

STUDENT ENROLMENT

APPLICATION FORM



The Coast Christian School
a ministry of Coast Community Church

Information about the student

Student's Legal Name

Legal surname or family name

Legal first given name

Legal second given name

Preferred given name (not nickname as this will go on reports)

Has this student been known by any other names?

Other surname

Other given names

Date of birth

If enrolling in Kindergarten the child must turn 5 years of age on or before 30 April in their Kindergarten year. This may be varied if the child has had specialist assessment which recommends that the child commence school at an earlier age or if there are other special circumstances.

Day Month Year

__ / __ / ____

I have attached copy of birth certificate

Gender

Male Female

In which country was the student born?

Australia

Other – please specify

Is the student of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, tick both 'Yes' boxes)

No Yes, Aboriginal

Yes, Torres Strait Islander

Office use

Date Applied

Pastor Attended

Date of Approval

Bond Received

Date Enrolled

Schoolpro

Library Card

Application fee rec'd

Principal Interview

Letter of Offer

Accept Letter Rec'd

Date Started

Reg No

<p>Is the student receiving teacher aide assistance or speech therapy?</p>	<p>No</p> <p>Yes If yes, please give details:</p> <input data-bbox="813 224 1345 309" type="text"/>
<p>Does the student require any extra support or facilities other than those already provided for in a general classroom and school environment?</p>	<p>No</p> <p>Yes If yes, please give details:</p> <input data-bbox="826 472 1345 557" type="text"/>
<p>Has the student had any previous assessment by outside agencies such as an educational psychologist?</p>	<p>No</p> <p>Yes If yes, please provide copies of documentation</p>
<p>Year level in which the student is enrolling?</p> <p>For : _____ (Calendar Year)</p>	<p>Kinder 1 2 3 4 5 6</p>
<p>Current school (if applicable) or if child is currently attending a Preschool name of Preschool</p>	<input data-bbox="839 981 1377 1055" type="text"/>
<p>Information about the family</p>	
<p>Father / Stepfather / Guardian (Please circle)</p> <p>Surname <input data-bbox="359 1301 780 1352" type="text"/></p> <p>Given name(s) <input data-bbox="379 1375 780 1449" type="text"/></p> <p>Title (eg. Mr, Dr) <input data-bbox="406 1464 619 1516" type="text"/></p>	<p>Mother / Stepmother / Guardian (Please circle)</p> <p>Surname <input data-bbox="986 1301 1407 1352" type="text"/></p> <p>Given name(s) <input data-bbox="1007 1375 1407 1449" type="text"/></p> <p>Title (eg. Mr, Dr) <input data-bbox="1034 1464 1246 1516" type="text"/></p>
<p>Name of workplace for contact in school hours</p> <input data-bbox="199 1644 724 1695" type="text"/> <p>Work Telephone _____ Mobile telephone _____</p>	<p>Name of workplace for contact in school hours</p> <input data-bbox="826 1644 1351 1695" type="text"/> <p>Work Telephone _____ Mobile telephone _____</p>
<p>With whom does the student live?</p>	<p>Both Parents Mother Father</p> <p>Other (please specify) <input data-bbox="1088 1906 1420 1980" type="text"/></p>

Number of brothers and sisters

Student's position in family ? _____

Family residential address

* This must not be a post office box

Mailing title eg. Mr & Mrs D Smith

Street number and name

Suburb or town

Postcode

Family mailing address

Please put 'as above' if the same as residential address.

Mailing title eg. Mr & Mrs D Smith

Street number and name

Suburb or town

Postcode

Email address

Home telephone number

Telephone ----- Silent?

Parents or Guardians not living with the child who are to receive correspondence

The school will provide information about this child (eg school reports) to both parents, separated or otherwise – unless there is an express prohibition (eg order of a court), or agreement in writing between the parents that one or other is not to receive such information, or one parent communicates in writing that he or she does not require the information.

Given Names

Surname

Street number or PO Box Number

Suburb or Town

Does your family worship at a church regularly?

Yes If yes, which church do you attend? (This Pastor will be contacted)

No

Church Name _____

Address _____

Pastor/Minister _____

Health Information

The school has a legal duty to care for the student whilst he/she is at school or participating in school activities. To fulfil that duty the school needs to be made aware of any special care or other needs your child may have.

Medical conditions that you think we should know about.

If necessary attach more details of medication conditions, allergies and their treatment.

For students with asthma, a Student Asthma Report should also be completed

Medical Condition

1.

2.

3.

Family doctor or clinic

Doctor or clinic name

Address:

Telephone No. _____

Medicare No _____

Are there any Court parenting orders concerning residence, contact, child maintenance, education, health or other specific issues relating to this student?

