



HopePoint CHRISTIAN SCHOOL

In Spirit and Truth



ENROLMENT APPLICATION

OFFICE USE
DATE RECEIVED:

STUDENT INFORMATION

Surname			
Given Name		Middle Name	
Preferred Name			
Date of Birth		Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Level of Entry	K 1 2 3 4 5 6	Proposed Year of Entry	20__
Country of Birth		Nationality	
Residency of Student (please tick as appropriate)	<input type="checkbox"/> Australian Citizen – please provide the student’s birth certificate and proof of Citizenship		
	<input type="checkbox"/> If the student was born in Australia and the parents were born overseas, please provide the parents’ Australian Citizenship or Visas		
	<input type="checkbox"/> Australian Permanent Resident – please provide the student’s birth certificate, passport and current visa		
	<input type="checkbox"/> Temporary Visa Holder – please provide the student’s birth certificate, passport and current visa		
Is the student of Aboriginal origin?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the student of Torres Strait Islander Origin?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the student speak a language other than English at home?	No, English only <input type="checkbox"/> Yes <input type="checkbox"/> Please specify:		
Student lives with	Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Stepmother <input type="checkbox"/> Stepfather <input type="checkbox"/> Other <input type="checkbox"/> ___		
Name of Stepmother/Stepfather/Guardian, if applicable			
Church Student Attends		Email	
Pastor’s Name		Telephone	
Student’s Interests			

RECORD OF STUDENT ATTENDANCE

Name of School Attended (Kindergarten applicants – name of Preschool)	Locality of School	Year Levels	Date of leaving

OTHER STUDENT INFORMATION

Has the student even been suspended?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Reason:	
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PARENT/GUARDIAN INFORMATION

FATHER/STEPFATHER/GUARDIAN/CARER (please circle)		MOTHER/STEPMOTHER/GUARDIAN/CARER (please circle)	
Title (please circle)	Mr Dr Rev Pastor Other _____	Title (please circle)	Mr Dr Rev Pastor Other _____
Surname		Surname	
Given Name		Given Name	
Residential Address	P/CODE	Residential Address	P/CODE
Postal Address	P/CODE	Postal Address	P/CODE
Account Address	P/CODE	Account Address	P/CODE
Home Phone		Home Phone	
Work Phone		Work Phone	
Mobile Number		Mobile Number	
Email		Email	
Marital Status	Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single Parent <input type="checkbox"/>	Marital Status	Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Single Parent <input type="checkbox"/>
Does the Father speak a language other than English at home?	No, English only <input type="checkbox"/> Yes <input type="checkbox"/> Please specify:	Does the Father speak a language other than English at home?	No, English only <input type="checkbox"/> Yes <input type="checkbox"/> Please specify:
Occupation		Occupation	
Occupation Group (please see Page 10)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 8 <input type="checkbox"/>	Occupation Group (please see Page 10)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 8 <input type="checkbox"/>
Employer		Employer	
School Education	Year 12 <input type="checkbox"/> Year 11 <input type="checkbox"/> Year 10 <input type="checkbox"/> Year 9 or below <input type="checkbox"/>	School Education	Year 12 <input type="checkbox"/> Year 11 <input type="checkbox"/> Year 10 <input type="checkbox"/> Year 9 or below <input type="checkbox"/>
Non-School Education	University Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Trade Certificate <input type="checkbox"/> None <input type="checkbox"/>	Non-School Education	University Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Trade Certificate <input type="checkbox"/> None <input type="checkbox"/>
Country of Birth		Country of Birth	
Nationality		Nationality	
Church Attending		Church Attending	
Pastor's Name		Pastor's Name	
Email		Email	
Telephone		Telephone	
Attendance	Regularly <input type="checkbox"/> Occasionally <input type="checkbox"/>	Attendance	Regularly <input type="checkbox"/> Occasionally <input type="checkbox"/>

OTHER FAMILY MEMBERS IN AGE ORDER

Names of all children in the family from eldest to youngest	Male/Female	Date of Birth	Name of School/Work

STUDENT DIVERSITY

To best prepare us for supporting your child at HPCS, please let us know the following information:

Does the student communicate fluently in English?		Yes <input type="checkbox"/> No <input type="checkbox"/>		
Has the student had English Support? Please provide details:				
Has the student been diagnosed with any of the following? <i>If the student has a severe allergy or medical condition, please provide a medical plan from your doctor.</i> <i>Please attach copies of latest medical, psychological, speech or occupational therapy reports.</i>	Allergies <input type="checkbox"/>	Please specify Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/>	
	Asthma <input type="checkbox"/>	Please specify Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/>	
	ADHD <input type="checkbox"/>	Anaphylaxis <input type="checkbox"/>	AIDS/HIV <input type="checkbox"/>	Anxiety <input type="checkbox"/>
	Autism Spectrum Disorder <input type="checkbox"/>	Bronchitis <input type="checkbox"/>	Depression <input type="checkbox"/>	Diabetes <input type="checkbox"/>
	Epilepsy <input type="checkbox"/>	Haemophilia <input type="checkbox"/>	Hearing impairment <input type="checkbox"/>	Hepatitis <input type="checkbox"/>
	Migraines <input type="checkbox"/>	ODD <input type="checkbox"/>	Physical Impairment <input type="checkbox"/>	Sight Impairment <input type="checkbox"/>
	SLD <input type="checkbox"/>	SPD <input type="checkbox"/>	Other <input type="checkbox"/>	No diagnosis <input type="checkbox"/>
	If you have ticked any of the above, please provide details:			
• Does the student have any learning difficulties?	No <input type="checkbox"/> Yes <input type="checkbox"/>	Please specify:		
• Does the student have any social, emotional or relational difficulties?	No <input type="checkbox"/> Yes <input type="checkbox"/>	Please specify:		
• Does the student have any special gifts/talents? Please provide reports:	No <input type="checkbox"/> Yes <input type="checkbox"/>	Please specify:		
• Has the student previously participated in additional educational support?	No <input type="checkbox"/> Yes <input type="checkbox"/>	Please specify:		
• Has the student received support from specialist support services? Please attach copies of latest reports	No <input type="checkbox"/> Yes <input type="checkbox"/>	Please specify:	Speech Therapy <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Counsellor and/or Psychologist <input type="checkbox"/> Paediatrician and/or Psychiatrist <input type="checkbox"/> Psychometric Testing <input type="checkbox"/> Other →	

Is there any other medical information the school should be aware of?	No <input type="checkbox"/> Yes <input type="checkbox"/>	Please specify:	
Permission for Paracetamol	No <input type="checkbox"/> Yes <input type="checkbox"/>	Please specify:	
Permission for Calamine Lotion	No <input type="checkbox"/> Yes <input type="checkbox"/>		
In the case of accident or illness the school has permission to seek	Ambulance <input type="checkbox"/> Medical Practitioner <input type="checkbox"/> Hospital <input type="checkbox"/>		
Name of Private Medical Fund		Number	
Student Medicare Number	_____		
Doctor's Name		Telephone	
Immunisations: Please provide a copy of your child's immunisation records	Date of last Tetanus vaccination:		

EMERGENCY INFORMATION – other than Parents or Guardians

Name of person to contact if parents are unavailable		Relationship to Student	
Home Phone		Mobile	
		Work Phone	

COURT ORDERS/APPREHENDED VIOLENCE ORDERS

Please list any court orders regarding parenting arrangements or AVO's relevant to the student of the family. A copy of the court documents will need to be supplied on enrolment:	

SPECIAL INSTRUCTIONS FOR SCHOOL CORRESPONDENCE

Please complete if you wish accounts, correspondence or reports to go to a non-custodial parent.

Name		Address	
Relationship to Student		Email	
Correspondence to be sent to the above address includes:	Accounts <input type="checkbox"/> General Correspondence <input type="checkbox"/> Reports <input type="checkbox"/>		

CHECKLIST

- Minister's Reference
- Original Birth Certificate
- NAPLAN Test Results (if applicable)
- A copy of most recent school reports (if applicable)
- A copy of your child's immunisation records
- If student was born in Australia and parents were born overseas, please provide student's proof of Australian Citizenship or visa
- If student was not born in Australia, proof of residential status (citizenship certificate or passport and visa)
- If not an Australian Citizen, proof of residential status (passport and visa)

OBLIGATION OF DISCLOSURE

The School reserves the right to terminate or review enrolment if relevant information is not disclosed. Where required by law, information will be supplied to relevant State or Commonwealth Departments/Agencies. All information supplied will be kept confidential by school staff.

PARENT/GUARDIAN/CARER DECLARATION (*please tick*)

- We/I accept the conditions of enrolment set out on Page 7 of this Enrolment Application Form and agree with the Statement of Faith (Page 8) and hereby make application for my child to be enrolled at HopePoint Christian School
- We/I authorise the school to have access to any relevant student records held by the student's previous school (if applicable)

Father/Guardian/Carer: _____ Date: _____
(Print Name) *(Signature)*

Mother/Guardian/Carer: _____ Date: _____
(Print Name) *(Signature)*

**HOPEPOINT CHRISTIAN SCHOOL
CONDITIONS OF ENROLMENT**

1. Parents/Guardians have read and are in agreement with the School's Statement of Faith and will allow the child to share fully in the life and program of the School, including devotional activities, teaching and chapel.
2. Parents/Guardians agree to support and uphold the School rules, policies and procedures and to encourage the students to follow them in School.
3. Parents/Guardians agree to provide the child with the correct uniform as approved by the School and ensure that the child is always sent to School neatly dressed in the required uniform.
4. Parents/Guardians agree to provide the child with all necessary equipment needed to benefit from the education offered.
5. Parents/Guardians will ensure that the student attends School punctually, except in cases where the absence is approved by the School.
6. The School may suspend or terminate enrolment at its discretion for failure to comply with these conditions or other serious breaches of the School rules and regulations.
7. Parents/Guardians agree to resolve any conflict concerning the School in a manner that demonstrates respect for each and every member of the School community.
8. All fees are payable within four weeks of receipt of invoice. (Note: in cases where this requirement would cause hardship, alternative arrangements may be discussed with the Finance Officer). If fees for the previous term have not been fully paid, the school may terminate the student's enrolment. Parents/Guardians agree to pay any costs to the school for the collection of outstanding fees, including agency commissions, legal fees or any out of pocket expenses.
9. Parents/Guardians must give at least one term's notice in writing of termination of enrolment and failure to do so will render them liable for one term's fees.
10. A refund of fees on termination of enrolment for any reason whatsoever will be solely at the discretion of the school.
11. Material and equipment are included in the school fees and cover the purchase of books, stationery and equipment.
12. A Bond of \$400 for the first student per family shall be paid on the acceptance of a position at the School. The maximum Bond per family is \$550. The additional \$150 is payable upon the enrolment of the second student in the family.

**HOPEPOINT CHRISTIAN SCHOOL
STATEMENT OF FAITH**

The school and its staff hold to the following Statement of Faith:

God

There is One God and He is sovereign and eternal. He is revealed in the Bible as three equal divine Persons – Father, Son and Holy Spirit. God depends on nothing and no one; everything and everyone depends on Him. God is holy, just, wise, loving and good.

God created all things of His own sovereign will, and by His Word they are sustained and controlled.

God is the God and Father of our Lord Jesus Christ. He is also Father of all whom He has adopted as His children. Because of God's faithfulness and His fatherly concern, nothing can separate His children from His love and care.

The Lord Jesus Christ is the eternally existing, only begotten Son of the Father. He is the Creator and Sustainer of all things. He was conceived by the Holy Spirit and born of a virgin, truly God and truly man. He lived a sinless life and died in our place. He was buried, rose from the dead in bodily form and ascended to heaven. Jesus is King of the universe and head of the Church, and His people whom He has redeemed. He will return to gather His people to Himself, to judge all people and bring in the consummation of God's Kingdom.

