

HAWTHORN WEST PRIMARY SCHOOL: ALTERNATIVE FAMILY

PERSONAL DETAILS OF STUDENT

Name & Surname:	
❖ Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female Birth Date: (dd-mm-yyyy) ____ / ____ / ____

ALTERNATIVE FAMILY DETAILS

ADULT A OF ALTERNATIVE FAMILY DETAILS:

Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Title: (Ms, Mrs, Mr, Dr etc)	
Legal Surname:	
Legal First Name:	
What is Adult A's occupation?	
Who is Adult A's employer?	
In which country was Adult A born?	<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify):
❖ Does Adult A speak a language other than English at home? (If more than one language is spoken at home, indicate the one that is spoken most often.)	<input type="checkbox"/> No, English only <input type="checkbox"/> Yes (please specify): _____
Please indicate any additional languages spoken by Adult A:	
Is an interpreter required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
❖ What is the highest year of primary or secondary school Adult A has completed? (For persons who have never attended school, mark '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
❖ What is the level of the <i>highest</i> qualification the Adult A has completed?	<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma / Diploma <input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualification
❖ What is the occupation group of Adult A? Please select the appropriate parental occupation group from the attached list.	
<ul style="list-style-type: none"> If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached occupation group list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'. ❖ 	

ADULT B OF ALTERNATIVE FAMILY DETAILS:

Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Title: (Ms, Mrs, Mr, Dr etc)	
Legal Surname:	
Legal First Name:	
What is Adult B's occupation?	
Who is Adult B's employer?	
In which country was Adult B born?	<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify):
❖ Does Adult B speak a language other than English at home? (If more than one language is spoken at home, indicate the one that is spoken most often.)	<input type="checkbox"/> No, English only <input type="checkbox"/> Yes (please specify): _____
Please indicate any additional languages spoken by Adult B:	
Is an interpreter required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
❖ What is the highest year of primary or secondary school Adult B has completed? (For persons who have never attended school, mark '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
❖ What is the level of the <i>highest</i> qualification the Adult B has completed?	<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma / Diploma <input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> No non-school qualification
❖ What is the occupation group of Adult B? Please select the appropriate parental occupation group from the attached list.	
<ul style="list-style-type: none"> If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached occupation group list. If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'. ❖ 	

Main language spoken at home:					
Are you interested in being involved in school group participation activities? (e.g. School Council, excursions)		<input type="checkbox"/> Adult A	<input type="checkbox"/> Adult B	<input type="checkbox"/> Both	<input type="checkbox"/> Neither

ALTERNATIVE FAMILY CONTACT DETAILS

ADULT A OF ALTERNATIVE FAMILY CONTACT DETAILS:

Business Hours:

Is Adult A able to be contacted at work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Business hours contact number:		
Is Adult A usually at home during business hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

After Hours:

Is Adult A usually home AFTER business hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mobile number:		
Other after hours contact information:		

Email address:		
Email Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult A's preferred method of contact: (If phone is selected, email shall be used for communication that cannot be sent via phone.)		
<input type="checkbox"/> Mail	<input type="checkbox"/> Email	<input type="checkbox"/> Phone

ADULT B OF ALTERNATIVE FAMILY CONTACT DETAILS:

Business Hours:

Is Adult B able to be contacted at work?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Business hours contact number:		
Is Adult B usually at home during business hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

After Hours:

Is Adult B usually home AFTER business hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mobile number:		
Other after hours contact information:		

Email address:		
Email Notifications:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adult B's preferred method of contact: (If phone is selected, email shall be used for communication that cannot be sent via phone.)		
<input type="checkbox"/> Mail	<input type="checkbox"/> Email	<input type="checkbox"/> Phone

ALTERNATIVE FAMILY HOME ADDRESS

No. & Street:	
Suburb:	
State:	Postcode:
Home telephone number:	Silent Number: <input type="checkbox"/> Yes <input type="checkbox"/> No
Mobile Number:	

ALTERNATIVE FAMILY MAILING ADDRESS

Write "As Above" if the same as Family Home Address

No. & Street or PO Box	
Suburb:	
State:	Postcode:

ALTERNATIVE FAMILY BILLING ADDRESS

Write "As Above" if the same as Family Home Address

No. & Street or PO Box	
Suburb:	
State:	Postcode:
Billing email: <input type="checkbox"/> Adult A <input type="checkbox"/> Adult B <input type="checkbox"/> Other (please specify)	

ALTERNATIVE FAMILY DOCTOR DETAILS

Doctor's Name	
Individual or Group Practice:	<input type="checkbox"/> Individual <input type="checkbox"/> Group
No. & Street or PO Box No.:	
Suburb:	
State:	Postcode:
Telephone Number	Fax Number
Ambulance Subscription: <input type="checkbox"/> Yes <input type="checkbox"/> No	Family Medicare Number:

ALTERNATIVE FAMILY EMERGENCY CONTACTS

	Name	Relationship (Neighbour, Relative, Friend or Other)	Telephone Contact	Language Spoken (If English Write "E")
1				
2				
3				
4				

OTHER ALTERNATIVE FAMILY DETAILS

Relationship of Adult A to Student:	<input type="checkbox"/> Parent	<input type="checkbox"/> Step-Parent	<input type="checkbox"/> Adoptive Parent
	<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Host Family	<input type="checkbox"/> Relative
	<input type="checkbox"/> Friend	<input type="checkbox"/> Self	<input type="checkbox"/> Other
Relationship of Adult B to Student:	<input type="checkbox"/> Parent	<input type="checkbox"/> Step-Parent	<input type="checkbox"/> Adoptive Parent
	<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Host Family	<input type="checkbox"/> Relative
	<input type="checkbox"/> Friend	<input type="checkbox"/> Self	<input type="checkbox"/> Other

The student lives with the Alternative Family:				
<input type="checkbox"/> Always	<input type="checkbox"/> Mostly	<input type="checkbox"/> Balanced	<input type="checkbox"/> Occasionally	<input type="checkbox"/> Never

Send Correspondence addressed to:	<input type="checkbox"/> Adult A	<input type="checkbox"/> Adult B	<input type="checkbox"/> Both Adults	<input type="checkbox"/> Neither
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NOTE: Parents receiving a benefit from Centrelink and holding a current Health Care card or a current Pension card may be entitled to receive the CSEF (Camps, Sports & Excursions Fund). Information on eligibility and application forms are available from the school office.

<p>I certify that the information contained within this Student Enrolment form is correct</p> <p>Signature of Parent/Guardian: _____</p> <p>Date: ____ / ____ / ____</p>
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Thank you for taking the time to complete this Student Enrolment form. We understand that the information you have provided is confidential and will be treated as such, but the details are required to enable staff to properly enrol your child at our school.

❖ These questions are asked as a requirement of the Commonwealth Government. All schools across Australia are required to collect the same information.

PARENTAL OCCUPATION GROUP CODES

The codes outlined below are to be used when providing family occupation details for enrolled students. This information is used for determining funding allocations to schools.

GROUP A 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 B 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 C 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 / refuge / child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

GROUP D 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, 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)
- *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, 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)