No

Yes - Please attach a copy of the order

Consent to school publications

Photographs of students involved in activities, and work by students, are sometimes published to enable the students to share their experiences and enable parents and others to be informed about the school's work. The relevant section of the school website is protected by username and password.

I give consent for photographs that include the student to be published on the school internet site and in other electronic publications Yes No

I give consent for samples of work by the student to be published in print publications within school programs such as the newsletter and magazine. Yes No

Consent to the media

I give consent for the student to be photographed or filmed, and their given name and surname to be published by newspapers, radio and television in stories about education and school activities. Yes No

Excursion consent

I give consent for the student to be allowed to attend all activities that are part of the school's curriculum, such as visits to museums and parks. Yes No

You will still be informed prior to the excursion through the newsletter, or other notice. If you do not want your child to participate in a specific excursion, you will need to give written notice and state the reasons for withdrawing your child. Overnight excursions will require a separate permission form.

Preschool consent – to be completed if the enrolling student is currently in preschool

I hereby give permission for The Coast Christian School to seek information from my child’s preschool, in relation to my child’s progress whilst at that preschool. I understand that this information will be used to assist in the transition of my child into Kindergarten. Yes No

Preschool Name: _____

Address: _____

Progression to High School

Where TCCS has agreements with other Christian schools with respect to graduation from Year 6 at TCCS into Year 7 at those other schools, I understand that a separate application must be made to the relevant high school, and that conditions may apply.

Account Responsibility

Fees, as set by the Board, will be paid in advance prior to commencement of the 3rd week of each term, or by direct bank transfer arrangements each fortnight or by specific agreement confirmed in writing.

1. (a) Dishonour of cheques or direct debits, where the School is not at fault, will attract a minimum fee of \$25.00 to cover bank and Administrative costs.
(b) Overdue fees will attract a minimum late payment fee.
(c) Failure to pay overdue fees or to make suitable payment arrangements may result in referral to a collection agency.
2. If the student is to leave the school, I/we will;
(a) Agree to provide, in writing, one full school term’s notice of our intention to leave the school.
(b) Agree to make payment in full for all fees or monies outstanding and owed to the school.
3. If I/we fail to comply with the requirements of paragraph 2, the school reserves the right to invoice me/us for one Term’s fees in lieu of notice.
4. An enrolment bond of \$400 per child is to be paid upon acceptance of offer of enrolment. This bond will be held until the student leaves the school (a minimum 12 months enrolment period qualifies) and will be refunded providing all fees have been paid and one terms notice has been given.
5. An Application fee of \$50.00 per Application is applicable at the time of lodgement of this form unless otherwise stated.

Accounts are to be sent to:

(Accounts will be sent to the Family mailing address. If different please indicate here).

Name _____

Address _____

Telephone No _____ Relationship to Student _____

(A confirmation letter will be sent to this family and enrolment is subject to signed agreement from this family).

Agreement

As part of this enrolment application I/we agree to

1. allow the child to share fully in the life and program of the School, including Bible lessons and those planned activities which occur outside the normal school day.
2. support the aims of the School, academic, social and spiritual, to facilitate consistency between home and School life.
3. provide the child with all necessary textbooks and other equipment of a personal nature that may be required to enable the child to benefit from the education offered.
4. provide the child with the correct uniform approved by the School, and to ensure that the child is always sent to School neatly and modestly dressed.
5. accept the right of the School to employ such discipline as it deems wise and expedient for the child and agree to uphold in every way possible the School's authority and right to administer appropriate discipline in accordance with the policies of the School.
6. pay school fees in accordance with the School Fee Policy.
7. give at least one school term's notice of termination of enrolment , with failure to do so rendering me/us liable for one term's fees.
8. Whilst present on the School property, or at a gathering involving students of our School, the student will behave in a way that does not bring dishonour to the name of Christ or disgrace to the School.
9. The student will obey the rules of the School and these enrolment conditions where applicable.
10. The School may suspend or terminate enrolment at its discretion for failure to comply with these conditions or other serious breaches of the School's integrity.
11. The School reserves the right to terminate or review enrolment if relevant information is not disclosed.
12. Students and Parents are expected to abide by all school policies regarding acceptable use of computers including the internet.

NOTE: any misleading or inaccurate information may render this application null and void.

I/we have read these statements and conditions of enrolment and request that our child be admitted as a student to The Coast Christian School and wish to be interviewed regarding this. We recognise that this is not an Enrolment form but an Application for Enrolment. Having studied the Statement of Faith of the School we hereby accept this as the basis for our child's education on acceptance.

Father / Stepfather / Guardian

Signed:

Date:

Mother / Stepmother / Guardian

Signed:

Date: