



# Application For Enrolment

Name of Student:

Year Level:

Commencement Date:

**Learning** *for* **Living**

[svshs.wa.edu.au](http://svshs.wa.edu.au)



# Application for Enrolment

## General Information

A parent or legal guardian applying to enrol a child in a government school should complete this form. Only permanent residents of Australia and those children holding an approved visa sub-class number are eligible to be enrolled in a government school. Only students under the age of 18 years can be enrolled and must be accompanied by a parent(s) or legal guardian.

## Resident in Local Intake Area

The school can only guarantee places for a student whose family is currently residing within the boundaries of the Swan View Senior High School local intake area as have been determined by the Department of Education of Western Australia. A map of this area is available from the school should you need to know these boundaries or may be viewed on the school web site. The map shows local intake and optional areas. Please note that where the area is marked optional, parents exercise the choice of school to send their child to.

## Application for Enrolment

This is an application for enrolment only – submitting this form to the school does not mean that the enrolment has been accepted by the school. The Principal will firstly need to determine if there is classroom accommodation and whether an appropriate educational program can be provided for your child at the school. Once determined, the Principal will need to fully consider the information provided on the application form.

For parents applying to enrol their children in schools for next year, you will be advised of the outcome of your application by early fourth term. If your child has gained enrolment from outside the local intake area into a specialist program, their siblings will not be guaranteed enrolment in the school.

It is a requirement of the Department of Education that any information on suspensions and exclusions must be provided to the school at the time of applying to enrol a child. This information will help the school to provide your child with the appropriate support, if required.

Children currently under suspension from a government school cannot be enrolled at another government school until the suspension period is over. Children who have previously been suspended or excluded from a government school may be required to enter into a behaviour agreement with the school if enrolment is to be accepted.

Please be aware of the following sections of THE SCHOOL EDUCATION ACT 1999.

Division 2, 20 (1) The Principal of a school may cancel the enrolment of an enrolled student at the school if the Principal is satisfied that:

a) The enrolment was obtained by the giving of false or misleading information; or

b) Section 17 has not been complied with. Section 17 requires notification be given to the Principal in a manner determined by the school of the following change of particulars:

(i) Usual place of residence

(ii) Court orders pertaining to the child

(iii) Details of any conditions of the child that may call for special steps to be taken for the benefit or protection of the enrollee or other persons in the school (16.1.g)

(iv) Legal guardian of the child.

### Please return to:

**The Principal**  
**Swan View Senior High School**  
**39 Gladstone Avenue**  
**SWAN VIEW WA 6056**

**or email**  
**swanview.shs@education.wa.edu.au**

## Confidentiality

All information provided on this form will be treated confidentially. The Department of Education's Information Privacy and Security Policy and Section 242 of the School Education Act 1999 preclude this information from being used for any purpose other than:

- To determine whether your application for enrolment can be accepted
- To assist the school with addressing any needs for your child if enrolment is accepted; and
- To comply with legal requirements or ministerial directions.

Office Use Only						
-----------------	--	--	--	--	--	--

SCSA Number									
-------------	--	--	--	--	--	--	--	--	--

## Student Details

Year Level at Entry:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Not Specified
Surname:	Date of Birth:
Legal Surname (if different):	Place of Birth:
First Name:	Country of Birth:
Second Name:	Nationality:
Preferred First Name:	<b>Residential Status</b>
Address:	Are you an Australian Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Suburb: Postcode:	If NO, please answer the following:
Mailing Address (if different from above):	Are you a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No
Suburb: Postcode:	Are you a Temporary Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary Telephone Number:	Visa Sub-Class Number:
Is the student Aboriginal or Torres Strait Islander? Aboriginal. <input type="checkbox"/> Yes <input type="checkbox"/> No Torres Strait Islander <input type="checkbox"/> Yes <input type="checkbox"/> No	Visa Expiry Date: / / Date Entered Australia: / /
<b>Language</b>	
What languages are spoken at home? _____	
Has the student attended school outside Australia <b>and</b> been taught in a language other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How well does the student:	
Read and write in English?	<input type="checkbox"/> Very Well <input type="checkbox"/> Well <input type="checkbox"/> Not well <input type="checkbox"/> Not at all
Speak/understand English?	<input type="checkbox"/> Very Well <input type="checkbox"/> Well <input type="checkbox"/> Not well <input type="checkbox"/> Not at all
<b>Siblings</b>	
Are there any siblings currently attending Swan View SHS? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please tick House group	<input type="checkbox"/> Gladstone <input type="checkbox"/> Morrison <input type="checkbox"/> Salisbury <input type="checkbox"/> Weld
Name:	Current Academic Year:
Name:	Current Academic Year:
Name:	Current Academic Year:
Name:	Current Academic Year:

### Specialist Programs

Are you interested in applying for an Approved Specialist or School-Based Program?

