



# Newton Moore

## Senior High School

*Achieving Today for Tomorrow*

## ENROLMENT FORM

The items marked with an asterisk (\*) must please be **provided** as it is required by the Western Australian Department of Education and Training to meet legal obligations. The remaining information is sought to enable the Department and Newton Moore Senior High School to:

- Provide timely and efficient communication
- Provide appropriate student health support
- Meet state and national reporting requirements
- Provide information about financial supports

It is parent/guardian's responsibility to advise the school of any changes to the information contained in this form.

### Security and Confidentiality

The information provided in Enrolment Forms is stored securely in local school and Departmental databases. The management of these databases is governed by State and Departmental policies to ensure security, privacy and confidentiality.

Surname:	
First Name:	
Academic Year:	

### Supporting Documentation

Please provide copies of the following:

- Birth certificate and/or identity documents
- Immunisation certificate
- Court order (if applicable)
- Proof of address (utility bill, rent agreement)
- Most recent school report and NAPLAN (if not attending WA government school)

If your child was **not born in Australia**, you **must** provide:

- Evidence of the date of entry into Australia;
- Passport or travel documents; and
- Current visa and previous visas (if applicable).

In addition, if your child is a **temporary visa holder** you **must** provide:

- Confirmation of enrolment or evidence of permission to transfer provided by TAFE International WA (if holding an international full fee student visa, sub class 571); or
- Evidence of the visitor and temporary resident visa (other than sub class 571 referred to above); or
- Evidence of the visa for which the student has applied (if the student holds a bridging visa).

### Office Use Only

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

#### School Officer:

Proof of Address	IOB <input type="checkbox"/>	OOB <input type="checkbox"/>
OSI	<input type="checkbox"/>	
Immunisation	<input type="checkbox"/>	
Birth Certificate / identity	<input type="checkbox"/>	

#### If applicable:

Court Orders	<input type="checkbox"/>	N/A <input type="checkbox"/>
VISA evidence	<input type="checkbox"/>	
TIWA	<input type="checkbox"/>	
VISA	<input type="checkbox"/>	
Date of Entry:	____/____/____	
School Report (non-gov)	<input type="checkbox"/>	

#### Principal:

Accepted ☐ Not Accepted ☐

Principal Signature:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

#### Finance Officer

SAS/ASA	<input type="checkbox"/>	Copy of card	<input type="checkbox"/>
Form	<input type="checkbox"/>		

## SECTION 1: STUDENT DETAILS

* Surname		
* Legal Surname (If different from above)		
* First name		
* Other names (If applicable)		
Preferred full name		
* Date of Birth	____/____/____	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Indeterminate/Intersex	
* Residential Address		
	Suburb/town:	Postcode:
Student Mobile		
Names of siblings attending Newton Moore SHS		

## SECTION 2: PARENT/RESPONSIBLE PERSON DETAILS

	Parent/Guardian 1	Parent/Guardian 2
Title (Mr, Ms, Miss, Mrs)		
* Surname		
* First name		
Relationship to student		
Occupation/Workplace		
Responsible for parenting?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lives with student?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you responsible for the payment of school fees?	<input type="checkbox"/> Yes <input type="checkbox"/> No    _____%	<input type="checkbox"/> Yes <input type="checkbox"/> No    _____%

## SECTION 2: PARENT/RESPONSIBLE PERSON DETAILS cont...

	Parent/Guardian 1	Parent/Guardian 2
To receive communication, reports, etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Contact Phone Numbers	Mobile:	Mobile:
	Home:	Home:
	Work:	Work:
* Postal Address (if different from student residential address)		
	Suburb/town:	Suburb/town:
	Postcode:	Postcode:
* Email (This is our primary form of communication)		
Do you speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)	<input type="checkbox"/> No - only English <input type="checkbox"/> Yes - please specify	<input type="checkbox"/> No - only English <input type="checkbox"/> Yes - please specify
What is the highest year of primary or secondary school you have completed? (If you did not attend school, mark 'Year 9 or equivalent or below')	<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below	<input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent or below
What is the level of the highest qualification you have completed?	<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV (incl. Trade certificate) <input type="checkbox"/> No non-school qualification	<input type="checkbox"/> Bachelor degree or above <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV (incl. Trade certificate) <input type="checkbox"/> No non-school qualification
What is your occupation group? Please select the appropriate parental occupation group. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 months, select '8'	<input type="checkbox"/> Group 1 Senior management in large business organisation, government administration & defence, and qualified professionals <input type="checkbox"/> Group 2 Other business managers, arts/media/sports persons and associate professionals <input type="checkbox"/> Group 3 Tradesmen/women, clerks and skilled office, sales and service staff <input type="checkbox"/> Group 4 Machine operators, hospitality staff, assistants, labourers and related workers <input type="checkbox"/> Group 8 Not in paid work in the last 12 months	<input type="checkbox"/> Group 1 Senior management in large business organisation, government administration & defence, and qualified professionals <input type="checkbox"/> Group 2 Other business managers, arts/media/sports persons and associate professionals <input type="checkbox"/> Group 3 Tradesmen/women, clerks and skilled office, sales and service staff <input type="checkbox"/> Group 4 Machine operators, hospitality staff, assistants, labourers and related workers <input type="checkbox"/> Group 8 Not in paid work in the last 12 months

## SECTION 3: ADDITIONAL CONTACT DETAILS

	Additional Contact 1	Additional Contact 2
Title <i>(Mr, Ms, Miss, Mrs)</i>		
Surname		
First name		
Relationship to student		
Email		
Postal Address <i>(if different from student residential address)</i>		
	Suburb/town:	Suburb/town:
	Postcode:	Postcode:
Contact Number	Mobile:	Mobile:
	Home:	Home:
	Work:	Work:

## SECTION 4: ORDER OF CONTACTS

Place a number in the box (1, 2, 3, 4) to indicate the order in which people should be contacted.	Parent/Guardian Contact 1 <input type="text"/>	Parent/Guardian Contact 2 <input type="text"/>	Additional Contact 1 <input type="text"/>	Additional Contact 2 <input type="text"/>
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## SECTION 5: STUDENT DETAILS - ADDITIONAL INFORMATION

In which country was the student born?	
Religion	
Is the student of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> No <input type="checkbox"/> Yes - Aboriginal <input type="checkbox"/> Yes - Torres Strait Islander
Does the student mainly speak English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the student speak a language other than English? <i>If more than one language, indicate the one that is spoken most often.</i>	<input type="checkbox"/> No - only English <input type="checkbox"/> Yes - please specify

## SECTION 5: STUDENT DETAILS - ADDITIONAL INFORMATION cont...

* Is this student in the care of a Department for Child Protection and Family Support (CPFS) Chief Executive Officer	[ ] Yes [ ] No	
	If Yes, please specify the name of the CPFS Case Manager and their contact phone number.	
	Name:	Phone:
* Is this student subject to any court orders in respect to their care, welfare, development or access restriction?	[ ] Yes [ ] No	
	If Yes, please specify and attach supporting documentation.	
<b>Receipt of Allowance</b> <i>To receive Secondary Assistance students must be listed on parents' Health Care Card.</i>	<input type="checkbox"/> Secondary Assistance Scheme (Healthcare, pension & veterans affair card holder) <input type="checkbox"/> Abstudy Supplement Allowance (Healthcare, pension & veterans affair card holder) <input type="checkbox"/> Youth Allowance (available from Centrelink) <input type="checkbox"/> Assistance for Isolated Children (AIC) (available from Centrelink)	
Is the student listed on a family Health Care or Pension Card?	[ ] Yes [ ] No	
	Number:	Expiry: _____/20_____
* Citizenship	Australian Citizen / Permanent Resident: [ ] Yes [ ] No	
	Temporary Resident: [ ] Yes [ ] No	
	Date entered Australia: _____/_____/_____	Visa expiry date:
	Visa Grant number:	Visa sub-class number:
* Previous school		State if not WA:
* If previously enrolled in Home Education, specify the Education District		
Movement Reason (If applicable)		

## SECTION 6: STUDENT DETAILS - MEDICAL/HEALTH

* Does the student have one or more health condition that will require support from school staff?	[ ] No [ ] Yes - please specify	
* Please indicate which of the following disabilities you have documentation for.  <i>Copies of this documentation will be required for school records.</i>	[ ] Autism Spectrum Disorder	Health care plan? [ ] Yes
	[ ] Severe Mental Disorder	[ ] Yes
	[ ] Deaf or Hard of Hearing	[ ] Yes
	[ ] Global Developmental Delay (prior to age 6)	[ ] Yes
	[ ] Specific Speech Language Impairment	[ ] Yes
	[ ] Vision Impairment	[ ] Yes
	[ ] Intellectual Disability	[ ] Yes
	[ ] Physical Disability	[ ] Yes

## SECTION 6: STUDENT DETAILS - MEDICAL/HEALTH cont...

Medical Contacts	Medical Practice (Name and Address)		
	Doctor's Name	Phone	
<p>Do you give permission for the school to share your child's health care information?</p> <p>[ ] Yes    [ ] No</p> <p><i>NOTE: If your child is enrolled in TAFE or any other education program, this permission includes the transfer of student health details.</i></p>	<p>Your child's health care information will be shared with staff to assist prompt action as required unless otherwise stated.</p>		
<p>Does the student have a medical condition or intensive health care need?</p> <p><i>If you have indicated that the student has a medical condition or intensive health care need you will be required to complete a separate Health Care Authorisation. Please contact the School for appropriate form.</i></p>	<p>[ ] No [ ] Yes - please specify</p> <p>[ ] Allergy – Anaphylaxis [ ] Allergy – Other [ ] Asthma [ ] Diabetes [ ] Intensive Health Care Need (e.g. tube feeding) [ ] Seizure Disorder (e.g. epilepsy) [ ] Hearing condition (e.g. otitis media) [ ] Mental health or behavioural (e.g. depression, ADD/ADHD) [ ] Diagnosed migraine/headaches [ ] Other</p>		
<p>Do you have ambulance cover?</p> <p><i>If emergency contacts are unavailable, an ambulance will be called in life-threatening emergencies.</i></p> <p><i>If there is a medical emergency parents or guardians are expected to meet the cost of the ambulance.</i></p>	<p>[ ] No    [ ] Yes</p> <p>Provider: _____</p>		
Permission to administer First Aid?	[ ] Yes    [ ] No		
Medicare	Number:	Ref:	Expiry: _____/20____
Is the student listed on a family Health Care or Pension Card?	[ ] Yes    [ ] No		
	Card Number:	Expiry: _____/20____	

### Office Use Only

Does the child have an allergy that needs to be flagged on SIS?    [ ] Yes    [ ] No  
 Have relevant health care documents been issued to the parent?    [ ] Yes    [ ] No

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

## SECTION 7: CONSENT

### PERMISSION TO USE STUDENT PHOTOGRAPHS, VIDEO FOOTAGE, DIGITAL IMAGES

The Department of Education may record sound and/or vision of a student and their work while they are at school or taking part in school related activities or performances. Photographs of students involved in activities, and work by students, are often published to enable the students to share their experiences and to enable parents and others to be informed about the school's work. This does not mean that the student loses ownership of the works.

Consent is sought for:

- The school's yearbook, website, social media, other media pages, audio visual productions and promotional material
- Promotional material for the Department of Education.
- Articles for West Australian Newspapers, School Matters, Community Newspapers

Please indicate whether or not you consent to your child's work and/or photo being used as described below.

Use of Student Photographs	<input type="checkbox"/> Yes <input type="checkbox"/> No
Use of Student Work	<input type="checkbox"/> Yes <input type="checkbox"/> No
SmartRider with student photo permission	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>SmartRiders are used as a travel card for public transport services, library card, concession card at some venues and student ID.</i>

## SECTION 8: THIRD PARTY CONSENT

The following third party services are being used in our school. Please contact the school if you require further information.

Name Of Service	Type Of Service
SEQTA	Attendance Data
Subject Selection Online (SSO)	Selecting School Subjects
Schoolzine	Publishing School Newsletter
Parent Teacher Online (PTO)	Online Bookings
SmartSuite	Library Management system
TV4Education	References and Resources
Consent2Go (Excursion Software)	Excursions

All of the above stated services are deemed low security risk by the Department of Education and all data is stored in Australia.

I consent to my child's information being provided, if required, to each of the above service providers until the end of their schooling at Newton Moore Senior High School.

Parent / Guardian Name:		
Parent / Guardian Signature:		Date:

## SECTION 9: INFORMATION AND COMMUNICATION TECHNOLOGY ACCEPTABLE USE AGREEMENT

The expectations at Newton Moore Senior High School are set out below to keep students, staff and the network safe. All students and staff are therefore expected to follow and maintain the protocols that are in place. If anyone is suspicious of any of the protocols being breached, then it is their responsibility to report this to the IT Support Team, Head of Learning Area Teacher or Principal immediately. When reading and signing this agreement, you understand that it applies to all devices that access the Newton Moore Senior High School network.

- All Students are expected to sign that they have read and understood the agreement.
- All students are expected to use ICT respectfully and responsibly.

The completed agreement should be authorized by your Parent (Caregiver).

Breaches of this agreement will result in restriction of Network and Internet access, possibly including removal of all access. There may be other consequences for inappropriate actions and behaviour. Network facilities and Internet access are provided to help you with your learning.

By signing the agreement on the attached page, I agree that:

- I am responsible enough to access relevant sites, information, and graphics suitable for students at Newton Moore Senior High School. I will show my responsibility by not accessing: pornography, promotion of drug abuse, violence, racial discrimination; and pirated software.
- I can be trusted not to download or bring downloaded material from such sites to Newton Moore Senior High School in any form, electronic or hardcopy.
- I know that it is my responsibility not to; download, store, transfer or display inappropriate or illegal material on a device used at Newton Moore Senior High School.
- I will observe all protocols required by Newton Moore Senior High School regarding computer viruses and will not knowingly place a virus or other malware onto a school device.
- I can be trusted not to use school ICT devices for personal or private activity without permission from a member of staff.
- I am mature and trustworthy enough not to cause damage to or interfere with computer hardware, software or system performance of school devices.
- I can be trusted not to connect any device to the wired network without approval.
- I understand that it's my responsibility not to participate in any online activity that: compromises the performance of the network, speed of the network or security of the network.
- I can be trusted not to obtain, use or access information about usernames or passwords for other users of the school network. I can be trusted not to access secure or restricted areas of the network, or the personal data files of others.
- I can be relied upon not to use the school's name, devices, network or accounts provided by the school, to obtain goods or services that have not been authorised by the IT Support Team and/or Principal.
- I am mature and trustworthy enough to not behave online in a way that brings the school into disrepute or that offends others. I can be trusted not to post inappropriate, offensive, threatening material or messages.
- I can be trusted not to create or access a personal hotspot or external network to look at or download information.
- I will ensure that any mobile phone devices, ear pods/ear phones and smart watches will be off and away all day. This will ensure that I comply with the Department of Education's Mobile Phone Policy.

By signing below you are confirming that you have read and understood the expectations and that you will act in accordance with these expectations.

I understand and agree to abide by the expectations outlined and accept there will be consequences if I breach these expectations.

Student Signature:		Date:
Parent / Guardian Signature:		Date:



## SECTION 10: DECLARATION

All students will adhere to the policies and processes of Newton Moore Senior High School.

1. All students will wear appropriate uniform.
2. All students will attend school regularly.
3. All students will behave according to published schoolwide expectations of Wellbeing, Respect, Responsibility and Learning.
4. All students will strive to achieve their personal best.
5. All students will contribute to a positive reputation for Newton Moore Senior High School.
6. All students will follow the Department of Education's Off and Away Mobile Phone policy which requires mobile devices to be turned off and out of sight.

Parents/Guardians should be aware that the school and its staff members are not liable for injuries or damage to property which may occur, in all circumstances where staff have not been negligent.

It is your responsibility to notify Newton Moore Senior High School of any changes to the information provided on this enrolment form.

### STUDENT AGREEMENT

I \_\_\_\_\_ agree to abide by the Newton Moore Senior High School Code of Conduct. I have read, understood and accepted them as they are outlined above. I will strive to be a positive role model for the school community and abide by the principle that all students have the right to learn without disruption.

Student Signature:		Date:
Parent / Guardian Signature:		Date:

## SECTION 11: SPECIALIST AND OTHER SCHOOL-BASED PROGRAMS

### Expression of Interest

Our school offers a number of additional programs. This page needs to be completed if you are applying for one of these programs. Please note that by completing this page you are expressing an interest and it does not necessarily guarantee a place in the program(s).



Please tick the relevant box(es)

### Department of Education Approved Specialist Programs (also complete section 11A)



#### Science Horizons

Science Horizons is an exciting and stimulating specialist program for Year 7-12 students with strong ability in the applied and pure sciences. Throughout the program students will study contemporary sciences and supported to explore and follow their special interests. With strong links to WA universities and local science-based organisations students will be exposed to research and fieldwork.



#### Engineering Specialist

Engineering Specialist offers an exciting and stimulating program of study for Year 7-12 students with strong ability in design and technology, sciences and mathematics. Students will be equipped with skills they need to pursue a range of careers, including: electrical, robotic, environmental and civil engineering as well as drafting and building design. Engineering Specialist is delivered in partnership with industry companies such as GHD, Simcoa and Doral along with support from Edith Cowan University. There is a strong focus on real-life projects, competitions and exhibitions to inspire students to apply their skills in new and interesting ways.

Application process:

1. Complete application form (refer to Section 11A)
2. As requested, complete a written assessment.
3. If not currently enrolled at a WA Government school, provide copies of your most recent NAPLAN and school report.

### School Enrichment Programs (also complete section 11B)



#### Moore Academy of Sport and Health (MASH)

Moore Academy of Sport and Health (MASH) is an extension program, which aims to stimulate and enhance students sporting development in a variety of fields. MASH is about much more than physical education and talent in sport. Embedded in the program are the values of teamwork, leadership, strategic thinking, decision making, self-esteem, fair play and the relationships with our community. Eligible students will have a passion for sport, be regularly participating in both school and community teams and have a history of high standards of behaviour and attendance, and an ability to work effectively as part of a team.

