



THE  
**HAMILTON**  
AND ALEXANDRA COLLEGE

CONFIDENT FUTURES



ENROLMENT FORM

# APPLICATION FOR ENROLMENT

Surname			
Given Name(s)			
Preferred Name			
Address			
Suburb		Postcode	
Country			
Gender	<input type="checkbox"/> Female	<input type="checkbox"/> Male	<input type="checkbox"/> Prefer not to say
Date of Birth     /     /			
Country of Birth			
First language spoken at home			
Other languages spoken			
Aboriginal or Torres Strait Islander descent	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Student Lives with	<input type="checkbox"/> Both Parents	<input type="checkbox"/> Mother	<input type="checkbox"/> Father
	<input type="checkbox"/> Other (please specify)		
Applying to Enter	<input type="checkbox"/> ELC	<input type="checkbox"/> Junior	<input type="checkbox"/> Senior
In Year level	Term	Calendar Year	
As a	<input type="checkbox"/> Day Student	<input type="checkbox"/> Boarder	
Student's Nationality			
Current School			
Current Year Level			
Does the student have a Victorian Student Number (VSN)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
VSN Number (if known)			

# PARENT INFORMATION

<b>Parent 1 (or Guardian)</b>	
Title (Mr, Mrs, Ms, Dr)	Family Name
Given Name(s)	
Address (if different from student's address)	
Suburb	Postcode
Country	
Phone	Mobile
Email	
Occupation	
First language spoken at home	
Other languages spoken	
<b>Parent 2 (or Guardian)</b>	
Title (Mr, Mrs, Ms, Dr)	Family Name
Given Name(s)	
Address (if different from student's address)	
Suburb	Postcode
Country	
Phone	Mobile
Email	
Occupation	
First language spoken at home	
Other languages spoken	

# CUSTODY ARRANGEMENTS

Are there any custody orders relating to the child/ren?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, provide the original or certified copies of the custody or court order documentation.		

## FAMILY INFORMATION

Names of Siblings and Current School

Are any family members current or past students of The Hamilton and Alexandra

College? (If past student, please state maiden name, House and year they left school)

## BILLING INFORMATION

School Fee Accounts and Statements should be addressed to:

Title (Mr, Mrs, Ms, Dr) Family Name

Given Name(s)

Address

Suburb

Postcode

Country

## CONDITIONS OF ENROLMENT

I/We the parent(s) or person(s) agree as follows (and where this application is signed by more than one parent or person each of us is bound by these conditions separately and jointly):

1. The parents or persons responsible for payment of fees shall pay to The Hamilton and Alexandra College ("the College") such fees and charges for the education and maintenance of, and for the supply of goods and services to the Student, as outlined in the School's Fee Policy, fixed by the Board each year.
2. All fees and charges shall be payable in advance by the start of the Term to which they relate or by monthly direct debit. The School reserves the right to remove or refuse entry to any student whose fees are not paid in accordance with this requirement.
3. Without prejudice to the requirements of Condition 2, a Late Payment Fee will be charged on any overdue account at rates determined from time to time by the Board.

## CONDITIONS OF ENROLMENT

4. A term's notice in writing must be given to the Principal prior to the removal of a student, otherwise half of the term's Full Fees will be charged.
5. The School has the right to determine the appropriate year level of a student's entry, and progression is dependent upon satisfactory performance in the opinion of the School.
6. To fulfil the expectations of the School as outlined in the Enrolment Policy.
7. The School reserves the right to discipline, suspend or expel any student whose lack of academic endeavour or whose behaviour is considered by the Principal to be unacceptable.
8. It is the responsibility of the parents to advise the School of any changes in family circumstances affecting the life of the Student at the School.
9. To allow our child to attend all compulsory camps that are part of the School's Outdoor Education program.
10. Confirm that, in the event of illness or injury to my child whilst at school, or on an excursion or co-curricular activity, or travelling to or from school, I authorise the Principal or senior staff member in charge of my child, where it is impracticable to communicate with me, to consent to emergency medical arrangements on my behalf as are deemed necessary by a qualified medical practitioner. Such consent includes anaesthetics, blood transfusions and operations.
11. To maintain accurate and up-to-date medical information as required by the School.
12. Consent to the College communicating with my child's current school for information about learning, behavioural and developmental needs.
13. Confirm that all information provided is complete and accurate.

## SIGNATURES OF BOTH PARENTS/GUARDIANS\*

Full Name

Full Name

(please print)

(please print)

Signature

Signature

Date

/ /

Date

/ /

\*This application is a legally binding agreement and requires the signature of both parents/guardians. If only one parent is the signatory, they will be solely responsible for paying all school accounts.

# OTHER INFORMATION

## PRIVACY

The Hamilton and Alexandra College collects personal information, including sensitive information about students and their parents/guardians before and during the course of a student's enrolment at the College. The primary purpose of collecting this information is to enable the College to provide schooling for your child. This includes satisfying the needs of parents/guardians and the needs of the student throughout their time at the College.