☐ Yes ☐ No

If YES, name of program/s:

- ☐ FAME – Specialist Drama Program
- ☐ ACE – Academic Program
- ☐ Elite Basketball
- ☐ Soccer Academy

### Previous School Information

Name of school at which student is currently or was last enrolled and current academic year:

\_\_\_\_\_

Has your child ever been suspended/excluded from a school? ☐ Yes ☐ No

If previously enrolled in home education, specify the Education Region:

\_\_\_\_\_

### Other Provisions

Is the student subject to any Parenting or Court Orders (e.g. Access restrictions) in respect to their care, welfare and development?

☐ Yes ☐ No

If **YES**, please specify the nature of the order and attach a copy of the most recent order.

\_\_\_\_\_

Is the student in the care of the Department of Communities? ☐ Yes ☐ No

Name of Case Manager: \_\_\_\_\_

District: \_\_\_\_\_ Phone: \_\_\_\_\_

### Permission to Publish Students Images and Work for School Purposes

I agree to the videoing or photographing of my child and my child's school work during school activities for use by the school and the Department of Education.

**Important:** I understand that while the school and Department of Education will only publish my child's information for the above-stated purposes, the internet is accessible by any person worldwide. I understand that my child's information can be accessed, copied and used by any other person using the internet (e.g. shared through social media such as Facebook, YouTube, etc.). I understand that once my child's information has been published on the internet the school and Department of Education have no control over its subsequent use and disclosure. I understand that I can withdraw this permission at any time by contacting the school or Department in writing; however this will not affect materials that have already been published and disseminated.

☐ **Yes, I give consent for my child to have their image and/or work published as described.**

☐ **No, I DO NOT wish my child's image/work to be published in any form.**

## Family Details

Custody/Guardianship				
Who does the student live with?	<input type="checkbox"/> Both Parents	<input type="checkbox"/> Parent 1	<input type="checkbox"/> Parent 2	<input type="checkbox"/> Neither
Name of Person <i>(one person only)</i> responsible for fees/school account/s: _____				
In split custody arrangements show the percentage split as determined by Centrelink.				
	Mother _____ %	Father _____ %	Other _____ %	

Residential Family		
Parent 1 <b>must</b> provide a mobile and email address to receive notifications	<b>Parent/Guardian 1</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Parent/Guardian 2</b> <input type="checkbox"/> Female <input type="checkbox"/> Male
Title (eg. Mr, Mrs, Ms, Miss, Mx):		
First Name:		
Surname:		
Relationship to Student:		
Nationality:		
Country of Birth:		
Languages spoken at home:		
Mobile Phone:		
Other Phone:		
Swan View SHS Alumni:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Parent/Guardian 1 email (must be provided):		
Parent/Guardian 2 email:		

Additional Parent/Guardian Details																																
Title:													Address:																			
First Name:													Suburb:																			
Surname:													Postcode:																			
Mobile:													Nationality:																			
Relationship to student:													Language/s spoken:																			
Email:																																



## Parent/Guardian Information

What is the highest year of primary or secondary school you have completed?	<b>Parent/Guardian</b> <b>1</b> <b>2</b>		What is the level of the highest qualification you have completed?	<b>Parent/Guardian</b> <b>1</b> <b>2</b>	
Year 12 or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	Bachelor degree or above	<input type="checkbox"/>	<input type="checkbox"/>
Year 11 or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	Advanced Diploma/Diploma	<input type="checkbox"/>	<input type="checkbox"/>
Year 10 or equivalent	<input type="checkbox"/>	<input type="checkbox"/>	Certificate I to IV (including trade certificate)	<input type="checkbox"/>	<input type="checkbox"/>
Year 9 or equivalent or below	<input type="checkbox"/>	<input type="checkbox"/>	No non-school qualification	<input type="checkbox"/>	<input type="checkbox"/>
(If you did not attend school, mark 'Year 9 or equivalent or below')					
<b>What is your occupation group? (Write 1, 2, 3, 4 or 8)</b> Parent 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/>					

Please select the appropriate parental occupation group from the list provided below. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 months, enter '8' above.

## Parent/Guardian Occupation Groups

Group 1	Group 2	Group 3	Group 4
Senior management in large business organisation, government administration & defence, and qualified professionals	Other business managers, arts/media/sportspersons and associate professionals	Tradesmen/women, clerks and skilled office, sales and service staff	Machine operators, hospitality staff, assistants, labourers and related workers
<b>Senior executive/manager/department head</b> in industry, commerce, media or other large organisation. <b>Public service manager</b> (section head or above), regional director, health/education/police/ fire services administrator. <b>Other administrator</b> [school principal, faculty head/dean, library/museum/gallery director, research facility director]. <b>Defence Forces</b> Commissioned Officer <b>Professionals</b> 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. <b>Health, Education, Law, Social Welfare, Engineering, Science, Computing</b> professional. <b>Business</b> [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]. <b>Air/sea transport</b> [aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller].	<b>Owner/manager</b> of farm, construction, import/export, wholesale, manufacturing, transport, real estate business. <b>Specialist manager</b> [finance/engineering/production/ personnel/ industrial relations/ sales/marketing]. <b>Financial services manager</b> [bank branch manager, finance/ investment/ insurance broker, credit/loans officer]. Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]. <b>Arts/media/sports</b> [musician, actor, dancer, painter, potter, sculptor, journalist, author]. media presenter, photographer, designer, illustrator, proof reader, sportsman/ woman, coach, trainer, sports official]. <b>Associate professionals</b> generally have diploma/ technical qualifications and support managers and professionals. <b>Health, Education, Law, Social Welfare, Engineering, Science, Computing</b> technician/associate professional. <b>Business/administration</b> [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]. <b>Defence Forces</b> senior Non-Commissioned Officer.	<b>Tradesmen/women</b> generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group. <b>Clerks</b> [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]. <b>Skilled office, sales and service staff</b> <b>Office</b> [secretary, personal assistant, desktop publishing operator, switchboard operator]. <b>Sales</b> [company sales representative, auctioneer, insurance agent/ assessor/loss adjuster, market researcher]. <b>Service</b> [aged/disabled/ refuge/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor].	<b>Drivers, mobile plant, production/processing machinery and other machinery operators</b> <b>Hospitality staff</b> [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]. <b>Office assistants, sales assistants and other assistants.</b> <b>Office</b> [typist, word processing/data entry/business machine operator, receptionist, office assistant]. <b>Sales</b> [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]. <b>Assistant/aide</b> [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]. <b>Labourers and related workers.</b> <b>Defence Forces</b> ranks below senior NCO not already included in other groups. <b>Agriculture, horticulture, forestry, fishing, mining worker</b> [farm overseer, shearer, wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]. <b>Other worker</b> [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor].
These categories have been determined nationally and are designed as broad occupational groupings. Australian states and territories use the same categories.			

## Student Health Care Summary

Emergency Contact Information (other than parents/guardians)
This number will be used in the event that parents/guardians are not reachable.
Title: _____ First Name: _____ Last Name: _____ Relationship to student: _____ Phone: _____
Medical Details
Doctor / Medical Practice Name: _____ Address: _____ Phone Number: _____  Do you have ambulance cover? <input type="checkbox"/> No <input type="checkbox"/> Yes Insurance Provider: _____ <b><i>If there is a medical emergency, parents/guardians are expected to meet the cost of an ambulance.</i></b>  List any essential information that could affect your child in an emergency (eg. Allergy to penicillin)  Health Care Card <input type="checkbox"/> Yes <input type="checkbox"/> No Card Number: _____ Expiry: _____ Medicare Card: _____ IRN: _____ Expiry: _____
Administration of Medication
Written authorisation must be provided for staff to administer any form of medication. <b>Long term medication:</b> Complete the Medication section of the relevant health care plan. <b>Short term medication:</b> Request an Administration of Medication form to complete and return to the school. <b>Note</b> – All medication required must be supplied by parents/guardians in original packaging.
Informed Consent
Your child's health care information will be shared with staff on a "need to know" basis unless otherwise stated. Do you give permission to share your child's health care information with staff? <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Note</b> – If your child is enrolled in a TAFE or an alternative education program, this includes the transfer of their health care information to the principal or manager of that program.  If <b>NO</b> , and the information is to be restricted, who can be informed of your child's health care information?: _____  Does your child have one or more health condition(s) that may impact their learning and/or require <b>support</b> from school staff? <input type="checkbox"/> <b>No</b> - If your child's requirements change, please notify the school. <input type="checkbox"/> <b>Yes</b> - Please complete the next section of this form. You will be given additional forms to complete.