Application process:

1. Complete an application form (refer to Section 11B)
2. As requested, attend a MASH trial

## ☐ **Academies**

The Stars Girls' Academy and Clontarf Boys' Academy partner with Newton Moore Senior High School to support Aboriginal students to successfully participate in school securing a positive and independent future. There is a strong focus on relationships, attendance and engagement.

Application process:

1. Return a signed agreement issued by the academy on enrolment.

## ☐ **Bushranger Cadets**

Bush Rangers WA is a youth-based conservation and community development program run by the Department of Biodiversity, Conservation and Attractions - Parks and Wildlife Service and supported by Cadets WA and the Department for Local Government and Communities. Bush Rangers is a School Curriculum and Standards Authority (SCSA) endorsed program and completion counts towards meeting requirements of the WA Certificate of Education (WACE).

Our program has a focus in marine life along our coastline and works closely with the local environmental stakeholders. It offers the opportunity to receive training in first aid, bush craft, survival, navigation, camp cooking, teamwork, leadership, initiative and problem solving through various camps and practical nature conservation projects.

Application process:

1. Further information will be provided by the Cadets Coordinator after enrolment.

## ☐ **Follow The Dream**

Follow the Dream: Partnerships for Success, is a program for high-achieving secondary Aboriginal school students. The Follow the Dream program provides after-school tuition and individualised mentoring.

The Follow the Dream Program provides students with the strategies, skills and knowledge to enhance their opportunities to achieve their educational outcomes and aspirations. The program is enhanced by the opportunity to attend excursions involving visits to industry, universities, TAFE and other organisations.

Application process:

1. Eligible students and parents/guardians will be invited to attend an interview.

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## SECTION 11A: APPROVED SPECIALIST SCIENCE PROGRAMS APPLICATION

### STUDENT FORM

Preference (please number 1, 2)

☐

Science Horizons

☐

Engineering Specialist

The form is to be completed by the student without assistance. The length of response to each question should not exceed 100 words.

#### QUESTION 1

In what ways do you believe you will benefit from being part of the Science Horizons / Engineering Program?

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#### QUESTION 2

What strengths will you bring to the group of students involved in the Science Horizons / Engineering Program?

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#### QUESTION 3

How you believe science / engineering could contribute to solving a major problem in the world?

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#### Declaration

The above ideas are my own and have completed this form without assistance.

Student Name:

Student Signature:

Date:

## SECTION 1 1A: APPROVED SPECIALIST SCIENCE PROGRAMS APPLICATION

### PARENT FORM

We understand that parents/guardians have a unique knowledge of their child's social, emotional and academic needs and interests. We ask parents/guardians to complete the information below to help the school in getting to know your child better.

Please tick <input checked="" type="checkbox"/>	Well below Average	Below Average	Average	Above Average
Literacy				
Numeracy				
Technology skills				
Science inquiry skills				
Persistence in completing tasks				
Ability to work in a team				
Acceptance of others' ideas				
Emotional regulation				
Appropriate use of manners and language				
Follows instructions				
Seeks assistance				
Confidence and self-esteem				
Does the student participate in any extracurricular activities, leadership programs or do they have any particular talents, hobbies etc?				
General comments and further information you would like to provide our school				

I understand for students to remain in a Science Specialist Program, students are expected to display a positive and enthusiastic attitude towards engineering and/or science, achieve high academic results and maintain good standing (good behaviour record).

I agree to pay school fees and extra expenses associated with the program as listed in the Charges and Contributions Handbook.

Parent / Guardian Signature:		Date:
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## SECTION 11B: MOORE ACADEMY OF SPORT AND HEALTH APPLICATION

### STUDENT FORM

Current sporting commitments (Trainings, Squad commitments, competition requirements):

*Eg. I am currently a member of South Bunbury Football Club's U14 team and train 2x nights per week, 1x game on the weekend, also WAFL development squad training and games 1-2 nights per week.*

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History of sporting achievements:

- *Include recent achievements (past two years, eg. Year 5 and 6)*
- *Sporting achievements in whole school and interschool events (athletics/cross country/swimming etc)*
- *Include regional, state and national achievements and representations*

Sport	Age of student	Achievement

Why do you want to be a part of the MASH program?

*This should include sporting goals and may include: fitness, sporting knowledge and specialisation, coaching and officiating accreditations, leadership and interpersonal skills.*

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Student Name:		
Student Signature:		Date:

