

Student Enrolment Form

(For enrolment in a Western Australian Public School)

Parent Information about applying to enrol in a Western Australian Public School

Thank you for your interest in applying to enrol your child in a Western Australian public school.

Documentary evidence, including court orders relating to your child, may be required to support information supplied. Principals may consult with the Education Regional Office where sufficient evidence has not been supplied. All official records must be in the child's Legal name. The use of preferred name may be possible for informal communications.

It is highly recommended not to purchase items such as uniforms until you receive confirmation of enrolment.

The Department's Enrolment Policy can be found at http://www.det.wa.edu.au/policies

Student Surname:	
Student CC Number:	
Student USI Number:	

John Tonkin College ESC PO Box 2122DC, Education Drive MANDURAH WA 6210 Phone: (08) 9583 0571

Website: www.johntonkincollegeesc.wa.edu.au



STUDENT ENROLMENT FORM

The Student Enrolment Form should be completed if you wish to accept an offer of a place at our school. The student's enrolment is complete once this form is submitted to the school with the necessary documentation.

Family details should include the details of the parent/carer residing at the same address as the student. Details relating to parents or other carers not residing with the student may be included in other contact details. You will also need to complete a Student Health Care Summary. Please complete the forms in English. Please contact the school if you require assistance with translation.

Older devices and some smart devices may need Adobe Reader to use this form. A free version of Adobe Reader is available to download via https://get.adobe.com/reader/.

SCHOOL NAME		
School name		Year Level entering
STUDENT DETAILS		
Student surname		
Legal surname (if different)		
Previous Surname		
(if applicable)		
1st Name	2nd Name	3rd Name
Preferred Name		
Date of birth (dd/mm/yy)	/ Gender O	Male Female Other
Residential Address		
		Postcode
Telephone (Home)	Car Registro	ation (if applicable)
Student's Religion (if applicable)		
Is the student to be withdraw	un from rolligious instruction or gotivitios?	YES NO
Is the student to be withdray	wn from religious instruction or activities?	YES NO

STUDENT DETAILS (Continued)							
	Is the student of Aboriginal or Torres Strait Islander origin? No Yes, Aboriginal Yes, Torres Strait Islander (TSI) Yes, both Aboriginal and TSI							
Does the student speak a	language other than English at ho	me?						
No, English only	es, Aboriginal English Yes, othe	r language - please specify						
(If more than one language, in	ncluding an Aboriginal language, indica	ate the one that is spoken most often)						
What was the first languag	e spoken at home?							
Does the student mainly sp	Does the student mainly speak English at home? YES NO							
	nmunisation Register (AIR) Immuni	sation History Statement shows the Immunisation status is: unisation Certificate issued by the Chief Health Officer						
SIBLING DETAILS								
Full Name/s of siblings atte	ending this school							
Student lives with:								
Both Parents								
Parent/Carer 1	Name	Relationship to student						
Parent/Carer 2	Name	Relationship to student						
Independent minor	Name	Relationship to student						
Adult Student	Name	Relationship to student						
Other, please specify	Name	Relationship to student						
RESIDENCY STATUS								
Nationality (optional)		Country of Birth						
Is the student an Australia	ı citizen?	YES NO						
If No, Is the student a perm	anent resident of Australia? N	O YES - If Yes, Visa Sub Class Number						
Is the student a temporary	resident of Australia?	YES NO						
If Yes, Date of Arrival in Aus	tralia / /	Visa Sub Class Number						
Visa Expiry Date (if applicable)	1 1							

raction Pagion
cation Region
○ YES ○ NO
e school will request copies of this information)
Physical Disability
Severe Mental Disorder
Specific Speech and/or Language Impairment
Vision Impairment
eir care, welfare and development or access restrictions?
ion.
○ YES ○ NO
Expiry Date / /
ent of Communities - Child Protection and Family Support (CPFS)?
Case Manager, their CPFS District and their contact phone number.
Contact Number
2 (Charletta harrest thank
s? (Check the boxes that apply) ce for Isolated Children (AIC) Abstudy
/ Abstract (All)

PARENT / CARER 1 DE	TAILS						
Title	First Name						
Surname							
Relationship to the student							
Date ofbirth (dd/mm/yy)	/ Gender Male Female Other						
Postal Address (if different from student residential address)	Postcode						
Telephone	Mobile Number						
Email Address							
background. Providing this is all students are being well	no matter which school their child attends, are asked to provide information about their information is voluntary but your information will help the Department of Education ensure that served by our public schools. a language other than English at home?						
NO, English only YES,							
	licate the one that is spoken most often)						
(i) more than one language, ma	reace the one that is spoken most often,						
What is the highest year of sc	hool Parent/Carer 1 has completed?						
Year 12 or equivalent Year 11 or equivalent							
Year 10 or equivalent							
(If you did not attend school, mar	'k 'Year 9 or equivalent or below')						
What is the level of the high	est qualification Parent/Carer 1 has completed?						
Bachelor's degree or above	e Advanced diploma/Diploma						
Ocertificate I to IV (including	trade certificate) No non-school qualification						
What is the occupation grou (Refer to Attachment 'Parent	up for Parent/Carer 1? Occupation Groupings' for more information regarding the categories)						
1. Senior Management in	large business organisation, government administration & defense, and qualified professionals						
2. Other business manag	gers, arts/media/sportspersons & associate professionals						
3. Tradesmen/women, cla	erks and skilled office, sales & service staff						
4. Machine operators, h	ospitality staff, assistants, laborers and related workers						
O 8. Unemployed, Retired,	Student						
	work but have had a job in the last 12 months, please use your last occupation. If k in the last 12 month, enter '8'.)						

PARENT / CARER 2 DE	TAILS							
Title		First Name						
Surname								
Relationship to the student								
Date ofbirth (dd/mm/yy)	/ /	Gender Male Female Other						
Postal Address (if different from student residential address)								
		Postcode						
Telephone		Mobile Number						
Email Address								
background. Providing this i all students are being well		nild attends, are asked to provide information about their nformation will help the Department of Education ensure that thome?						
O NO, English only O YES	, other - please specify							
(If more than one language, inc	(If more than one language, indicate the one that is spoken most often)							
What is the highest year of school Parent/Carer 2 has completed? Year 12 or equivalent Year 10 or equivalent Year 9 or equivalent or below (If you did not attend school, mark 'Year 9 or equivalent or below')								
Bachelor's degree or above	est qualification Parent/Carer 2 h	Advanced diploma/Diploma						
Certificate I to IV (including		No non-school qualification						
	Occupation Groupings' for more	information regarding the categories)						
1. Senior Management in	large business organisation, govern	nment administration & defense, and qualified professionals						
2. Other business manag	gers, arts/media/sportspersons &	associate professionals						
3. Tradesmen/women, cla	erks and skilled office, sales & servi	ice staff						
4. Machine operators, h	ospitality staff, assistants, laborers	s and related workers						
8. Unemployed, Retired,	Student							
	work but have had a job in the last 1. k in the last 12 month, enter '8'.)	2 months, please use your last occupation. If						

OTHER FAMILY DETAILS

If applicable, please talk to your school about:

- arrangements for the payment of contributions or charges.
- distribution of information, including student reports and newsletters

OTHERCONTACTL	DETAILS (People other than Parer	nt/Carer 1 and Parent/Carer 2 w	ho may be contacted in an emergency
CONTACT 1:			
Title		First Name	
Surname			
Relationship to the student			
Postal Address (if different from student			
residential address)			Postcode
Telephone (Home)		Mobile Number	
Email Address			
CONTACT 2:			
Title		First Name	
Surname			
Relationship to the student			
Postal Address			
(if different from student residential address)			Postcode
Telephone (Home)		Mobile Number	
Email Addres			



FORM 1 STUDENT HEALTH CARE SUMMARY

SECTION A									
Year				Form			Teach	ner	
Student's name									
Date of birth (dd/mm/yy)		/	/		Gender	Male	Fema	ale	Not Specified
Address									
								Postcoo	de
FAMILY CONTA	CT [DETA	AILS						
Name									
Relationship to student									
Address									
								Postcod	е
Telephone (Home)					Telephone ((Work)			
Telephone (Mobile)									
Name									
Relationship to student									
Address									
								Postcod	е
Telephone (Home)					Telephone (Work)			
Telephone (Mobile)									

