



Pacific Hills

Wisdom & Knowledge in Christ

Sibling Enrolment

Father/Guardian Mr Dr Rev

Mother/Guardian Mrs Ms Miss Dr Rev

Name: Name :

Student's Name:

Preferred Name:

(First Names)

(Last Name)

Date of Birth: / /

Gender: M F

Country of Birth: Nationality:

Student's Address:

Student lives with: Both Parents Mother Father Guardian Other

Desired Year of Entry: (e.g. Term 1, 2010)

Desired Level of Entry: Junior School Prep K 1 2 3 4
 (Please circle) Middle School 5 6 7 8
 Senior School 9 10 11 12

Prep Options: 2 days: Mon/Tues Thurs/Fri
 (Please tick one) 3 days: Mon/Tues/Wed Wed/Thurs/Fri
 5 days: Mon/Tues/Wed/Thurs/Fri

Student

- Is the student an Australian resident? _____ Yes No
- Is the student a full fee paying overseas student? _____ Yes No
- Is the student of Aboriginal or Torres Strait Islander origin? _____ Yes No
- Does the student speak a language other than English at home? _____ Aboriginal Torres Strait Islander
- Is English language tuition required? _____ Yes No (Language)
- Has the student received Special Education? _____ Yes No
- Has the student received Specialist Services? _____ Yes No
- Does the student have any Specialist reports? e.g. Psychometric, Speech, etc. _____ Yes No
- Does the student have ADD or ADHD? _____ Yes No

Disabilities: e.g. Intellectual, physical, behaviour disorder, autism. (Please provide details)

Learning Difficulties: (Please provide details)

Special Gifts/talents: (Please provide details)

Schooling

How is the student managing at school?

Academically: V/Good Good Average Poorly V/Poorly
Socially: V/Good Good Average Poorly V/Poorly

Current School: Grade:

Reason for Leaving:

Previous School:

Reason for Leaving:

Has the student ever been asked to leave a school or been refused enrolment? Yes No

If yes, please state reason:

Declaration

Do you intend your child to finish their schooling at Pacific Hills? _____ Yes No

Are you prepared to support the uniform code of the school? _____ Yes No

Are you prepared to support your child doing regular homework? _____ Yes No

Are you prepared to attend Parent/Teacher meetings? _____ Yes No

Do you anticipate any financial difficulty with the Enrolment or Tuition Fees? _____ Yes No

Do you give permission for photos taken at school of your child/children
to be used by the school for promotional/publication purposes? _____ Yes No

I agree to support the ethos, philosophy and practices of Pacific Hills and be responsible for the payment of all fees and charges. I am aware that the Application Fee and Enrolment Fee are not refundable. If a place is offered I agree to pay the Enrolment Fee within two weeks of receiving the offer. I understand that if withdrawing a student from the School, one full term's notice should be supplied in writing to the Principal, or one term's applicable fee will be charged. I understand that acceptance of my child/children will depend on the outcome of an interview and availability of places in the school, and that this Enrolment Application does not ensure enrolment.

Signed: Date:
(Father/Guardian)

Signed: Date:
(Mother/Guardian)

All information collected is treated in accordance with the school's Privacy Policy, which is available upon request from the Registrar.
Any misleading or inaccurate information may render this application null and void, with enrolments resulting from this application being terminated.

Checklist

Please mail completed Sibling Enrolment with the following:

- Copy of Birth Certificate or Passport
- Details of residency status (passport, visa etc.) for students born overseas
- Copies of three most recent School Reports (Years 1 to 12 students only)
- Application Fee per student (non refundable)