

## PRIMARY SCHOOL PRIVACY NOTICE

Information about the Enrolment Form.

**Please Read This Notice Before Completing The Enrolment Form.**



This confidential enrolment form asks for personal information about your child as well as family members and others that provide care for your child. The main purpose for collecting this information is so that Parkhill Primary School can register your child and allocate staff and resources to provide for their educational and support needs. All staff at Parkhill Primary School and the Department of Education & Training are required by law to protect the information provided by this enrolment form.

Health information is collected so that staff at Parkhill Primary School can properly care for your child. This includes information about any medical condition or disability your child may have, medication your child may rely on while at school, any known allergies and contact details of your child's doctor. Parkhill Primary School depends on you to provide all relevant health information because withholding some health information may put your child's health at risk.

Parkhill Primary School requires information about all parents, guardians or carers so that we can take account of family arrangements. Family Court Orders setting out any access restrictions and parenting plans should be made available to Parkhill Primary School. Please tell us as soon as possible about any changes to these arrangements. Please do not hesitate to contact the Principal, Rod McKinlay, if you would like to discuss, in strict confidence, any matters relating to family arrangements.

**Emergency Contacts** These are people that Parkhill Primary School may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Parkhill Primary School.

**Student Background Information** This includes information about a person's country of birth, aboriginality, language spoken at home and parent occupation. This information is collected so that Parkhill Primary School receives appropriate resource allocations for their students. It is also used by the Department to plan for future educational needs in Victoria. Some information is sent to Commonwealth government agencies for monitoring, planning and resource allocation. All of this information is kept strictly confidential and the Department will not otherwise disclose the information to others without your consent or as required by law.

**Immunisation status** This assists Parkhill Primary School in managing health risks for children. This information may also be passed to the Department of Human Services to assess immunisation rates in Victoria. Information sent to the Department of Human Services is aggregate data so no individual is identified.

**Visa status** This information is required to enable Parkhill Primary School to process your child's enrolment.

**UPDATING YOUR CHILD'S RECORDS** Please let Parkhill Primary School know if any information needs to be changed by sending updated information to the school office. Please contact Parkhill Primary School on 03 9807 2239 or by email at [parkhill.ps@edumail.vic.gov.au](mailto:parkhill.ps@edumail.vic.gov.au) to update any information. During your child's time at Parkhill Primary School we will also send you copies of enrolment information held by us. Please use this opportunity to let us know of any changes.

**ACCESS TO YOUR CHILD'S RECORD HELD BY SCHOOL** In most circumstances you can access your child's records. Please contact the Principal on 03 9807 2239 to arrange this. Sometimes access to certain information, such as information provided by someone else, may require a Freedom of Information request. We will advise you if this is required and tell you how you can do this. If you have any concerns about the confidentiality of this information please contact the Principal. Parkhill Primary School can also provide you with more detailed information about privacy policies that govern the collection and use of information requested on this form. The Primary School privacy policy is available at <http://www.education.vic.gov.au/Pages/privacypolicy.aspx>.

**Parental Occupation Group Codes** - The codes outlined below are to be used when providing family occupation details for enrolled students. This information is used for determining funding allocations to schools.

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**If the person has not been in paid work for the last 12 months, enter 'N'.**

**GROUP A** Senior management in large business organisation, government administration and defence, and qualified professionals Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation

*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:

*Health, Education, Law, Social Welfare, Engineering, Science, Computing* professional

*Business* (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)

*Air/sea transport* (aircraft / ship's captain / officer / pilot, flight officer, flying instructor, air traffic controller)

**GROUP B** Other business managers, arts/media/sportspersons and associate professionals

*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, 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

**GROUP C** Tradesmen/women, clerks and skilled office, sales and service staff

*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)

**GROUP D** Machine operators, hospitality staff, assistants, labourers and related workers

*Drivers, mobile plant, production / processing machinery and other machinery operators*

*Hospitality staff* (hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, 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 staff, street vendor, telemarketer, shelf stacker)

▪ *Assistant / aide* (trades' assistant, school / teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum / gallery attendant, usher, home helper, salon assistant, animal attendant) Labourers and related workers - *Defence Forces* - ranks below senior NCO not included above

*Agriculture, horticulture, forestry, fishing, mining worker* (farm overseer, shearer, wool / hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/ logging worker, miner, seafarer / fishing hand)

*Other worker* (labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)

## STUDENT ENROLMENT INFORMATION

OFFICE  
COMPUTER ID  
NUMBER:

**❖ Questions are asked as a requirement of the Commonwealth Government. All schools across Australia will be required to collect the same information. Please answer each question.**



**It is a requirement on enrolling your child to supply a copy of your child's Birth Certificate, Passport, Visa & Immunisation records. If transferring from another school please supply a copy of your child's last report**

STUDENT PERSONAL DETAILS:					
	<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"> <p><input checked="" type="checkbox"/> GENDER</p> <p><input type="checkbox"/> MALE      <input type="checkbox"/> FEMALE</p> </td> <td style="width: 40%; border: none;"> <p>DATE OF BIRTH: ____ / ____ / ____</p> </td> </tr> <tr> <td style="border: none;"> <p>Year of enrolment:</p> </td> <td style="border: none;"> <p>Grade:</p> </td> </tr> </table>	<p><input checked="" type="checkbox"/> GENDER</p> <p><input type="checkbox"/> MALE      <input type="checkbox"/> FEMALE</p>	<p>DATE OF BIRTH: ____ / ____ / ____</p>	<p>Year of enrolment:</p>	<p>Grade:</p>
<p><input checked="" type="checkbox"/> GENDER</p> <p><input type="checkbox"/> MALE      <input type="checkbox"/> FEMALE</p>	<p>DATE OF BIRTH: ____ / ____ / ____</p>				
<p>Year of enrolment:</p>	<p>Grade:</p>				
STUDENT SURNAME:					
FIRST GIVEN NAME:					
SECOND GIVEN NAME:					
PREFERRED NAME:					
Primary Family Address Street Name & Number: <i>(Correspondence will be sent to this address. Documentation may be needed to confirm your address)</i>					
Suburb:	Postcode:				
List any other family members attending Parkhill Primary School:					

Student Religious Instruction:	<p><i>A fee is payable yearly to cover the purchase of stationery items required for religious instruction classes.</i></p> <p><i>As per department guidelines an official form stating the availability of instructors will be sent home each year. We ask that the form &amp; payment be returned by the due date. Should you no longer wish your child to attend religious instruction classes, please send a written note to the office. Note: NO Refunds available.</i></p>
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What is the student's home Map reference, e.g. Melways?	Distance to School in kilometres:
Usual mode of transport to school: (tick)	
<input type="checkbox"/> Walking <input type="checkbox"/> Bicycle <input type="checkbox"/> Public Bus <input type="checkbox"/> Train <input type="checkbox"/> Tram <input type="checkbox"/> Driven\Car <input type="checkbox"/> Taxi <input type="checkbox"/> Other	



A COPY OF THE FOLLOWING DOCUMENTATION IS REQUIRED WHEN SUBMITTING THIS ENROLMENT FORM:

- BIRTH CERTIFICATE
- IMMUNISATION CERTIFICATE
- VISA – Visa Code....
- PASSPORT

MEDICAL ACTION PLAN – if applicable

- Asthma plan
- Anaphylaxis plan
- Allergy plan
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A Working with Children Check is required if you wish to Volunteer. Please supply a copy.

Please ensure you have signed the following:

- ENROLMENT INFORMATION & ACCIDENT/MEDICAL CONSENT

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Dear Parents

We would love to know the reason you have chosen to enrol your child at Parkhill Primary School:

Name:.....

- Word of Mouth
- Visit to our School
- Other -----  
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(Please choose one or more of the above options)

**PRIMARY FAMILY DETAILS** NOTE: The 'PRIMARY' Family is: "the family or parent the student mostly lives with". Additional and Alternative family forms are available from the school if this is required. These additional forms are designed to cater for varying family circumstances.

❖ These questions are asked as a requirement of the Commonwealth Government. All schools across Australia are required to collect the same information.

