/we understand and accept that attendance at an interview does not guarantee an enrolment offer being made.

I/we understand that enrolment of a student in one Catholic school does not guarantee the enrolment of that student in any other Catholic school.

I/we have completed this application form fully and to the best of my/our knowledge. Further, I/we acknowledge and accept that if it can be demonstrated that I/we have withheld information relevant to the application/enrolment process, especially in relation to this student's individual needs, medical conditions, health care requirements and/or Parenting Orders, then the enrolment may be refused or terminated on this ground.

I/we have read and fully understand and agree that enrolment in a Catholic school means that we and our child will participate fully in all required aspects of the educational program of the school including the Religious Education and co-curricular program of the school.

I/we have read and understood the Santa Maria College Privacy Policy (published on the College website www.santamaria.wa.edu.au) in relation to the collection of student and parent information.

Should my/our daughter's educational or health circumstances change between the date of registration and entry to the College, I/we will inform the College.

I/we agree to abide by the policies and directions of Santa Maria College and Mercy Education Ltd as they are enacted from time to time.

.....
(FATHER/LEGAL GUARDIAN SIGNATURE)

Date/...../.....

.....
(MOTHER/LEGAL GUARDIAN SIGNATURE)

Date/...../.....

PARENT'S APPLICATION CHECKLIST

The following documents must accompany this application

- A copy of my/our daughter's birth certificate is attached
- A copy of my/our daughter's baptismal certificate is attached
- A non-refundable application fee of \$120 per student is enclosed with this application
- Parish Priest reference attached

OR

- Parish Priest reference being forwarded by Parish Priest

It is advisable applicants retain a photocopy of this application for their records.

OFFICE USE ONLY

Enrolment Confirmed _____

Date _____

Cash

Cheque

EFTPOS

Credit Card

Receipt No _____

Hospitality Compassion Justice Service Excellence