Sinai College

www.sinaicollege.qld.edu.au



Office Use Only

Applicant Student Name		
Applying For Year	Commencing	
Interview Date	\\/ith	Approved for Enrolment

APPLICATION TO ENROL

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

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 due- upon acceptance	Enrollment acceptance fee payable upon acceptance of enrollment	
5. Fees payable prior to commencement	First term's tuition fees, levies uniforms, stationary, excursions	

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

Date of Application:	Date of Admission:			
New Enrolment Continuation Enrolment Have you	been enroled in this College p	reviously?	'es No	
If yes, please indicate the start and finish dates. Start	Date:	Finish Date:		
Student Information (please print)				
Surname First Name:		Middle Name	2:	
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 s	tatus to be con	npleted.)	
Does the student have English as a Second Language?	Yes No			
Does the student require additional support with English as their se	econd language whilst at schoo	ol?		
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 St	tatus (If not an Australia	n Citizen)		
Permanent resident (Complete passport and visa details belo	w) Date Arrived in Austra	lia:		
Other visa (Complete passport and visa details below)	Passport/Document Number	r:		
Passport/Document Expiry Date:	Visa Sub Class			
Visa Number:	ے Isa 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	Current	Previously	Future

Person/s Enroling student

The person/s who are enroling 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 enroling students: Financial responsibility %: Name of Parent/Guardian enrolling students: Financial responsibility %: Parent 2 Relationship to child Parent 1 Relationship to child First Name: Last Name: First Name: Last Name: **Marital Status:** Married Divorced Widowed Marital Status: Married Divorced Widowed Country of birth: Country of birth: Home Ph: Mobile: Home Ph: Mobile: Email: Email: Work Telephone Number: Work Telephone Number: Language spoken at home Language spoken at home Home address: Home address: Nationality: 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 9 or equivalent or below Year 10 or equivalent Year 10 or equivalent Year 11 or equivalent Year 11 or equivalent Year 12 or equivalent Year 12 or equivalent What is the level of the highest qualification primary carer's have completed? Non-school qualification Non-school qualification Certificate 1 to IV including trade certificate Certificate 1 to IV including trade certificate Advanced Diploma/Diploma Advanced Diploma/Diploma Bachelor Degree or above 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?

number 8 box

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

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Custody	/ Arran	gements
	,	

Student lives with:	Both parents	Mother only	Father Only	Other:
The College has a strict	position that the school	ol is a neutral, safe place	for your child and as suc	h, we advocate for the child, and have
no position on family of	court, custody or visitat	ion arrangements. It is	the responsibility of the	enrolling parent to provide any court

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 an indicate by ticking the appropriate boxes, your consent for these first aide 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

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

CONTACT PERSON 1	CONTACT PERSON 2
Name:	Name:
Relationship to student:	Relationship to student:
Mobile: Work:	Mobile: Work:
Student Medical Details	
Doctor's Name:	
Doctor's Address:	Suburb: Postal Code:
Ph: Ema	il:
Medicare Number:	Medicare expiry date:
Private Health Fund Name:	Fund Number:
	Anger management: Yes No Yes No
Does your child suffer from any of the following? (if you tick a bo	
Asthma	Heart problem
Epilepsy	Migraines
ADD/ADHD	Allergies (please specify)
Other	
Immunisation details (Please provide your child's immunisation record with	th this enrolment)
Does your child have any special needs? (please tick)	
Physical: Yes No	Educational: Yes No
Medical: Yes No	Behavioural: Yes No
Sensory: Yes No	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	
	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-yearTrade Certificate, usually by apprenticeship. All trades people are included in this group.
	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/
	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.

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Parent/Guardian: 1	Parent /Guardian 2
Guardian Signature:	Guardian Signature:
Date:	Date:
Name of School Witness:	
Witness Signature:	Date:

