



Enrolment Application

Please complete the attached form and return it with the documentation listed below.

Forms emailed must be in PDF format and will NOT be accepted in any other format.

Applications without all documentation or payment will not be accepted or processed.

- Enrolment Application Form
- Birth Certificate
- Immunisation Certificate (Kinder and Primary applications)
- Copy of the most current school report
- Copy of the most current NAPLAN results (NAPLAN conducted Yr 3, 5, 7 and 9)
- \$100 Application Fee or \$30 Application Fee for Kinder (non-refundable)

Once your application has been submitted, you will be contacted for an enrolment interview with one of our Senior Leadership Team as follows:

Kinder Students:

- For 3-year-old Kinder, interviews will take place in Term 3 or Term 4 of the year prior to entry.
- During this time, consideration will be given to the child's readiness to start Kinder.

Prep to Year 12 Students:

- Students and parents will be invited to attend an interview.
- Interviews with students and parents are conducted by a Senior Staff Member.
- Consideration will be given to academic and behavioural history.
- Offers for placement are at the Principal's discretion.

To accept an offer of placement, a further non-refundable \$100 Enrolment Fee (\$70 for Kinder) will be required to secure your child's position (capped at \$200 per family) at the College.

Prior to entry (P- Yr12), a \$500 Confirmation payment (per student) will be required. This amount will be deducted from your child's invoice in Term 4 of the year of entry. Further documentation will be required at this time.

The Enrolments Officer

King's College
44 Balmoral Road
(PO Box 681)
Warrnambool VIC 3280



KING'S COLLEGE

Christian Education Kindergarten to Year 12

Student Enrolment Application

		Date:	
Child's Given Names:		Gender: M <input type="checkbox"/> F <input type="checkbox"/>	
Preferred Name:		DOB:	
Child's Surname:			
Year Level and Year of entry you would like your child to start at King's College: Year Level ____ Year ____			
Is the student of Aboriginal or Torres Strait Islander descent? <input type="checkbox"/> NO <input type="checkbox"/> ABORIGINAL <input type="checkbox"/> TORRES STRAIT ISLANDER			
Do you currently have, or have you had, any other child attend at King's College? YES <input type="checkbox"/> NO <input type="checkbox"/>			
PARENTAL INFORMATION RELATING TO THE CHILD			
The child currently resides with: BOTH PARENTS <input type="checkbox"/> MOTHER ONLY <input type="checkbox"/> FATHER ONLY <input type="checkbox"/> OTHER <input type="checkbox"/> <i>*If you selected 'other' please provide details:</i>			
PARENT / GUARDIAN		PARENT / GUARDIAN	
Title:	Relationship:	Title:	Relationship:
Given Names:		Given Names:	
Surname:		Surname:	
Address:		Address:	
Home Phone: <i>(Indicate with 'S' if silent number)</i>		Home Phone: <i>(Indicate with 'S' if silent number)</i>	
Work Phone:		Work Phone:	
Mobile:		Mobile:	
Email:		Email:	
Are you the primary carer? YES <input type="checkbox"/> NO <input type="checkbox"/>		Are you the primary carer? YES <input type="checkbox"/> NO <input type="checkbox"/>	

NON- AUSTRALIAN NATIONALS

Does the child have permanent residency status? **YES*** **NO**

**A copy of the residency certificate or Passport and Visa must be attached for all non- Australian nationals.*

ADDITIONAL DOCUMENTATION REQUIRED

FOR PREP* STUDENT REGISTRATIONS

Please attach the following information

- Birth Certificate
- Immunisation Certificate

*Children enrolled for Prep must be 5 years old by 30th

April in the year they start Prep

*Kinder children must be 3 years old by 30th April in the year they start 3 year-old Kinder

FOR ALL OTHER STUDENT REGISTRATIONS

Please attach the following information

- Birth Certificate
- Immunisation Certificate
- Most current school report
- Most current NAPLAN test results

FURTHER INFORMATION

Reason for choosing King's College:

Does your family attend church on a regular basis*: **YES** **NO**

**Answering 'No' will not have an impact on your enrolment*

Name of Church:

King's College has an open enrolment policy. However, our school is based on the Christian faith and every child is exposed to these principles, which are woven throughout the entire curriculum.

REGISTRATION STATEMENT

I/ We request that our child be registered for placement . I/ we acknowledge that this form is NOT a confirmation of enrolment or a guarantee of placement and that final enrolment is conditional upon places becoming available and completion of enrolment procedures.

SIGNED _____ _____ ____ / ____ / ____

PARENT/ GUARDIAN

PARENT/ GUARDIAN

NB: This application will not be processed until all parents/ guardians of the child have signed this form and payment has been included.

INSTRUCTIONS

Please complete a separate form for EACH child you are seeking to REGISTER with King's College. This must include a \$100 non-refundable application fee per child (capped at \$200 per family). Applications will not be processed without this fee. Receipt of this form, complete with payment, will place your child on the appropriate waiting list.

Please be advised that it remains your responsibility to inform us of any change of details during the enrolment process in order for us to be able to continue to keep you up to date with all details and make offers for places as they become available.

Office Use only

Fees Paid: Yes/ No

Date Fees Paid:

Compass Code Allocated:

Offer Made: Yes/ No



Education Support Information

This is to ensure that King's College is able to provide your family with the best care and to ensure that the appropriate resources are available. Please note all information obtained by the school is regarded highly confidential. All information regarding enrolments will be destroyed after a 2 year period should you decide not to process your enrolment.

Child's Name:	
Anticipated Year Level your child will start at the school:	Year of entry: 20 ____

Please tick the box if your child has ever received or currently receiving any of the following services.

<input type="checkbox"/> Counselling Support	Therapy Support: <input type="checkbox"/> Hearing Impairment Services <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Physiotherapy <input type="checkbox"/> Physical Impairment <input type="checkbox"/> Speech Therapy <input type="checkbox"/> Visual Impairment Services
<input type="checkbox"/> Early Intervention Services	<input type="checkbox"/> Teacher Aide Support
<input type="checkbox"/> Special Education Support	<input type="checkbox"/> Curriculum Program Support: for example, Individual Learning Plans.
<input type="checkbox"/> Hospitalisation for any extended period of time	<input type="checkbox"/> Psychological Assessments (testing of Intellectual Function such as a WISC test)
<input type="checkbox"/> Ongoing treatment for a medical condition	<input type="checkbox"/> Programs for Intellectually Gifted children
<input type="checkbox"/> Other support Services	
<input type="checkbox"/> Other significant health issues	If so, please provide details:

Should your child receive any of the above services, could you provide a brief outline as to the reason for this service along with written documentation. While information provided will not exclude an offer, failure to disclose pertinent information may result in an application being reviewed.

Parent Name: _____

Signature: _____

Date: ____/____/____