

# Our Lady of Fatima School Three-year-old Educational Program (Pre- Kindergarten) Entry Form



**“Peace”**

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Name: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

## Student Information

Calendar year for Entry: \_\_\_\_\_

Student Surname: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Post Code: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Birth Certificate attached: Yes  No

Birthplace: \_\_\_\_\_

Aboriginal/ Torres Strait Islander: Yes  No

If yes to Aboriginal/ Torres Strait Islander, then Group of Origin:

\_\_\_\_\_

Nationality: \_\_\_\_\_

Australian Permanent Resident: Yes  No

### If born outside of Australia

Date of Arrival in Australia: \_\_\_\_\_

Visa Category Number: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Language Spoken at Home: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_

Parish Priest: \_\_\_\_\_

Parish: \_\_\_\_\_

Suburb: \_\_\_\_\_

### Date of Reception of Sacraments

Baptism: \_\_\_\_\_ Baptism Certificate Attached: Yes  No

## Family Information

### Parent or Guardian

Title: \_\_\_\_\_ Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone (H): \_\_\_\_\_

Telephone (W): \_\_\_\_\_

Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

### Parent or Guardian

Title: \_\_\_\_\_ Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone (H): \_\_\_\_\_

Telephone (W): \_\_\_\_\_

Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

## Custody/Guardianship

Name of person(s) with legal guardianship of the student: \_\_\_\_\_

If applicable, a copy of any Parenting or Restraint Order is attached  Yes  No

Any other conditions enforced at law? \_\_\_\_\_

## Siblings Currently Attending the School

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_

## Siblings Currently Attending Other Schools

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ Year Level: \_\_\_\_\_ School: \_\_\_\_\_

## Emergency Contact Details (other than a parent/guardian)

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

## Disclosure

Do you agree that the information supplied in the Student Information and Family sections, can be provided to the relevant Parish Priest? Yes  No

## Agreement

I/we understand that enrolment in the program must relate to participation in the program and not enrolment into the school. Formal enrolment into the school occurs via an application at the time of seeking enrolment into kindergarten or subsequent year levels. An application form is available from the school administration or via the school website.

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 school's enrolment criteria.

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 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 program of the school.

I/we have read and fully understand and agree to the terms and conditions set out in the school fee collection procedures.

I/we agree to abide by the policies and directions of the school and the Catholic Education Commission of Western Australia as they are enacted from time to time.

I/we have received the *CEWA Statutory Privacy Policy* and *Privacy Collection Notice* (available on the school website: <https://olof.wa.edu.au/CEWA-Policies.html> available under Policies- Community- Privacy).

Signature of Parent(s)/ Guardian(s):

\_\_\_\_\_ Date: \_\_\_\_\_

(Parent/ Carer or Guardian)

\_\_\_\_\_ Date: \_\_\_\_\_

(Parent/ Carer or Guardian)

## **Documentation and Requirements**

***A copy of your child's Birth Certificate, Baptism Certificate, Immunisation Record, Passport, Visa and Custodial Court Orders are to accompany the Application for Enrolment form. Originals of these documents should be presented at the enrolment interview.***