MEDICAL DETAILS						
Medical practice						
Doctor 1 Telephone						
Doctor 2 Telephone						
Do you have ambulance insurance? YES NO - If yes, specify insurance provider: If there is a medical emergency, parents/carers are expected to meet the cost of an ambulance.						
List any essential information that could affect your child in an emergency e.g. allergy to penicillin.						
Medicare Card Individual Reference Number (IRN)						
Expiry date (dd/mm/yy) / /						
ADMINISTRATION OF MEDICATION						
Written authorisation must be provided for staff to administer any form of medication at school.						
Long term medication – Complete the Medication section of the relevant health care plan – see below. Short term medication – Request an Administration of Medication form to complete and return to the principal or class teacher. Note: All medication required must be supplied by parents/carers.						
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 for the school to share your child's health care information? YES NO						
Note: If your child is enrolled in a TAFE, PEAC or an alternative education program, this includes the transfer of their health care information to the principal or manager of that program.						
If no, 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 will require support from school staff? (Check the box that applies)						
NO - Sign below and return Section A of this form to the school office. If your child's requirements change, please notify the school.						
Signature Date / If you are completing this form online and are unable to sign this form, please check this box to confirm the above information is true and correct. Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.						
YES - Complete the remainder of this form and return to the school office. You will be given additional forms to						
complete. List your child's health condition(s)						

NACDIOAL

SECTION B							
IN THE FOLLOWING TABLE, PLEASE INDICATE YOUR CHILD'S SCHOOL STAFF. (In response to the information below, you will be		• •					
	_	· ·		support your child?			
Severe Allergy/Anaphylaxis	YES	NO					
Minor and Moderate Allergies	YES	NO					
Diabetes	YES	NO					
Seizures	YES	NO					
Asthma	YES	NO					
Activities of Daily Living	YES	NO					
Other Conditions or Needs (Please specify below)	YES	NO					
Has your child's Medical Practitioner provided a health care plan to a YES NO - If yes, advise the Principal: If you have ticked Yes for specific staff training, please discuss the ty SECTION C - CONSENT FOR PHOTO IDENTIFICATION If your child has a condition where an emergency may occur, please child's medical details and photo on view to provide immediate identify in the permission for my child's medical details and photo to be on view to provide immediate identify yes, please attach photo to the relevant health care plan(s).	ype of training TION ON a indicate whification.	ng needed with the YOUR CHILE ether you give co	e Principal. D'S HEALT	TH CARE PLAN			
SECTION D - MEDIC ALERT INFORM	OITAN	V					
Does your child have a Medic Alert bracelet or pendant?	YES	NO - If yes, prov	ide details be	elow:			
Parent/Carer Signature		Date	/	1			
Parent/Carer Name							
If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct. Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school. ON COMPLETION OF THIS FORM, PLEASE REQUEST AND COMPLETE THE RELEVANT HEALTH							
CARE PLANS. Note: Where appropriate students should be encouraged to participate in the	ir health care	planning.					
OFFICE USE ONLY							
Does the child have an allergy that needs to be flagged on SIS?	YES	NO	Date	1 1			
Have relevant health care plans been issued to the parent?	YES	NO	Date				

YES

YES

NO

NO

Date

Has the Principal been informed if:

specific training is required to support the student? the student's health care information is to be restricted?

Date Student Health Care Summary was completed and uploaded on SIS:

STUDENT ID CARD & SMARTRIDER CONCESSION CARD

All students at John Tonkin College ESC are required to have an ID card similar in size to a credit card. This card includes the legal name of the student, a photograph and the student's birth date. This card is used to prove that the student is currently enrolled, to logon to computers, to add credit for printing and photocopying, and to borrow resources and equipment from the library and other areas of the campus.

On the reverse of the card is a TransPerth SmartRider concession card. Parents/guardians should be aware that students will require a Student SmartRider to access concession travel on TransPerth, bus, rail and ferry services, and TRANSWA country road and country rail services.

Parents/guardians need to give their permission for schools to provide student details to the Public Transport Authority for the purposes of registering the student for concession travel and to enable the Student ID / SmartRider card to be produced. The information that will be released is student legal name, date of birth, address and Curriculum Council number. (This information ensures that credit for both TransPerth and John Tonkin College ESC on lost or stolen cards is retained for replacement cards). A replacement card will cost \$6 to replace.

The PTA must comply with the privacy requirements for the public sector and as such will only be using the information provided by the school for the issuance of the Student SmartRider concession card.

For your child to be issued with a combined John Tonkin College ESC ID card/Student SmartRider, you need to sign the permission and registration slip below.

Please contact your school or the TransPerth Info Line on 13 62 13 if you have any further questions.