Health Condition(s)	
<input type="checkbox"/> Severe Allergy/Anaphylaxis <input type="checkbox"/> Minor and Moderate Allergies <input type="checkbox"/> Diabetes <input type="checkbox"/> Seizures <input type="checkbox"/> Asthma <input type="checkbox"/> Activities of Daily Living <input type="checkbox"/> Diagnosed Migraine/Headache	<input type="checkbox"/> Other conditions or needs (please specify) <hr/> <hr/> <hr/> <hr/> <hr/>
Has your child's medical practitioner provided a health care plan to assist the school to manage the condition? <input type="checkbox"/> No <input type="checkbox"/> Yes – please provide a copy	
Educational Support Needs	
To ensure your child's learning needs are correctly supported in the classroom from their first day at school, please share all learning needs. Special educational needs will not influence the acceptance of the application. All students in our catchment area are welcomed and supported. This does not guarantee a place in our Education Support Centre.	
Does the student have a diagnosed disability or learning difficulty? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you have ticked any of the disabilities below, you MUST provide supporting documents from a medical professional (at time of enrolment). <div> <input type="checkbox"/> Deaf and Hard of Hearing (e.g. otitis media)             <input type="checkbox"/> Physical Disability           </div> <div> <input type="checkbox"/> Specific Speech Language Impairment             <input type="checkbox"/> Intellectual Disability           </div> <div> <input type="checkbox"/> Global Developmental Delay (prior to age 6)             <input type="checkbox"/> Vision Impairment           </div> <div> <input type="checkbox"/> Central Auditory Processing Disorder (CAPD)             <input type="checkbox"/> Autism Spectrum Disorder           </div> <div> <input type="checkbox"/> Specific Learning Disorder in Reading (Dyslexia)             <input type="checkbox"/> Other _____           </div> <div> <input type="checkbox"/> Specific Learning Disorder in Writing (Dysgraphia)             _____           </div> <div> <input type="checkbox"/> Specific Learning Disorder in Maths (Dyscalculia)             _____           </div> <div> <input type="checkbox"/> Specific Learning Disorder in Motor Skills (Dyspraxia)           </div> <div> <input type="checkbox"/> ADHD (select the type)      <input type="checkbox"/> Inattentive      <input type="checkbox"/> Hyperactive      <input type="checkbox"/> Combined           </div>	
Are you on a waiting list for diagnostic services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, what diagnoses are you investigating for your child? _____	
Mental Health and Wellbeing Needs	
Does the student have mental health and wellbeing needs that may require support from the school? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, please specify; <div> <input type="checkbox"/> Anxiety      <input type="checkbox"/> Depression      <input type="checkbox"/> Eating Disorder      <input type="checkbox"/> Other _____           </div>	
<i>If you have ticked YES to any of the conditions above, please provide supporting documents from a medical professional at time of enrolment.</i>	
Medical Alert Information	
Does your child have a Medic Alert bracelet or pendant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, please provide details: _____	



## Policies



The following acceptances relate to the current school-based policies as stated on our website: [svshs.wa.edu.au/policies](https://svshs.wa.edu.au/policies)

### Artificial Intelligence (AI) Police and Procedures

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Attendance Policy and Procedures

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Bullying Prevention Policy and Procedures

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Course Outline and Assessment Policy and Procedures

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Digital Device Policy and Procedures

Students are permitted to bring mobile phones to school. Use of phones during the school day, including break times, is NOT permitted and may result in devices being confiscated.

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Disputes and Complaints Policy and Procedures

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Good Standing Policy and Procedures

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### ICT Responsible Use Policy and Procedures

All users of the computer network at Swan View Senior High School must accept responsibility for knowing and understanding the computer use policy and must agree to abide by the policy.

I have read and understood the provided policy and agree to the guidelines set out.

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Media Viewing Consent

As part of their classroom program, students listen, view, and discuss texts such as films, documentaries, episodes on streaming services or DVDs. Many texts used in classrooms have a G rating and contain content of very mild impact. Parents and guardians can be confident their children can view G rated texts. On occasions, a text with a PG classification is felt to be appropriate for the school program. Content with a PG classification is mild in impact but some students under the age of 15 may find it confusing or upsetting. We seek permission for your child to work with texts that have a PG classification.

- ☐ Yes, I consent to my child working with texts that have a G or PG classification.
- ☐ No, I do not consent to my child working with texts that have a G or PG classification.
- ☐ I prefer to provide agreement on a case-by-case basis after receiving more details.