## PLEASE RETURN

### Australian Resident

- 1. This completed application form (one per child)
- 2. A copy of each child's birth certificate
- 3. Application fee of \$100\* (per child) by cheque, credit card or bank transfer
- 4. Most recent school reports
- 5. Most recent NAPLAN results
- 6. Medical reports (if applicable)
- 7. Specialist reports (if applicable)
- 8. Copy of Immunisation Certificate
- 9. Copy of Custody Orders (if applicable)

\* non-refundable

### Overseas Resident

- 1. This completed application form (one per child)
- 2. A copy of each child's birth certificate and passport
- 3. Application Fee of AUD \$500\* and AUD \$5,000 on acceptance of enrolment
- 4. Most recent school reports
- 5. Medical reports (if applicable)
- 6. Specialist reports (if applicable)
- 7. Copy of Custody Orders (if applicable)

## PAYMENT

☐ Cheque (payable to The Hamilton and Alexandra College)

OR

☐ Visa ☐ MasterCard Name on Card

Card No.                CCV    Expiry Date /

**The Hamilton and Alexandra College** - Bendigo Bank, BSB: 633-000, Account: 152753042

Amount \$

Signature

Schools are required to collect student background information from parents as agreed by State and Territory Education Ministers. This is to enable nationally comparable reporting of students' outcomes against the National Goals for Schooling in the Twenty-First Century. For assistance with this form, please contact Susie Holcombe on (03) 5572 1355 or [admissions@hamiltoncollege.vic.edu.au](mailto:admissions@hamiltoncollege.vic.edu.au).

## STUDENT PROFILE

Has your child ever been accelerated (promoted a year)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Has your child ever repeated a year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, which year?
Has your child participated in a Learning Enrichment Program?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Has your child ever received Learning Support Assistance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<small>(Ongoing assistance for the child and/or teacher provided by a specialist teacher, psychologist or other suitably trained professional practitioner)</small>			
Has your child ever had a Negotiated Curriculum Plan (NCP) or an Individual Education Plan (IEP)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If test results indicate your child could benefit from a Learning Enrichment Program (LEP) or Learning Support Assistance, do you give permission for your child to receive such assistance?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If your child has a special need, please specify			
<input type="checkbox"/> Intellectual	<input type="checkbox"/> Learning Difficulty (e.g. dyslexia)	<input type="checkbox"/> ADD/HDD	<input type="checkbox"/> Autism Spectrum Disorder
<input type="checkbox"/> Social/emotional	<input type="checkbox"/> Speech	<input type="checkbox"/> Vision	<input type="checkbox"/> Hearing
<input type="checkbox"/> Physical (e.g. asthma, anaphylaxis, diabetes, heart conditions)			
Do you have a report from the Specialist?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
So we can adequately meet the needs of your child, do you give permission to share any report/s with the College?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	(If yes, please supply with this application)
If your child has a special need, how does it impact on him/her as a learner?			
Does your child take medication on a regular basis?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, what type of medication and how often is it taken?			
Does your child have any social difficulties with other children?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, please specify			
Has your child ever had a behaviour management issue in a school setting?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, please specify			

PARENT/GUARDIAN DETAILS

What is the *highest* year of primary or secondary school completed by each parent/guardian?

Parent 1/Guardian 1:	<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
Parent 2/Guardian 2:	<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 *highest* year of qualification completed by each parent/guardian?

Parent 1/Guardian 1:	<input type="checkbox"/> Bachelor degree or above	<input type="checkbox"/> Advanced diploma / Diploma	<input type="checkbox"/> Certificate I to IV (including trade certificates)	<input type="checkbox"/> No non-school qualification
Parent 2/Guardian 2:	<input type="checkbox"/> Bachelor degree or above	<input type="checkbox"/> Advanced diploma / Diploma	<input type="checkbox"/> Certificate I to IV (including trade certificates)	<input type="checkbox"/> No non-school qualification

Parent/Guardian occupation profile

What is the occupation group of each parent/guardian?  
*(Please select from the list in Appendix 1 (page 7) and enter the number in the box below.)*  
*If the person is not currently in paid work but has had a job in the past 12 months or has retired in the past 12 months, please use the person's most recent occupation.*  
*If the person has not been in paid work in the past 12 months, enter '8' in the box below.*

What is the occupation group of the parent 1/guardian 1?

What is the occupation group of the parent 2/guardian 2?

IMAGE USE POLICY

Photos and videos of students may be taken for use in our College newsletter, advertising, brochures, prospectus, staff training purposes or website material. Student names will not normally be used unless for use in press related stories.

Due to the National Privacy Policy requirements, it is essential that we receive written permission from a parent/guardian for the College to use any photographs or videos for the above purposes.

Student

Last nameGiven Names

☐ I give / ☐ do not give permission for the College to use images of my child as explained in the College's Image Use Policy (read below). The College requires a signed permission form for each child.

Parent/Guardian

Name

Signed

FAMILY DIRECTORY

The Hamilton and Alexandra College Family Directory is a booklet produced by the College for the Parents and Friends (P&F) Association. The booklet provides participating parents with contact information (name and phone number only – addresses are not included) of other participating College parents in the College whom they may wish to contact.

Your contact information will be included in the Family Directory unless you sign the following section:

☐ I do not want my contact information to be included in the Family Directory.

Parent/Guardian

Name

Signed



## APPENDIX 1: LIST OF PARENTAL OCCUPATION GROUPS

### Group 1: 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 2: 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 3: 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/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor.

### Group 4: 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, kitchenhand, 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.



## CHECKLIST

Please indicate with x	Yes	No	To come
Enrolment Fee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Passport / Visa (for international students only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most recent School Report AND School Reports from the past two years (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAPLAN Results (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Reports (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialist Reports (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Immunisation Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Custody Orders (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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