International Chinese School
国际中文学校
Enrolment Application

211 Pacific Highway, St Leonards, NSW 2065 Telephone: +61 2 8440 8450 Fax: +61 2 9419 2786
Email: registrar@intcs.nsw.edu.au   Website: www.intcs.nsw.edu.au

1. STUDENT INFORMATION

Family Name: ....   First Name/s: ....

Preferred Name: ………………………………………………….   Gender: ◯ Male ◯ Female

Date of Birth: .... / .... / ....   Religion: .... Denomination: …………………………………

Commencing Year: ....   ◯ Kindergarten

Student's Nationality: ....

Country of Birth: ....   Language spoken at home: …………………………………………………….

Residential Address: ....

.... Postcode: ....

Residential Telephone: ....

Please tick the appropriate boxes from the following list:

Student resides with: ◯ Both parents ◯ One Parent ◯ Guardian

Aboriginal: ◯ Yes   ◯ No   Torres Strait Islander: ◯ Yes   ◯ No

Australian Citizen: ◯ Yes   ◯ No   *If yes please turn to the next page*

Permanent Resident of Australia: ◯ Yes   ◯ No   Visa Class No: ....

Temporary Resident of Australia: ◯ Yes   ◯ No   Visa Class No: ....

Overseas Student: ◯ Yes   ◯ No   What year did he/she arrive in Australia? ....

2. PARENT/S INFORMATION

Father / Parent 1 Details:

Title: .... **Family Name:** .... **First Name/s:** ....

Occupation and Position: ....

Employer: ....

Religion (If any): .... **Church Affiliation:** ....

Residential Address: ....

....Postcode: ....

Telephone:

Home: .... **Work:** .... **Mobile:** ....

Email: ....

Mother / Parent 2 Details:

Title: .... **Family Name:** .... **First Name/s:** ....

Occupation and Position: ....

Employer: ....

Religion (If any): .... **Church Affiliation:** ....

Residential Address: ....

....Postcode: ....

Telephone:

Home: .... **Work:** .... **Mobile:** ....

Email: ....

Guardian / Homestay Details (if applicable):

Title: .... **Family Name:** .... **First Name/s:** ....

Occupation and Position: ....

Employer: ....

Religion: .... **Church Affiliation:** ....

Residential Address: ....

....Postcode: ....

Telephone:

Home: .... **Work:** .... **Mobile:** ....

Email: ....

3. STUDENT PROFIlE

Present School: .... Academic Year: .... Dates: ....

Previous Schools: .... Academic Year: .... Dates: ....

.... Academic Year: .... Dates: ....

……………………………………………………………. Academic Year: .... Dates: ....

Siblings: List other children in order or age, eldest first:

Name	Gender	Age	School	Year
....	....	....	....	....
....	....	....	....	....
....	....	....	....	....

Student's learning strengths (academic or s o c i a l) :

....

....

Student's learning areas of need (academic or social):

....

....

Special Needs:………

....

....

....

It is important that we are informed of any special needs the student has, such as medical, physical, intellectual conditions or disabilities. Please attach any relevant documentation, such as reports from health professionals or other consultants. If this section is not completed, we will assume the student has no special needs. Failure to complete this section accurately and fully may delay the enrolment process or prevent an offer of a place being made.

The School may collect information about the child's educational history from the child's previous school.

4. STUDENT QUESTIONNAIRE

1. **Have you received an Outstanding Achievement or won an award for anything (eg: Sports / Academic) over the past two years?**
   If yes, please provide details:

   ....

2. **Do you sing or play a musical instrument? If so, which, how long and what grades have you attained?**

   ....

5. APPLICATION DECLARATION

1. I / We request that the above student be admitted to International Chinese School.

2. I / We have read and understood the School's policy on Privacy.

3. I / We certify that the information given herein by me/us is true and correct.

4. Signature of both Parents (or the Guardian)

………………………………………………..   ……………………………………………   ………………………………………………   …………………………
Print Name   **Relationship to Student**   **Signature**   **Date**

……………………………………………….   ……………………………………………   ………………………………………………   …………………………
Print Name   **Relationship to Student**   **Signature**   **Date**

Please note:

This application requires the signature of BOTH parents or the guardian. If both parents' signatures are not present, please indicate the circumstances:

………

………

6. CHECKLIST (Please ensure the following are completed before submitting your child's application)

Checklist for ALL applications:

☐   **Complete and sign the Enrolment Application Form**

☐   **Attach a copy of the student's last two (2) school reports if it is for entry within the next 2 years except for Kindergarten enrolment, and copies of any medical reports where applicable**

☐   **Attach a copy of Birth Certificate or Passport**

☐   **Attach a copy of Certificate of Aboriginality or Torres Strait Islander if applicable**

☐   **Attach a copy of Residency Visa if applicable**

☐   **Attach a copy of immunisation history statement**

☐   **Read the School's policy on Privacy**