

Sinai College

www.sinaicollege.qld.edu.au



Office Use Only

Applicant Student Name

Applying For Year Commencing

Interview Date With Approved for Enrolment

APPLICATION TO ENROL

Sinai College
20 Moxon Rd
Burbank QLD 4156
Tel: (07) 3349 9088
Email: admin@sinaicollege.qld.edu.au

Application to Enrol Form

ENROLMENT POLICY

Sinai College offers an Australian education with a foundation of Jewish faith, values and culture. The College expects that all students uphold the College expectations, Jewish ethos and cultural values.

As the only Jewish school in Queensland, we are committed to supporting our Jewish families, however we welcome and accept enrolments from all students who are comfortable to uphold the Jewish ethos of the College.

Enrolment at the College implies the acceptance of the College's policies that are available on the College's website.

ENROLMENT PROCEDURE

General enrolment enquiries can be made through the school's administration officer who can be contacted on (7) 3349 9088. Throughout the year, all new students must be enrolled by appointment.

1. Fill in the **Application to Enrol *in full*** and submit at Administration
2. Submit all relevant documentation (see below)
3. Attend an enrolment interview (if required)
4. Pay acceptance fee and first term's fees in full if a position at the College is offered and accepted

APPLICATION REQUIREMENTS

1. Minimum Age for Prep	Must have turned 5 by 30 June of the first year of Prep	
2. Enrolment Application	Completed in full	
3. Documentation	Birth Certificate/Passport/Australian Citizenship papers/ Visa	
	Recent school reports/ NAPLAN reports	
	Immunisation history statement	
	Any court documentation (family court or custodial)	
4. Fees and Charges	Enrollment Acceptance fee \$100 waived for early enrollment acceptance	
5. Upon Acceptance	First term's fees, uniforms, stationary, excursions	

Please note: If documents are not in English, we may need to translate which may delay enrolment

Application to Enrol Form

Date of Application: Date of Admission:

New Enrolment Continuation Enrolment Have you been enrolled in this College previously? Yes No

If yes, please indicate the start and finish dates. Start Date: Finish Date:

Student Information (please print)

Surname: First Name: Middle Name:

Year Level: Gender: Male Female Date of Birth:

Address: Suburb: Postal Code:

Home Phone: Mobile Phone:

Nationality: Country of Birth:

Previous school Attended:

Is the student an Australian Citizen: Yes No (If no, evidence of the student's immigration status to be completed.)

Does the student have English as a Second Language? Yes No

Does the student require additional support with English as their second language whilst at school?

Language/s Spoken at Home: Religion:

Is the student of Aboriginal or Torres Strait Islander origin? No Aboriginal Torres Strait Islander Both

Evidence of Student's Immigration Status (If not an Australian Citizen)

Permanent resident (Complete passport and visa details below) Date Arrived in Australia:

Other visa (Complete passport and visa details below) Passport/Document Number:

Passport/Document Expiry Date: Visa Sub Class:

Visa Number: Visa Expiry Date :(If applicable)

Please attach all visa documents copies to this enrolment form.

Student's Sibling Information

Enrolled at Sinai College

Sibling Full Name	Year Level	Enrolled at Sinai College		
		Current	Previously	Future
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Application to Enrol Form

Person/s Enrolling student

The person/s who are enrolling the student are the parent/s caregivers who:

1. Have the legal capacity to enroll the student and 2. Take financial responsibility for the student's enrolment

Name of Parent/Guardian enrolling students:

Financial responsibility %:

Name of Parent/Guardian enrolling students:

Financial responsibility %:

Father Salutation

First Name: Last Name:

Marital Status: Married Divorced Widowed

Country of birth:

Home Ph: Mobile:

Email:

Work Telephone Number:

Language spoken at home:

Cultural background:

Nationality:

Mother Salutation

First Name: Last Name:

Marital Status: Married Divorced Widowed

Country of birth:

Home Ph: Mobile:

Email:

Work Telephone Number:

Language spoken at home:

Cultural background:

Nationality:

What is the highest year of primary or secondary school parents/ guardian have completed?

(For person who have never attended school, mark 'Year 9 or equivalent or below.')

Year 9 or equivalent or below

Year 10 or equivalent

Year 11 or equivalent

Year 12 or equivalent

Year 9 or equivalent or below

Year 10 or equivalent

Year 11 or equivalent

Year 12 or equivalent

What is the level of the highest qualification primary carer's have completed?

Non-school qualification

Certificate 1 to IV including trade certificate

Advanced Diploma/Diploma

Bachelor Degree or above

Non-school qualification

Certificate 1 to IV including trade certificate

Advanced Diploma/Diploma

Bachelor Degree or above

What is the occupation of the parent?

What is the occupation of the parent?

What is the occupation group of the parent?

What is the occupation group of the parent?

(Please circle one only from the attached parental occupation group sheet, page 4.) If you have not been in paid work in the last 12 months, please circle number 8 box.

(Please circle one only from the attached parental occupation group sheet, page 4.) If you have not been in paid work in the last 12 months, please circle number 8 box.

Custody Arrangements

Student lives with: Both parents Mother only Father Only Other:

The College has a strict position that the school is a neutral, safe place for your child and as such, we advocate for the child, and have no position on family court, custody or visitation arrangements. It is the responsibility of the enrolling parent to provide any court orders or arrangements, and to notify the College if these change. In the absence of any orders, it is the position of the College that the **home from which the child left** on any given morning is considered the **custodial home**, and it is this parent or guardian that is expected to collect or take responsibility for the child.

Information about a child, including attendance information will not be given out to anyone over the phone. Instead, an inquiring person may leave their details and the information they request may be emailed to them, once their identity and rights to that information have been established.

Orders Affecting the Student

Are there any Family Court Orders or Care and Protection Orders in place that affect the Student? Yes No

If **Yes**, please attach copies of Family Court documents or Protection Orders relating to the student.

Are there any other court order that may impact on the child? This may include informal or voluntary parenting arrangements.
Please provide details

Medical Treatment

In the event of an emergency, first aid will be provided and parents will be contacted. In the event that parents or emergency contacts cannot be reached, appropriate action will be taken to ensure your child is cared for appropriately.

Please read the following and indicate by ticking the appropriate boxes, your consent for these first aid measures.

In the event of an emergency, do you authorise Sinai staff to seek medical treatment from a registered medical practitioner, hospital or ambulance service?

Yes No

In the event of an emergency, do you authorise Sinai staff to arrange for your child to be transported to hospital in an ambulance?

Yes No

Panadol Administration:

Do you give permission for Sinai staff to administer one (1) emergency dose of Children's Panadol in the event of my child becoming ill at school?

Yes No

Application to Enrol Form

Emergency Contact Details (Please write at least two contact persons that are **not** the parent/guardian)

CONTACT PERSON 1

Name:

Relationship to student:

Mobile: Work:

CONTACT PERSON 2

Name:

Relationship to student:

Mobile: Work:

Student Medical Details

Doctor's Name:

Doctor's Address: Suburb: Postal Code:

Ph: Email:

Medicare Number: Medicare expiry date:

Private Health Fund Name: Fund Number:

Does your child have any of the following impairments? (please tick) Please note that your responses here will not impact on your child's enrolment. This information is used to provide quality adjustments for your child so that they can receive an inclusive education

Speech: Yes No Mobility: Yes No Hearing: Yes No Vision: Yes No

Intellectual: Yes No ASD (Autism): Yes No Other:

If you have ticked **Yes** to any of the above impairments, has the impairment been: Imputed Assessed Verified

Has your child been supported by any of the following programs:

Behaviour management: Yes No Anger management: Yes No

Remedial movement: Yes No Counselling: Yes No

Does your child suffer from any of the following? (if you tick a box please provide details)

Asthma Heart problem

Epilepsy Migraines

ADD/ADHD Allergies (please specify)

Other

Immunisation details (Please provide your child's immunisation record with this enrolment)

Does your child have any special needs? (please tick)

Physical: No Yes Educational: No Yes

Medical: No Yes Behavioural: No Yes

Sensory: No Yes Other:

List of Parental Occupational Groups

Group 1 Senior management in large organisations, government administration and defence, and qualified professionals	
Senior Executive/ Manager/ Department Head	Industry, commerce, media or other large organization
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. Industries include health, education, law, social welfare, engineering, science, computing and business.
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	Farming, 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.

Group 3 Tradesmen/women, clerks and skilled office, sales and service staff	
Tradesmen/ Women	Generally, have a 4-year Trade Certificate, usually by apprenticeship. All trades people are included in this group.
Clerk	Book keeper, bank/PO clerk, statistical actuarial clerk, accounting/claims/audit clerk, payroll clerk, record- ing/registry filing clerk, betting clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/
Skilled office, sales and service staff	Office—secretary, personal assistant, desktop publishing operator, switchboard operator Sales— company sales rep., auctioneer, insurance agent/assessor/loss adjuster, market researcher Service— aged/disabled/refuge/child care worker, nanny meter reader, parking inspector, postal worker,

Group 4 Machine operators, hospitality staff, assistants, labourers and related workers	
Drivers, production, processing machinery, mobile plant	Drivers, machinery operators
Hospitality staff	Hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper
Office, sales and other assistants	Office—typist, work processing/data entry/business machine operator, receptionist, office assistant Sales— 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,
Labourers and related workers	Defence—ranks below senior NCO not included above Agriculture, horticulture, forestry, fishing, mining—farm overseer, shearer, wood/hide classer, farm hand, horse trainer, nurseryman, green keeper, gardener, tree surgeon, forestry/logging worker, mining, seafarer/fishing hand Other worker—labourer, factory hand, store man, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor

Group 8 Has not been in paid work in the past 12 months

Please note: If the person is not currently in paid work, but has been in paid work in the past 12 months, please use the person's last occupation.

Parent / Student Contractual Agreement

20 Moxon Rd, Burbank, Q 4156 Ph: 07 3349 9088
www.sinaicollege.qld.edu.au Email: admin@sinaicollege.qld.edu.au

I/We the parents/ guardian (s) of _____ agree to the following conditions outlined below.

1. I/ We understand that if at any time my/ our child's conduct, academic progress, or cooperation with the school's authorities is not in keeping with the school's policies, I/we understand that the school reserves the right to terminate my/our child's enrolment.
2. Should the student be absent from the school for any reason (holidays, illness etc) we will inform the College as soon as is practical by emailing the Administration.
3. I/we pledge to support the school in its efforts to enforce the Positive Behaviour Management Policy as it relates to my/our child
4. I accept the policies and procedures of Sinai College and accept financial responsibility for fees that are due and payable for each term and that the college reserves the right to withhold student report cards and /or statements of reference if accounts remain overdue at the end of the term/semester.
5. I/we will ensure that our child will attend school every school day unless there is an acceptable reason, or approval from the Principal. I/we agree that absences for more than 10 consecutive days without approval or acceptable reason or a regular pattern of absence throughout the year may result in a recommendation to repeat the year level.
6. I/we give permission for my/our child to take part in all school activities, including sports and school excursions. In case of accident or serious illness, I/we request the school to contact us/me. If Sinai College is unable to contact me/us or my/our emergency contact when circumstances indicate immediate medical attention is required, the school may make whatever arrangements are required in its judgment.
7. I/We agree to uphold and support the high academic standard of the school by providing a place at home for my child to study and by giving my child encouragement in the completion of any homework or assignments.
8. I/We further agree that our child needs to come to school dressed and groomed according to the school dress code.
9. I/we agree that the college reserves the right to use surveillance cameras around the school for monitoring the safety of my child. These cameras are in common areas only and do not include private spaces such as toilets
10. I/We agree that the college reserves all rights to use photographs or films of my child for school purposes unless I/we notify the college otherwise.
11. I/We agree that any willful damages caused to the school property by my child will result in full payment of the damages.
12. I/We agree that if there are any Special Issue Orders, Family Court Orders or Care or Protection Orders placed on my/our child, the college will be immediately notified.
13. I/We agree to give Notice in Writing to the Principal prior to the withdrawal of my child and will pay all outstanding monies to the college.
14. I/We agree that providing any false and misleading information will lead to Sinai College making any decision on the outcome of this application.

By signing this Agreement, the undersigned parents or guardians agree that they understand and agree to be bound by this document and that they have read, understood and agreed to be bound by all Sinai College policies available on the website or in the College Office.

Father/ Guardian:	<input type="text"/>	Mother/Guardian:	<input type="text"/>
Father/Guardian Signature:	<input type="text"/>	Mother/Guardian Signature:	<input type="text"/>
Date:	<input type="text"/>	Date:	<input type="text"/>
Name of School Witness:	<input type="text"/>		
Witness Signature:	<input type="text"/>	Date:	<input type="text"/>

