

OFFICE USE ONLY

YEAR APPLIED FOR:

Please return this form to the principal of the selective high school you are applying for. Please read the privacy notice on page 4 before completing this application. A separate application form must be provided to each school you choose (up to a maximum of 4). Please confirm with each school the specific requirement for assessment before completing this application. **CLOSING DATE: 29 July 2014**

Years 8 to 12 entry to selective high schools in

Application form

2015

STUDENT DETAILS (To be completed by a parent)

Student's family name															
Student's given names															
Date of birth	d	d	/ m	m	/ y	у	у	у		Gende	r	Male	Female		
Student's current school															
Student's current academ	nic year	eg.	Yr 7												
Parent I name	TITL	F			GI							FAMI	LY NAME		
Parant 2 name	1111				GI	VLINIV									
Parent 2 name		Gľ	GIVEN NAME						FAMILY NAME						
Postal Address															
Suburb/Town									State			Pos	stcode		
Telephone (H)						(W)					(M)			
Other contact number or email address															

RESIDENCY

AUSTRALIAN RESIDENCY					
Is the student a citizen of Australia or New Zealand?		Yes	No		
If 'Yes' go straight to NSW Residency below.					
Is the student the holder of a visa granting permanent residency in Australia?			Yes	No	
If 'Yes', when was permanent residency granted?	Date	1	1		
Please state your visa details.	Class		Subclas	ss	

NEW SOUTH WALES RESIDENCY

If the student and family do not currently live in NSW, will they be living in NSW in 2015?

Yes

BACKGROUND				
a. Is your child an Aboriginal or Torres Strait Islander student?	Yes		No	
b. Has your child been doing most school work in English for less than 4 years?	Yes		No	
c. If 'Yes' to b, what month and year did the student start doing most school work in English?	m m	y y	уу	V
DISABILITY, MEDICAL CONDITION OR BEHAVIOURAL DISORDER		7	1 1	,
Does the student have a disability, medical condition or behavioural disorder which may affect his	or her sch	ool p	erformai	nce?
	Yes		No	
If 'Yes', what is the nature of the disability?				
Please indicate any special arrangements (e.g. wheelchair access) the student may require at scho	ol.			

FAMILY PLACEMENT CLAIM

This section is to be completed only if a MEMBER OF THE STUDENT'S IMMEDIATE FAMILY (parent, guardian, brother or sister) currently attends or previously attended the school you are applying for. If no immediate family member has attended the school, please go on to 'School Details' below.

Name						
Relationship to student Years attended						
		SCHOO	L USE ONLY			
VERIFIED CORRECT	Yes No	Verifying c	officer		Date	
SCHOOL DETAIL	LS					
What academic year are	you applying for?	8	9	10	П	12

SCHOOL CHOICES

Please list, in order of priority, all selective high schools you are applying for. You must complete an application form for each of your school choices and you must include this information in the <u>same order</u> on each form.

Example

I FORT STREET HIGH SCHOOL

Selective high school name

1	
2	
3	
4	

SCHOOL PERFORMANCE

It is essential that you check with each school you are applying for to find out the type of evidence they require.

Have you attached copies of the student's reports for the current year and/or for the previous year?	Yes	No	
Have you asked each school you are applying for if there are any other assessment or evidence requirements?	Yes	No	
If required by the school to which you are applying, have you attached additional copies of evidence about the student's excellence in academic and co-curricular activities, e.g. academic performance, sport, music, art?	Yes	No	

Please note: You may be required to produce original documents at a later date.

SCHOOL SUBJECTS

AGRICULTURAL HIGH SCHOOL APPLICANTS ONLY

This section is to be completed only if you are applying for entry to an AGRICULTURAL high school <u>on this application form</u>. If not, please go on to 'Parent's Declaration' on page 4.

Why do you wish the student to attend an agricultural high school?

Is the student studying agriculture at the present school? Yes

No

If 'Yes', for how many years has agriculture been studied?

Please tick to indicate the type of placement you are seeking.

Day (not available at Yanco)

Boarder (not available at James Ruse)

4

BOARDER APPLICANTS FOR AGRICULTURAL HIGH SCHOOLS ON	Ľ
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Complete this section if you wish to apply for boarder placement at a residential agricultural high school on the grounds of isolation, otherwise please proceed to the 'Parent's Declaration'. Is the student eligible for the Assistance for Isolated Children Scheme through Centrelink? Yes No

	which the stude attend as a day	ment high school* ent can currently student. ool you are applying for.	Nearest government high school, not an agricultural high school, where agriculture is available from Year 8.		
Name of nearest government high school					
Distance from the student's home to this school using available transport service. (If there is no transport service show distance by road.)		km	not aj	oplicable	
Time taken for a one-way journey to this school, excluding waiting time. (If morning and afternoon times are different, state the average.)		hrs mins		hrs	mins
Distance from the student's home to the nearest transport to this school.		km	not a	oplicable	
Where does the student usually live? If you answered (b) out of town, and you know below if you wish.	the latitude and lo	(a) in or near ongitude of your reside	,	o) out of tow ride that info	
Latitude	Longitude				
Are there special circumstances where the stud If yes, please provide details.	ent might be cons	idered isolated?	Ye	es N	lo
Please comment on the student's ability to cope	in a boarder situa	tion, both socially and	emotionally.		

PARENT' S DECLARATION: TO BE COMPLETED BY ALL APPLICANTS

I declare that, to the best of my knowledge, the information I have provided in this application form is accurate.

I understand that all successful applicants will be required to show original documentation, such as birth certificates and relevant visas, as proof of residency before enrolment can be finalised by the school.

I understand that placement is subject to the Department of Education and Communities enrolment policies and procedures. I understand that offers or enrolments may be terminated if placement is made on the basis of false or misleading information.

PARENT'S SIGNATURE

PRIVACY NOTICE

The NSW Department of Education and Communities of 35 Bridge St Sydney NSW is subject to the Education Act 1990, NSW Privacy and Personal Information Protection Act 1988 and Information Privacy Act 2002. The information contained on this form is required to assess and process the student's application for enrolment in a selective high school. In addition the

Department will collect and obtain other personal information (including future information) to assist in assessing and processing the application, including but not limited to results and information about the student's performance in the assessments.

This information will be stored securely for at least 3 years. You may contact the School to access or correct information held if necessary. This information, or part thereof, may be used and disclosed by the NSW Department of Education and Communities for the following purposes:

- Assessing and processing the application for enrolment in a selective high school, determining placement and review of such placement;
- · Communication to Departmental staff, including NSW government school principals, volunteers and persons who may be involved in any way in the placement process.
- General student administration, including notifying the student's current government school of the outcome of the application as well as notifying any other person authorised by the parent;
- For any other matters relating to the education and welfare of the student, for the purposes of data collection and for any other purpose required by law.

DATE