Permission is given for the above student's details and photograph to be released to the PTA for the purpose of issuing a Student SmartRider Card

Student name
Signature
Date
Parent name
Signature
Date



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		•		N I	_			144	w

STUDENT NAME:	DATE OF BIRTH:	
ADDRESS:		
PHONE:		
PARENT/GUARDIAN NAME:		

I hereby give permission for my child, while attending John Tonkin College ESC to:		Please Circle	
Be tested and assessed periodically by the School Psychologist	YES	NO	
Be photographed (still film, video, movie & newspaper) for purposes of educational research and publicity with public viewing likely in some instances, when the child's full name will not be used. This may include your student's image being used on the School's public Web Page. www.johntonkincollegeesc.wa.edu.au and Facebook page	YES	NO	
Be photographed: For the Year book, School Class Photos's, graduation class photo's	YES	NO	
I give permission for Reports on Student Educational Progress, Student Review Reports, my child, to be released to Disability Service Commission, Centrelink and / or any other involved agency.	YES	NO	
As a parent/guardian I agree to support the: Student Enrolment Agreement Student Computer User Agreement School Dress Code Policy Mobile Phone Policy School Behaviour Policy	YES	NO	
As a parent/guardian I will support the Student Code of Conduct and management of Student Good Standing: Consequences for loss of Good Standing are: Ineligibility to represent John Tonkin College ESC or to participate in extra-curricular activities such as school balls, excursions, camps, etc. Termination of subject enrolment, risks to accreditation and graduation Possible cancellation of enrolment in serious cases	YES	NO	

COMPUTER USE AGREEMENT

- 1. I shall only use my account for the purpose of my education as directed by the teacher.
- 2. I understand that I am responsible for all activity on my account thus I will not give anyone my password, let others use my account, or access other people's accounts.
- 3. I will not reveal personal information, including names, addresses, photographs, credit card details and telephone numbers of myself or others via computers on the Campus network.
- 4. I shall not use the Internet to access unacceptable and inappropriate material or try to access sites that have been blocked by the school or the Department of Education and Training. Examples of inappropriate content include violent, racist, sexist or pornographic materials, or content that is offensive, disturbing or intimidating or that encourages dangerous or illegal activity.
- 5. I will make sure that any email or work that I wish to have published is respectful, accurate, carefully written and well presented.
- 6. I shall not break copyright law by copying and/or redistributing another's work without their permission and I shall not use another person's work without acknowledging them.
- 7. I will not bring to school or run software that is designed to bypass Campus or Department of Education and Training monitoring, restrictions or security systems eg. Games on USB drives.
- 8. I will not download software programs or large files unless I have asked and received permission to do so. This includes accessing such material as music/mp3 files, videos and games whether or not they contravene copyright laws.
- 9. I will not use the Campus computers for personal gain or illegal activity, to bully, offend or intimidate others or send inappropriate materials including software that may damage computers, data or networks.
- 10. I will not damage or disable the computers, computer systems or computer networks at the Campus, the Department of Education and Training or any other organisation.

I understand that:

- The Campus and the Department of Education and Training may monitor any information sent or received and can trace activity to the online services accounts of specific users.
- I will be held responsible for my actions while using online services and for any breaches caused by allowing any other person to use my online services account.
- The misuse of online services may result in the withdrawal of access to services and other consequences dictated in Campus policy.
- I may be held legally liable for offences committed using online services; and
- The Campus is obliged under state and federal law to pass on any information that may be required as evidence of a breach in state or federal law.



I agree to abide by the Computer Use Agreement for students. I understand that if I am given an account and break any rules above, it may result in disciplinary action.

Student name	
Signature	
Date	
Parent name	
Signature	
Date	

ATTENDANCE POLICY

It is a legal requirement that any absence must be covered by a phone call or written explanation from the student's parent or legal guardian. Students are required to provide a medical certificate for any absence of more than 3 days. Regular, consistent attendance (90% +) is the most important responsibility of being a senior secondary student. A commitment to attend all classes is embedded in the Student Enrolment Agreement at John Tonkin College ESC. Students are expected to honour this agreement in order to maximize their performance and potential.

Parents are requested to contact the Centre on 9583 70571 before 3.00pm on the day of the absence.

I accept responsibility for my attendance and commit to attend all classes at John Tonkin College Education Support Officer.

DRESS POLICY

STANDARD OF DRESS FOR John Tonkin College ESC STUDENTS

All students at the John Tonkin College ESC are required to wear approved clothing purchased at EmbroidMe, Reserve Drive, Mandurah.

SUMMER

- Navy polo shirt with logo (EmbroidMe)
- Black shorts (EmbroidMe)
- Plain navy blue/black cap no logos

WINTER

 Black tracksuit pants and top (EmbroidMe) It is a legislated requirement that all students must wear a compulsory uniform when attending Government schools. As a senior centre, John Tonkin College ESC is subject to this legislation and stipulates a 'Dress Code' as our uniform requirement.

The John Tonkin College ESC Dress Code requires students to wear specific attire bearing the Centre logo, supplemented by generic items that must fit stated standards. Which can be ordered and purchased from EmbroidMe, Reserve Drive, Mandurah

Conforming to the Centre Dress Code is a key responsibility of being a senior secondary student at John Tonkin College ESC

Wearing College attire demonstrates respect for self and the Centre community, and signifies that students are committed to their purpose while on our campus.

A commitment to abide by the Centre Dress Code is embedded in the Student Enrolment Agreement at John Tonkin College ESC Students are expected to honour this agreement in order to maximize their performance and potential.

I understand the requirement to conform to the College Dress Code and accept responsibility to ensure that I am appropriately attired when attending John Tonkin College ESC.

Student name	
signatore	
Date	
Parent name	
Signature	
Date	



John Tonkin College Education Support Centre

Student Mobile Phones in Schools Policy

Policy

The Department of Education does not permit student use of mobile phones in public schools unless for medical or teacher directed educational purpose.

For the purpose of this policy, "mobile phones" includes smart watches and associated listening accessories, such as, but not limited to, headphones and ear buds

It is not a requirement at John Tonkin College ESC for students to have a mobile phone at school.

The school has duty of care for all students when they are attending the school. All communication between parents and students, during school hours, should occur via the School's Administration, (08) 9583 0571

We understand and recognise that an increasing number of parents/carer who for safety, security and/or emergency purposes wish to provide their children with a mobile phone. This policy details the conditions under which mobile phones are permitted at John Tonkin College ESC.

Conditions of Use

The use of mobile phones for all students will be banned from the time they arrive at school to the conclusion of their school day. This includes before school and at break times (off and away all day)

All Students

If a student brings a mobile phone to school, the mobile must be switched off and taken to the administration office before the school day begins and collected at the end of the day. Students will need to place it in the mobile phone cupboard, which is locked each day by admin, this is to make sure that your child's mobile phone is securely stored during the day.

Smart Watches

- Smart watches must be in airplane mode so phone calls and messages cannot be sent or received during the day.
- If a child is seen using their smart watch it will be confiscated and securely placed in the locked cupboard.

Exemptions

Exemptions to this ban include where a student requires a mobile phone:

- To monitor a health condition as part of a school approved documented health care plan
- Under the direct instruction of a teacher for educational purposes
- As part of a students documented risk management plan, deemed necessary only by Principal or a representative of the principal

Breaches of this Policy

- Breaches of this policy will be managed in accordance with the John Tonkin College ESC Behavior Management Policy and procedures
- Students who do not comply with this policy will have their mobile phone confiscated and held at administration. The student can collect the mobile phone at the end of the day
- In the case of repeated inappropriate mobile phone use by a student, their mobile phone will be confiscated and held at the administration. The parent/carer will be informed and requested to collect the mobile phone from the school at their earliest convenience.

ELECTRONIC DEVICE POLICY & USER AGREEMENT

There are an increasing number of parents/guardians who for safety, security and / or emergency purposes wish to provide their children with mobile phones. This policy details the conditions under which mobile phones are permitted at the John Tonkin College Education Support Centre.

Conditions of Use

First Warning:

- 1. Students will only be permitted to bring a mobile phone onto school premises for safety, security or emergency purposes (ie contact parents after school to arrange pick- up times).
- 2. Mobile phones will be required to be turned OFF during school hours of 8am 2.40pm
- **3.** Mobile phones will remain in school bags AT ALL TIMES, If a student does not have a school bag the phone is to be given to admin. They may only be turned on **out of school hours**.
- **4.** The use of mobile phones at recess and lunchtimes is **PROHIBITED**. Students will be asked to put their phone away (**first warning**)
- **5.** JTCESC has Duty of care of all students who attend and instances that require emergency contact with parents **will be conducted by a staff member and/or Principal**.