<b>Adult A Details: (Primary Carer)</b>	❖GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	Title: Mr / Mrs / Miss / Ms / Dr
LEGAL SURNAME:		
LEGAL GIVEN NAME/s:		
PREFERRED NAME:		
In which country was Adult A born?	<input type="checkbox"/> Australia <input type="checkbox"/> Other – <i>please state</i> :	
❖What is Adult A's occupation?	❖Who is Adult A's employer?	
<p>❖What is the occupation group of Adult A? Please select the appropriate parental occupation group and group code from the attached list.</p> <ul style="list-style-type: none"> <li>If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached occupation group list. Please indicate the group code in the box below.</li> </ul> <p>If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'. <span style="border: 2px solid black; display: inline-block; width: 30px; height: 30px; vertical-align: middle;"></span></p>		
Is an interpreter required? (tick)	<input type="checkbox"/> NO <input type="checkbox"/> YES	
❖What is the highest year of primary or secondary school Adult A has completed? (tick one) (For persons who have never attended school, mark 'Year 9 or equivalent or below'.)	<input type="checkbox"/> Year 12 or equivalent equivalent	<input type="checkbox"/> Year 11 or
	<input type="checkbox"/> Year 10 or equivalent or below	<input type="checkbox"/> Year 9 or equivalent
❖What is the level of the highest qualification the Adult A has completed? (tick one)	<input type="checkbox"/> Bachelor Degree or Above Diploma	<input type="checkbox"/> Advanced Diploma / Diploma
	<input type="checkbox"/> Certificate 1 to 1V qualification	<input type="checkbox"/> No Non-school qualification
Relationship of Adult A to Student: (tick one)	<input type="checkbox"/> Parent <input type="checkbox"/> Step-Parent <input type="checkbox"/> Adoptive <input type="checkbox"/> Foster-Parent <input type="checkbox"/> Host Family <input type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Self <input type="checkbox"/> Other	

<b>Adult B Details:</b>	❖ GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	Title: Mr / Mrs / Miss / Ms / Dr
LEGAL SURNAME:		
LEGAL GIVEN NAME/s:		
PREFERRED NAME:		
In which country was Adult B born?	<input type="checkbox"/> Australia	<input type="checkbox"/> Other – <i>please state:</i>
❖ <i>What is Adult B's occupation?</i>		❖ <i>Who is Adult B's employer?</i>
<p>❖ <i>What is the occupation group of Adult B?</i> Please select the appropriate parental occupation group and group code from the attached list.</p> <ul style="list-style-type: none"> <li>If the person is not currently in paid work but has had a job in the last 12 months, or has retired in the last 12 months, please use their last occupation to select from the attached occupation group list. Please indicate the group code in the box below.</li> </ul> <div style="text-align: right; margin-right: 50px;"><input style="width: 40px; height: 30px; border: 2px solid black;" type="text"/></div> <ul style="list-style-type: none"> <li>If the person has not been in <u>paid</u> work for the last 12 months, enter 'N'.</li> </ul>		
<i>Is an interpreter required?</i> (tick)	<input type="checkbox"/> NO	<input type="checkbox"/> YES
❖ <i>What is the highest year of primary or secondary school Adult B has completed?</i> (tick one) (For persons who have never attended school, mark 'Year 9 or equivalent or below'.)	<input type="checkbox"/> Year 12 or equivalent equivalent	<input type="checkbox"/> Year 11 or
	<input type="checkbox"/> Year 10 or equivalent or below	<input type="checkbox"/> Year 9 or equivalent
❖ <i>What is the level of the highest qualification the Adult B has completed?</i> (tick one)	<input type="checkbox"/> Bachelor Degree or Above Diploma	<input type="checkbox"/> Advanced Diploma / Diploma
	<input type="checkbox"/> Certificate 1 to 1V qualification	<input type="checkbox"/> No Non-school
Relationship of Adult B to Student: (tick one)	<input type="checkbox"/> Parent <input type="checkbox"/> Step-Parent <input type="checkbox"/> Adoptive Parent <input type="checkbox"/> Foster-Parent <input type="checkbox"/> Host Family <input type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Self <input type="checkbox"/> Other	
<i>The student lives with the Primary Family:</i> (tick one):		
<input type="checkbox"/> ALWAYS <input type="checkbox"/> MOSTLY <input type="checkbox"/> BALANCED <input type="checkbox"/> OCCASIONALLY <input type="checkbox"/> NEVER		

PRIMARY FAMILY CONTACT DETAILS – ADULT A: * *	
MOBILE TELEPHONE: <i>(SMS Notifications may be used in case of emergencies)</i>	HOME TELEPHONE:
CAN WE CONTACT ADULT A AT WORK: <input type="checkbox"/> NO <input type="checkbox"/> YES –                      WORK NUMBER:	
EMAIL ADDRESS: <i>*this is our main form of contact for newsletters etc...</i>	
* * <b>CONTACT DETAILS:</b> PRIMARY FAMILY CONTACT DETAILS ON YOUR CHILD/REN'S ENROLMENT FORM INCLUDING EMAIL, WILL BE SHARED WITH-IN OUR PARKHILL PRIMARY SCHOOL COMMUNITY? IE: PARENTS & FRIENDS ASSOCIATION, CLASS REPRESENTATIVE PARENT CONTACT LISTS, & PARKHILL PRIMARY SCHOOL COMMITTEES.	

PRIMARY FAMILY CONTACT DETAILS – ADULT B: * *	
MOBILE TELEPHONE: <i>(SMS Notifications may be used in case of emergencies)</i>	HOME TELEPHONE:
CAN WE CONTACT ADULT B AT WORK: <input type="checkbox"/> NO <input type="checkbox"/> YES –                      WORK NUMBER:	
EMAIL ADDRESS: <i>*this is our main form of contact for newsletters etc...</i>	

PRIMARY FAMILY EMERGENCY CONTACTS:			
<i>Name:</i>	<i>Relationship to student:</i>	<i>Language spoken:</i>	<i>Telephone Contacts:</i>

STUDENT FAMILY DOCTOR DETAILS:	
DOCTOR'S NAME:	TELEPHONE:
ADDRESS:	
Individual or group practice: <input type="checkbox"/> Individual <input type="checkbox"/> Group	
Does the Primary Family have Ambulance Subscription: <input type="checkbox"/> NO <input type="checkbox"/> YES	
Medicare Card Number:	

DEMOGRAPHICS DETAILS OF STUDENT:	
❖ In which country was the student born?	
Date of arrival in Australia OR Date of return to Australia: (dd-mm-yyyy)	____ / ____ / ____
What is the Residential Status of the student? (tick)	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary
Basis of Australian Residency:	<input type="checkbox"/> Eligible for Australia Passport <input type="checkbox"/> Holds Permanent Residency <input type="checkbox"/> Holds Australian Passport
Student's Visa Sub Class & Expiry Date?	Sub Class:      Expiry date:
Visa Statistical Code: (Required for some sub-classes)	
International Student ID : (Not required for exchange students)	
❖ Does the student speak a language other than English at home? (tick) (If more than one language is spoken at home, indicate the one that is spoken most often)	<input type="checkbox"/> NO <input type="checkbox"/> YES Language:.....
Does the student speak English? (tick)	<input type="checkbox"/> NO <input type="checkbox"/> Yes
❖ Is the student of Aboriginal or Torres Strait Islander origin? (tick one)	<input type="checkbox"/> NO <input type="checkbox"/> YES – Aboriginal <input type="checkbox"/> YES – Torres Strait Islander <input type="checkbox"/> YES – Aboriginal & Torres Strait Islander
What is the students living arrangements? # State Arranged Out of Home Care - Students who have been subject to protective intervention by the Department of Human Services and live in alternative care arrangements away from their parents. These DHS-facilitated care arrangements include living with relatives or friends (kith and kin), living with non-relative families (foster families or adolescent community placements) and living in residential care units with rostered care staff.	<input type="checkbox"/> At home with two parents <input type="checkbox"/> At home with one parent <input type="checkbox"/> Arranged by State – Out of home care <input type="checkbox"/> Homeless Youth <input type="checkbox"/> Independent
Name of previous School OR Pre School?	Name:      Language of Previous School:
Date of first enrolment into an Australian School?	____ / ____ / ____
Does the student have a Victorian Student Number?	<input type="checkbox"/> NO <input type="checkbox"/> YES Please specify: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Years of interruption to education? (if applicable)	
Is the student repeating a year?	<input type="checkbox"/> NO <input type="checkbox"/> YES



Does the student require an Integration Aide?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
<i>Will the student be attending this school full time?</i> (tick)	<input type="checkbox"/> NO*	<input type="checkbox"/> YES
*If <b>No</b> , what will be the time fraction that the student will be attending this school? (i.e. 0.8 = 4 days/week)	Time Fraction: Enrolled at another School: <input type="checkbox"/> NO <input type="checkbox"/> YES Other School Name:	

### Conditional Enrolment Details

In some circumstances a child may be enrolled conditionally, particularly if the required enrolment documentation to determine the shared parental responsibility arrangements for a child is not provided. Please refer to the School Policy & Advisory Guide's Admission page for more information (<http://www.education.vic.gov.au/school/principals/spag/participation/Pages/admission.aspx>).

### Enrolment conditions

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Has the documentation been provided and retained or school records?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have the conditions been met to complete the enrolment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### STUDENT RESTRICTION DETAILS:

Is the student at risk?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
Is there an Access Alert for the student? <i>(A copy of any documents must be kept on file &amp; kept up to date)</i>	<input type="checkbox"/> NO <input type="checkbox"/> YES - Court Order <input type="checkbox"/> YES - Family Law Court <input type="checkbox"/> YES - Restraining Order <input type="checkbox"/> YES - Other Specify:	
Describe any Access Restrictions?		
Is there an Activity Alert for the student?	<input type="checkbox"/> NO <input type="checkbox"/> YES - Specify:	

<b>STUDENT MEDICAL DETAILS / IMMUNISATION:</b>	
Does the student have a disability number?	<input type="checkbox"/> NO <input type="checkbox"/> YES – NUMBER:
<b>What is the students Immunisation status?</b> <i>(A copy of Medicare Immunisation document is required)</i>	<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete <input type="checkbox"/> Not Immunised - <i>( a doctors letter is required to state Objection to Immunisation)</i>
Does the student have any impairment of the following?	<input type="checkbox"/> Hearing <input type="checkbox"/> Speech <input type="checkbox"/> Vision <input type="checkbox"/> Mobility
<b>Does the student suffer from Asthma?</b> <i>(A copy of Medical Asthma Plan signed by a doctor is required to be kept on file &amp; updated by the parent   guardian at the beginning of each year)</i>	<input type="checkbox"/> NO <input type="checkbox"/> YES <i>(if no please proceed to Does the student have any other medical condition?)</i>
Please indicate what Asthma symptoms the student suffers from?	<input type="checkbox"/> Cough <input type="checkbox"/> Difficulty Breathing  <input type="checkbox"/> Wheeze <input type="checkbox"/> Tight Chest  <input type="checkbox"/> Exhibits symptoms after exercise
If students displays any of the above symptoms, please:	<input type="checkbox"/> Inform Emergency Contact <input type="checkbox"/> Inform Doctor <input type="checkbox"/> Administer Medication - as per supplied Asthma Plan
Has an Asthma Management Plan been provided to School?	<input type="checkbox"/> YES ( Must be supplied )
Does the student take Asthma medication?	<input type="checkbox"/> Yes    Specify:
Indicate the usual dosage:	
Medication is to be stored & administered by?	<input type="checkbox"/> Student <input type="checkbox"/> Teacher/Staff
<b>Does the student have any other medical condition?</b>	<input type="checkbox"/> No <input type="checkbox"/> YES – Specify:
If students displays any of the above symptoms, please:	<input type="checkbox"/> Inform Emergency Contact <input type="checkbox"/> Inform Doctor <input type="checkbox"/> Administer Medication - as per supplied Asthma Plan
Does the student take any medication for above condition?	<input type="checkbox"/> No <input type="checkbox"/> YES – Specify:
Indicate the usual dosage:	
Medication is to be stored & administered by?	<input type="checkbox"/> Student <input type="checkbox"/> Teacher/Staff

## CONSENT TO MEDICAL ATTENTION

In the event of illness or injury to my child whilst at school, on an excursion, or travelling to or from school; I authorise the Principal or teacher-in-charge of my child, where the Principal or teacher-in-charge is unable to contact me, or it is otherwise impracticable to contact me to: (cross out any unacceptable statement)

- consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner,
- administer such first aid as the Principal or staff member may judge to be reasonably necessary.

The cost of any medical attention or ambulance for a student will be borne by the parent/guardian.

Parents are liable *for all medical expenses* incurred as a result of student injury, including transport costs such as ambulance or air ambulance costs.

**Name of Parent /Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature of Parent / Guardian:** \_\_\_\_\_

Thank you for taking the time to complete this Student Enrolment form.

We understand that the information you have provided is confidential and will be treated as such, but the details are required to enable staff to properly enrol your child at our school.