**Learning for Living**

### Online Third Party Services Notification and Consent

Please read the Third Party Services Notification and Consent information sheets provided.

I understand that if I do not consent to my child's personal information being provided to these Online Third Party Services, my child may receive an alternative education program that does not make use of the Online Third Party Services.

☐ I consent to my child's information being provided to ALL of the above Online Third Party Services.

☐ I DO NOT consent to my child's information being provided to each of the above Online Third Party Services. I have indicated below which of the online services that I do not want my child to use: \_\_\_\_\_



### School Uniform Policy and Procedures

At Swan View Senior High School, we are proud of our school's identity and public image, and we expect that ALL students are in FULL school uniform every day. Wearing correct uniform is also part of our Positive Behaviour Support program, DARE.

**I have read and understood the provided policy and agree to the guidelines set out.**

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Student Mental Health and Wellbeing Policy and Procedures

**I have read and understood the provided policy and agree to the guidelines set out.**

Parent/guardian signature \_\_\_\_\_ Student Signature \_\_\_\_\_

### Unique Student Identifier (USI)

A Unique Student Identifier (USI) is a reference education number required for all nationally recognised study, including University and Vocational Education and Training (VET), attained in Australia. All students are required to obtain their Unique Student Identifier.

To obtain a Unique Student Identifier (Creating a USI is free and will only take a few minutes):

1. Have at least one form of ID ready: Medicare Card, Australian Birth Certificate,
2. Drivers Licence, Australian Passport, Visa, Immigration Card or Citizenship Certificate.
3. Have your personal contact details ready: Address, email and/or phone number
4. Visit [www.portal.usi.gov.au](http://www.portal.usi.gov.au) and click on "Create a USI"
5. Agree to the terms and conditions and follow the steps. If possible, email it to your email address, print it off and/or write it down for your own records.

Write your **USI number** in the boxes below (please note this is NOT the WASN number):

--	--	--	--	--	--	--	--	--	--

### Privacy and Information Sharing

- ☐ I understand that my child's enrolment information is confidential and will be kept as required by the Department of Education's record keeping procedures.
- ☐ I understand that information on the Enrolment Form will be used to meet the Department of Education's reporting requirements to other Government departments or agencies. This includes providing the Department of Health with my child's immunisation status as requested.
- ☐ I understand that I am required to notify the school as soon as any of the enrolment details for the student change.

### Name of person enrolling student:

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Relationship to the student: \_\_\_\_\_

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

*(independent minors may sign on their own behalf)*

# Final Checklist

Compulsory Documents	Parent Check	Office Check
<b>1. Proof of Residence</b> i. Current rates notice or lease agreement ( <i>Page 1, 2 &amp; signature page</i> ) ii. Plus one of the following; <ul style="list-style-type: none"> <li>• Current utility bill</li> <li>• Driver's licence</li> <li>• Current bank statement</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Copy of Birth Certificate</b> <i>(Please provide proof of any name changes including parents)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. Copy of Current Immunisation History Statement <u>OR</u> Australian Childhood Immunisation Record (AIR)</b> <i>A current statement is one that has been issued within <b>two months</b> of submitting this application. AIR's can be accessed through MyGov. Child health books and overseas immunisations are not acceptable.</i>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4. USI Number</b> (Apply at <a href="http://www.usi.gov.au">www.usi.gov.au</a> )	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. Most Recent School Reports x2</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6. Medicare Card and Health Care/Pension Card</b> <i>(If applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>
For students born outside of Australia <b>7. Proof of Australian Citizenship <u>OR</u> Proof of Residency Status</b> <ul style="list-style-type: none"> <li>i. Passport copy – biographic page</li> <li>ii. Visa Grant Notice</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>8. Supporting documents if you have selected YES on page 8</b> <i>(for health conditions, learning disability or mental health)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9. Parenting Plans or Family Court Orders</b> <i>(If applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10. Information relating to Suspensions or Exclusions</b> <i>(If applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>

**We develop our students as confident learners who are  
resilient, respectful community members.**



**An Independent Public School**

39 Gladstone Avenue Swan View WA 6056

**E:** [swanview.shs@education.wa.edu.au](mailto:swanview.shs@education.wa.edu.au)

**P:** 08 9294 6100

ABN 43 285 857 466

**Learning *for* Living**

[svshs.wa.edu.au](http://svshs.wa.edu.au)

