

Enrolment APPLICATION

■ community ■ challenge ■ choice



St Michael's
COLLEGE

APPLICATION FOR ENROLMENT

Student Details

Student Details

Family Name _____

First Name _____

Other Name(s) _____

Date of Birth _____ Male Female

Address _____

Postcode _____

Phone Number (Home) _____

Phone Number (Mobile) _____

Year of Entry _____ Year Level Entry _____

Indicate Reception commencement: Term 1 or Term 3

Please note, for Term 3 commencement child must turn 5 on or before 31 October that year)

Current School/Kindergarten _____

Previous School/Kindergarten _____

Religion _____

Parish _____

Parish Priest _____

Sacraments Received:

Baptism Yes No

Communion Yes No

Confirmation Yes No

Country of Birth _____

Nationality _____

Visa Yes No

Visa Subclass number _____

Visa expiry date _____

Visa issue date _____

Visa number _____

Student main language _____

Student main language other than English _____

Is the student of Aboriginal or Torres Strait Islander origin?
(Please tick one)

No Neither Aboriginal or Torres Strait Islander

Yes Aboriginal

Yes Torres Strait Islander

Yes Both Aboriginal and Torres Strait Islander

Special Considerations

Does the student have special needs?
E.g. speech, hearing, movement, learning impairment

Yes No

If 'YES', please provide details and copies of relevant reports

Does the student have special gifts or aptitudes?
E.g. music, sport, chess, reading?

Yes No

If 'YES', please provide details

Does the student attend an ethnic/language school?

Yes No

If 'YES', please provide details, e.g. which language

Is the student the subject of a Custody Order?

Yes No

If 'YES', please provide a copy of the Order

Names of fathers/mothers/brothers/sisters who are former students or who currently attend St Michael's College.

Please indicate which years they attended

Name _____

Relationship _____ Year _____

Name _____

Relationship _____ Year _____

Name _____

Relationship _____ Year _____

Name _____

Relationship _____ Year _____

Name _____

Relationship _____ Year _____

APPLICATION FOR ENROLMENT

Parent/Guardian Details

Parent/Guardian 1		Parent/Guardian 2	
Title <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Rev <input type="checkbox"/> Prof		Title <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Rev <input type="checkbox"/> Prof	
Family Name		Family Name	
Given Name		Given Name	
Religion		Religion	
Relationship to Student		Relationship to Student	
Names and ages of other children in your care		Names and ages of other children in your care	
Home Address		Home Address	
Postcode		Postcode	
Postal Address		Postal Address	
Postcode		Postcode	
Phone Number (Mobile)		Phone Number (Mobile)	
Phone Number (Work)		Phone Number (Work)	
Phone Number (Home)		Phone Number (Home)	
Email		Email	
Employer/Business name		Employer/Business name	
Occupation		Occupation	
Country of Birth		Country of Birth	
Nationality		Nationality	
Visa <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If YES, please provide supporting documents)</i>		Visa <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If YES, please provide supporting documents)</i>	
Main language spoken at home <i>(any additional languages?)</i>		Main language spoken at home <i>(any additional languages?)</i>	
Signature		Signature	
Date		Date	

THIS FORM MUST BE SIGNED BY ALL ENROLLING PARTIES

Application for Enrolment

Why do you wish your child to be accepted into St Michael's College?

How did you hear about us? (please tick one)

- School website Word of mouth Alumni
 Parish Advertising Live in the area
 Friend/neighbour Social media Primary school
 Internet search Driving past the school Staff
 Recommendation Sibling already enrolled Other

Have you attended a College Tour?

- Yes No

Enrolment Lodgement

Non-refundable Enrolment Lodgement Fee - \$55.00

Payment Method:

Cash Cheque *(Amount enclosed of \$55.00)*

Credit Card: VISA Mastercard

Card Number

CW

Expiry Date

Name on card

Signature

Office Use Only

Date Received

Receipt Number

Enrolment Conditions

- Lodging the application does not guarantee a position. Offers are made to families which are in accordance with the College's selection criteria.
- A \$55.00 non-refundable Enrolment Application fee is payable upon lodging a form.
- Please ensure a copy of the Birth Certificate and Baptism Certificate are provided with the application
- If the student and/or parent are currently on a Visa, documents must be supplied before the application can be accepted.
- A separate Enrolment Application form must be filled out for each child.

Please return this Enrolment Application to:

The Registrar, St Michael's College



Primary Campus

78 East Avenue, Beverley, SA 5009
p: 08 8346 6548 f: 08 8346 9449
smcprimary@smc.sa.edu.au

Secondary Campus

15 Mitton Avenue, Henley Beach, SA 5022
p: 08 8356 5966 f: 08 8356 1092
smc@smc.sa.edu.au