I certify that the information contained within this form is correct

**Name of Parent /Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature of Parent / Guardian:** \_\_\_\_\_

## Parkhill Primary School: Vision Statement

Through working as a united learning community, our purpose is to produce optimistic, resilient, lifelong learners with skills for future success as responsible citizens in the 21<sup>st</sup> century.

**Intentionally left blank 😊**

**School Based Parent Permission**



Parkhill Primary School offers a range of activities that require the written consent of parents and guardians. To save extensive paperwork several of these activities can be covered by gaining your written consent only once at the start of your child's education at Parkhill PS.

**Use of Student Photos In Displays** From time to time the school makes use of student photos in displays at school and outside of school. This may include brochures, displays, pamphlets, handbooks, local newspapers, internet web pages and videos. While first names may accompany some photographs, surnames will not be published.

**Local Excursions** Parkhill Primary School is well situated to enable our students to visit areas of our community without the necessity for a bus or other transport. Each year, children are involved in local excursions and other activities outside the school grounds, but are within easy walking distance. Local Excursions are defined as walking excursions within local boundaries. These may include but are not limited to; Highbury Road, Huntingdale Road, High Street Road & Gardiner's Creek. Examples of Local Excursions may include Safety Talks at the crossing, Grades 3 & 4 Fitness Runs, Cross-country training, Walkathons, Year 5 & 6 sport, visits to Ashwood High & the nearby wetlands. The Principal approves all such excursions and activities prior to them taking place and where possible, they are publicised beforehand in the school newsletter or via our information App Tiqbiz.

**Head Lice** At certain times during the year there may be outbreaks of head lice. We seek your permission to view your child's hair and will notify you if necessary.

**Acceptable Use Agreement for Internet and Digital Technologies** Parkhill Primary School uses the internet and digital technologies as teaching and learning tools. We see the internet and digital technologies as valuable resources, but acknowledge they must be used responsibly.

Parkhill Primary School believes the teaching of cyber safety and responsible online behaviour is essential in the lives of students and is best taught in partnership between home and school. 21<sup>st</sup> century students spend increasing amounts of time online, learning and collaborating. Students need to do the right thing by themselves and others online, particularly when no one is watching. Safe and responsible behaviour is explicitly taught at our school and parents/carers are requested to reinforce this behaviour at home. Some online activities are illegal and as such should be reported to police. At Parkhill we expect students to follow our acceptable use guidelines and parents and students to understand that inappropriate use of technologies may result in the student internet and digital access being revoked.

***Please sign and return this consent form with your child's enrolment form.***

I hereby acknowledge and give my permission for the above mentioned use of photographs, consent for local excursions, head lice inspections and Acceptable Use Agreement for Internet and Digital Technologies. I understand my permission will remain in place unless notified in writing otherwise whilst my child is enrolled at Parkhill Primary School.

**Student Name**

**Parent Name**

**Parent Signature**

**Date**

**Intentionally left blank 😊**

## Welcome to Parkhill Community

On behalf of Parkhill's leaders, teachers, staff, students, parents and carers we would like to welcome you to the Parkhill community. We hope your child/children settle in well; that the school is living up to your expectations and that you are finding staff warm and caring, parents welcoming and students kind and considerate.

There are many opportunities for parents/carers to become involved in the school and its activities which provide substantial benefits to all students. There are opportunities to get involved both within and outside standard school hours.

There is a volunteer parent who takes on the role of the Parent Class Representative (Class Rep) for each class in the school. They are an integral part of our school community.

Class Reps provide support for the teachers and act as liaison between the parents and the teachers, class groups and other school groups (eg: PFA, SRC, School Council Sub-committees). Class Reps can be a great starting point if you are looking for a little more information on class or school, social, fundraising, or other school community activities. Class Reps also create opportunities for families to get to know each other.

The Class Rep/s from your child/childrens' class should be in touch with you shortly to help with your family's transition into the Parkhill community. However, please feel free to contact your Class Rep if you wish to introduce yourself, or if you have any questions.

