



Enrolment Application

STUDENT INFORMATION

Student's Name Male Female

Date of Birth Commencement Year Level

Please provide copy of student's Birth Certificate

Name of current school / kindergarten attending at present

Country of Birth Australian Citizen Resident of Australia

**Please provide copies of all family
Visas / Citizenship Certificates**

Student on Visa Visa Sub Class Number

Is the student Aboriginal Torres Strait Islander Non-Identifying

OFFICE USE ONLY

Date of Application	<input type="text"/>	Introducing Hope	<input type="checkbox"/>
Registration Fee	<input type="checkbox"/> P <input type="checkbox"/> N/P	PC School	<input type="checkbox"/>
Receipt No.	<input type="text"/>	Letter Sent	<input type="checkbox"/>

FAMILY INFORMATION

Family Name (Surname)

Father (Parent / Guardian)

Mobile

Mother (Parent / Guardian)

Mobile

Residential Address

Suburb

Postcode

Phone

Postal Address (if different to residential address)

Suburb

Postcode

Phone

Number of Students Enrolling

Year of Commencement

School Family

New Family

SIBLING INFORMATION

Please circle

Please circle

Name

DOB

Male / Female

At Hope / Yet To Attend

Name

DOB

Male / Female

At Hope / Yet To Attend

Name

DOB

Male / Female

At Hope / Yet To Attend

Name

DOB

Male / Female

At Hope / Yet To Attend

Name

DOB

Male / Female

At Hope / Yet To Attend

RELIGIOUS AFFILIATION

What religion does your family identify with?

Christian

Protestant

Catholic

Muslim

Buddhist

Hindu

Other (Please Specify)

Does your family regularly attend a church?

Yes

No

If yes, which church do you attend?

Address of church

Name of your Pastor

Please attach a reference from your Pastor

At Hope Christian College we value parent involvement in your child's education. As part of developing a strong relationship between yourself and the school, our Board requires families not a part of a Christian church community, to participate in a course that will clarify the Christian principles and values of our School. This is a condition of acceptance as it will assist you to understand the Christian culture that underpins Hope Christian College community and allows you to play a part in your child's education.

I have read and understood the above statement

Yes

No

PARENTAL INFORMATION

Natural Father	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name _____
Natural Mother	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name _____
Step Father	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name _____
Step Mother	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name _____

Custodial Parent

Full Custody	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name _____
Part Custody	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name _____

Are there any court orders applicable to the custodial parent? Yes (please provide a copy) No

Does the non-custodial parent approve of this application? Yes No

ENROLLING PARENTS/GUARDIAN INFORMATION

	<input type="checkbox"/> Father	<input type="checkbox"/> Step Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Step Mother
Occupation	_____		_____	
Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Married	<input type="checkbox"/> Separated
	<input type="checkbox"/> Single	<input type="checkbox"/> Defacto	<input type="checkbox"/> Single	<input type="checkbox"/> Defacto
	<input type="checkbox"/> Divorced		<input type="checkbox"/> Divorced	
Business Contact Number	_____		_____	
Is contact at work convenient?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mobile Number	_____		_____	
Email Address	_____		_____	
Country of Birth	_____		_____	

Is English the main language spoken at home? Yes No

If yes, what other languages are spoken at home? _____

TO ASSIST WITH FUTURE PLANNING, PLEASE COMPLETE THE FOLLOWING

What are your reasons for seeking enrolment at Hope Christian College?

<input type="checkbox"/> Academic Excellence	<input type="checkbox"/> Broad / Balanced Program	<input type="checkbox"/> Independent Schooling
<input type="checkbox"/> Behaviour Policy	<input type="checkbox"/> Curriculum	<input type="checkbox"/> Biblical Foundation
<input type="checkbox"/> Friends at the College	<input type="checkbox"/> Locality	<input type="checkbox"/> Christian Influence
<input type="checkbox"/> Family Involvement	<input type="checkbox"/> Co-Curricular Activities	Other _____

Is Hope Christian College your first choice of school? Yes No

How did you hear about Hope Christian College?

<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Media / Publications	<input type="checkbox"/> Old Scholar Relation
<input type="checkbox"/> Open Day	<input type="checkbox"/> School Functions	Other _____

COMPLETE YOUR APPLICATION

As a part of the enrolment process, parents of an applicant give Hope Christian College consent to obtain information from previous kindergartens, schools and/or other learning institutions. I / We understand that the information will be accessed by the Principal or their delegate on a 'need to know' basis.

I / We declare that the information supplied in this application is to the best of my / our knowledge correct. The signing of this application is considered as an acceptance of the programs and policies as instituted by the School Board and as carried out by the Principal and Staff. *Please note: This is an application for enrolment, not a notice of Acceptance.*

Mother (Print Name) _____ Signed _____

Father (Print Name) _____ Signed _____

Please attach to this application an Application Fee of \$50.00 (per student - non refundable)

Payment Details

Please select your preferred payment method

Cheque Money Order

Credit Card

Please charge my Visa Mastercard

Card Number

Expiry Date

Name on card _____ Cardholder's Signature _____