If a student is found using his/her mobile phone they will be asked to

6. The school does not accept responsibility for any theft, loss or damage of mobile phones.

Consequences of the misuse of Mobile phones at JTCESC

put it in their bag

Second Warning:		econd time using his/her mobile the student can collect the pho	-
Third warning:		hird time using his/her mobile ph a parent/carer will be called to	
We parent/guard	an	and student	agree to the
"Conditions of Use	" set down in this policy o	and understand that violation o	f the "Conditions of Use" wil
result in the studer	t losing the privilege of h	aving a mobile. I confirm that m	ny child's mobile phone is for
safety, security or e	emergency purpose only	and can only be used out of sc	hool hours.
	Student Signature		
	Parent Signature		
	5.1		

PRIVACY AND DECLARATION Please tick to confirm: I understand: that the student's enrolment information is confidential and will be kept as required by the Department of Education's record keeping procedures. 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 declare: This is the only enrolment I have made for the student. I understand that I am required to notify the school as soon as any of the enrolment details for the student change. Lunderstand that if I provide false or misleading information the student's enrolment may be reconsidered or cancelled. I have provided all documentation available to me. Name of person enrolling student Title First Name Surname Relationship to the student Date **Signature** (Independent minors and those aged 18 years or older may sign on their own behalf) If you are completing this form online and are unable to sign this form, please check this box to confirm the above information is true and correct. Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school. APPROVAL OF PRINCIPAL OR DELEGATE Principal's approval YES NO **Enrolment approved Signature** Date

crossing supervisor].

Relates to questions in Parent/Carer 1 and Parent/Carer 2 sections in this form

GROUP 1	GROUP 2	GROUP 3	GROUP 4
Senior management in large business organisation governmentadministration & 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
department head in industry, commerce, media or other large organisation. Public service manager section head or above), egional director, health/education/police/ fire services administrator. Other administrator [school principal, faculty head/dean, brary/museum/gallery director, esearch facility director]. Defence Forces Commissioned Officer. Professionals generally have degree or higher qualifications and experience in applying this mowledge to design, develop or operate complex systems; dentify, treat and advise on problems; and teach others. Health, Education, Law, incidence, Computing orofessional. Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]. Air/sea transport aircraft/ships captain/officer/bilot, flight officer, flying instructor, air traffic controller].	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]. or 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.	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/refuge/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor].	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 staf street vendor, telemarketer, shelf stacker]. Assistant/aide [trades' assistant, weterinary nurse, nursing assistant, usher, home helper, salon assistant, animal attendant]. Labourers and related worke Defence Forces ranks below senior NCO not included in other groups. Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]. Other worker [labourer, factor, hand, storeman, guard, cleaner

Unique Student Identifier (USI)

This information is required for us to obtain a **USI (Unique Student Identifier)** number for your child. Without this number your child will not be able to attend their VET course.

This online account will contain all your child's nationally recognised training records and results.

All students at John Tonkin College ESC will register to obtain a USI. The students will need to provide one form of identification to register.

I give permission for John Tonkin College ESC to apply for a USI number on behalf of my child

	,	•
Parent / Guardian Name	Signed	Date
Please provide current Medicare detail: ASAP.	s below and return the	e slip to the front office or teache
Child's name (which is exactly written o	n the Medicare card)	
Medicare Number	Individu	medicare med
Childs Ref number (the number next to	Reference Nu	
Valid number and year		
Address		
	Pos	stcode
Child place of birth (town/city)	Child's D.O.B (dc	ate of birth)
Students email address, if student doesr	n't have email, please	

OFFICE USE ONLY		
Student's official documentation all sighted (Date): YES NO Birth certificate Passport Travel document/s Student's Residency status: Local Permanent Resident Overseas Student: If yes, International fee paying: YES NO Entry Date:		
Previous School: Records received: YES NO		
Publications/Internet Permission Form completed:		
Contributions and Charges Billing: PG1:% PG2:% Other:%		
Official documentation:		
Immunisation records provided:		
Form/Class: House Faction:		
Approved by Principal: NO YES on (Date):		
Entered on School Information system by: on (Date):		
Student leaves school: (Date) Date Transfer Note Sent:		
Destination:		
Records received from transferring school: NO YES on (Date):		
RETENTION AND TRANSFER OF STUDENT ENROLMENT RECORDS:		
 Enrolment Applications (successful) – The School to retain for 5 years after last action and then destroy. Enrolment Applications (unsuccessful) –The School to retain for 2 years after last action and then destroy. Enrolment Register (Register of Admissions/Enrolment Cards used prior to the School Information System) – The School to retain for 7 years after last action and then archive and transfer to State 		
Records Office only when advised by Corporate Information Services. 4. Enrolment Records (managed in the School Information System) – The School must print out annually for all school leavers, the School must retain for 7 years after the last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.		

5. Student files – The School must negotiate with the previous school at the local level the transfer

within 5 school days.