The following people are the Class Reps for 2016 classes:

Class	Teacher	Class Rep
Foundation R	Lucy Renshaw	Sophie Kost & Carly Ellis (asst)
Foundation T	Jan Tuck	April Minniece & Kate Houghton (asst)
1BC	Victoria Bruges-Cannon	Wendy Douglas & Katrina Battle
1K	Jackie Knight	Megan Whitford
1M	Chloe Mansbridge	Philippa Papageorgiou
2C	Catherine Slaughter	Paula Hammond
2S	Desiree Schlack	Naomi Bishop
3H	Dion Hunt / Sasha Guy	Emma Lee
3M	Anne McGregor	
4B	Karla Bower	Sumi Sundram
4M	Karin Moorhouse	
5D	Alex Davies	Gabriele Moffitt
5H	Dora Handby	
6G	Chris Goldstraw	Janine Brewster
6S	Michelle Smith	
	Co-ordinator	Kerrie McAliece

We encourage you to complete the enclosed *Parent Involvement Form* and return it to the front office. Your Class Rep will then include you on their communication contact list and send you a contact list for all the parents/carers and children in your child/childrens' year level (very useful when learning other parents names!).

If you have any questions please don't hesitate to contact your Class Rep. The great benefit of our school community is that everyone has a role to play and there are many opportunities to meet other families throughout the school, not just within your child's grade.

We wish you all the best and look forward to meeting you and getting to know your family.

**Kerrie McAliece**  
Parent Class Representative Co-ordinator

**Rod McKinlay**  
Principal

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## Parent Involvement Form - Parkhill Community



Each year we ask Parkhill families to provide an indication of how they might like to be involved within the school community.

Parent Class Reps distribute class contact lists to assist you and your child in arranging play dates and developing friendships. Class Reps also foster engagement within our school's broader community. Involvement is great for you, your child and the school.

### Parent Class Reps

At the beginning of each year, one or two "Parent Class Representative(s)" are appointed for each class. These parents liaise with class teachers & help coordinate in-class helpers and activities. They also arrange social activities for parents during the year. Parent Class Representatives also distribute class contact lists. Your child/ren's class list/s will be sent home to you as soon as possible each year.

### PFA (Parents and Friends Association)

PFA members sponsor and help with many whole school events such as Fun, Food and Carols, Twilight Sports and the School Concert. While fundraising is an important part of what the PFA do, the companionship and involvement in working together for the school is the main "driver" behind the PFA.

### School Council

School Council consists of 8 elected parent members, 5 staff members, including the Principal, plus 2 co-opted members. School Council meets at least twice per term, usually at 7.30pm on a Thursday. School Council is responsible for the policy direction of the school and oversees its many sub-committees. You may join a sub-committee without being on School Council.

Please complete the following details including child\ren's names and parent involvement details. We ask that you return this form to the Parkhill Office with your child\ren's enrolment forms.

<b>Family Surname:</b>	
Child's Name:	Year:
Child's Name:	Year:
Child's Name:	Year:
Child's Name:	Year:

PARENT \ GUARDIAN INVOLVEMENT

**Parent \ Guardians:	Adult A Name:	Adult B Name:
I am interested in being a Parent Class Rep or Assistant	Yes / No	Yes / No
I would like to join the Parkhill Parents and Friends Association (PFA)?	Yes / No	Yes / No
I am interested in joining Parkhill's School Council and/or one or more of the Sub-committees. Circle any Committee/s in which you have an interest:		
Education & Policy	Yes	Yes
Finance	Yes	Yes
Buildings and Grounds	Yes	Yes
Communication & Marketing	Yes	Yes
Healthy Kids	Yes	Yes
Skills and interests (i.e. things you like doing or are good at that might be useful to the Parkhill community in some way)		

**\*\*CONTACT DETAILS:** PRIMARY FAMILY CONTACT DETAILS ON YOUR CHILD/REN'S ENROLMENT FORM INCLUDING EMAIL, WILL BE SHARED WITH-IN OUR PARKHILL PRIMARY SCHOOL COMMUNITY? IE: PARENTS & FRIENDS ASSOCIATION, CLASS REPRESENTATIVE PARENT CONTACT LISTS, & PARKHILL PRIMARY SCHOOL COMMITTEES.

#### EMAIL COMMUNICATIONS

Information from the PFA and Class Reps, including details about major school and fund raising events, class activities and social events will be sent to the email address included in your child's enrolment form.

You may also use the Tiqbiz App which is the main source of information the school has set up at no cost to families.

PARENT NAME Adult A:	Signature:	Date:
PARENT NAME Adult B:	Signature:	Date:

Thank you for taking the time to complete the Parent Involvement Information Sheet.

**Kerrie McAlicie**  
Class Rep Coordinator

**Rod McKinlay**  
Principal