The Holy Spirit proceeds from the Father and the Son. He convicts people of their sin, leads them to repentance, creates faith within them and regenerates them. He is the source of their new sanctified lives bringing forth His fruit in the life of believers. He gifts believers according to His sovereign will, enabling them to serve the Lord.

The Bible

The Bible, which is comprised of the books of the Old and New Testament, is the inspired, inerrant and infallible Word of God, and the only absolute guide for all faith and conduct. It is indispensable and determinative for our knowledge of God, of ourselves and the rest of creation.

God's World

Adam and Eve, the parents of all Humankind, were created in the image of God to worship their Creator by loving and serving Him, and by exercising dominion under God's rule by inhabiting, possessing, ruling, caring for and enjoying God's creation. Consequently, the purpose of human existence is to glorify God and enjoy Him forever.

Sin entered the world through Adam's disobedience because of which all people are alienated from God and each other and, as a result, they and all creation are under God's judgement.

All people have sinned and, if outside of Christ, are in a fallen, sinful, lost condition, helpless to save themselves under God's condemnation and blind to life's true meaning and purpose.

God holds each person responsible and accountable for choices made and actions pursued. Human responsibility and accountability do not limit God's sovereignty. God's sovereignty does not diminish human responsibility and accountability.

Salvation from the penalty of sin is found only through the substitutionary, atoning death and resurrection of the Lord Jesus Christ. As the sinless One, he took upon Himself the just punishment for our sins. Through His death and resurrection, the Lord Jesus has destroyed the power of Satan who is destined to be confined forever to hell along with all those who reject Jesus as Lord.

Out of gratitude for God's grace and in dependence on the Holy Spirit, God's people are called to live lives worthy of their calling, in love, unity and obedience to God in all spheres of life. They are responsible to ensure that the gospel is faithfully proclaimed. Christian parents are required to bring their children up in the discipline and instruction of the Lord and to diligently teach them the truth of God's Word.

**HOPEPOINT CHRISTIAN SCHOOL
STANDARD COLLECTION NOTICE**

1. HopePoint Christian School (the 'School') collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil's enrolment at the School. The primary purpose of collecting this information is to enable the School to provide schooling for your son/daughter.
2. Some of the information we collect is to satisfy the School's legal obligations, particularly to enable the School's legal obligations, particularly to enable the School to discharge its duty of care.
3. Certain law as governing or relating to the operation of schools require that certain information is collected. These include Public Health and Child Protection laws.
4. Health information about pupils is sensitive information within the terms of the National Privacy Principles under the Privacy Act. We ask you to provide medical reports about pupils from time to time.
5. The School from time to time discloses personal and sensitive information to others for administrative and educational purposes. This includes to other schools, government departments, medical practitioners, and people providing services to the School, including specialist visiting teachers, sports coaches and volunteers.
6. If we do not obtain the information referred to above, we may not be able to enrol or continue the enrolment of your son or daughter.
7. Personal information collected from pupils is regularly disclosed to their parents or guardians. On occasions information such as academic and sporting achievements, pupil activities and other news is published in School newsletters, magazines and on our website.
8. Parents may seek access to personal information collected about them and their son or daughter by contacting the School. Pupils may also seek access to personal information about themselves. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the School's duty of care to the pupil, or where pupils have provided information in confidence.
9. As you may know, the School from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
10. We may include your contact details in a class list and School directory. (If you do not agree to this, you must advise us now.)
11. Photographs and/or electronic images of pupils or other members of the school community may be taken from time to time. These may be archived or published for reporting as well as promotional purposes.

If you provide the School with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the School and why, so that they can access that information if they wish and that the School does not usually disclose the information to third parties

ATTACHMENT – 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]

GROUP 8 – NO PAID WORK FOR MORE THAN 12 MONTHS

Also list your previous occupation