Application to Enrol in a Victorian Government School

Lightning Reef Primary School

This form has been designed to support students to apply for a place at a Victorian Government School. If a student is offered a place at a school, a School Enrolment Form, with attached supporting documentation, may need to be completed to finalise enrolment.

Your child's right to enrolment

Your child is guaranteed a place at the school they are zoned for, as shown on the Find My School website.

This means that if your child lives within the school zone, they must be offered a place when seeking enrolment. To find the school you are zoned for (referred to as your local school) visit www.findmyschool.vic.gov.au

Going to a school outside your zone

You have the choice to seek enrolment at a school that is not your local school. Your child should be offered a place if the school has sufficient accommodation.

If the school has limited accommodation, applications are considered using the priority order of placement. The priority order of placement prioritises out-of-zone siblings and then students in order of closeness of their home to the school.

In exceptional circumstances, a student may be enrolled in a school based on compassionate grounds. Family and student privacy will be maintained when considering applications on compassionate grounds.

To find out more, visit www.vic.gov.au/how-choose-school-and-enrol

Student tests and interviews

Enrolment offers are not dependent on a satisfactory report or interview. Student tests or interviews may only occur after an enrolment offer has been accepted.

Students with disability

Every student has the right to attend their local school. Students with disability have the same right to enrol in their local school as students without disability.

All schools must make reasonable adjustments so that students with disability can learn and achieve on the same basis as students without disability.

You also have the option to seek enrolment for your child at a government specialist school for students with disability.

International students

Fee-paying international students should apply through the Victorian Student Program at www.study.vic.gov.au

STUDENT DETAILS

Surname:	
First Given Name:	
Second Given Name: *(if applicable)*	
Preferred First Name: *(if applicable)*	
Date of Birth: *(dd-mm-yyyy)*	**Gender:** ☐ Male ☐ Female ☐ Self described:_____

Which year are you seeking to enrol this student?

☐ Foundation(Prep) ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ Ungraded

Intended start date:	
☐ Day 1, Term 1	☐ Other (dd-mm-yyyy): _____ / _____ / _____

Are you seeking to enrol the student at this school full-time?	☐ Yes (move to next section)	☐ No			
If No, how many days a week would the student be attending this school?					
If No, provide a reason why you are seeking part-time enrolment:					
Other school name:		***Days / week:***		***Has enrolment been accepted?***	☐ Yes ☐ No
Other school name:		***Days / week:***		***Has enrolment been accepted?***	☐ Yes ☐ No

Do you live in the school's zone? *Go to www.findmyschool.vic.gov.au to find your local school*	☐ Yes	☐ No
If this school has multiple campuses, what campus is the student applying for?		

Student's Permanent Residence

Your child's permanent residence is the address where they spend the majority of their days during the school week. If they spend an equal amount of time at two addresses, both are considered their permanent address and your child will be entitled to enrol in the designated neighbourhood school for either address. **Please provide proof of permanent residence to the school as part of your application. The school will let you know what proof is required**. For more information, please refer to the Residential Address Checklist, available at: www.education.vic.gov.au/Documents/parents/going-to-school/100-point-addresschecklist.pdf. When assessing your application, the school may make enquiries to verify the information provided, such as checking the electoral roll at an Australian Electoral Commission office or the Victorian Electoral Commission head office; checking with a real estate agent; or checking whether there are any regulations/codes limiting the occupancy, for example if a rental property is a studio or one bedroom unit.

No. & Street Address:			
Suburb:			
State:		**Postcode:**	
How often does this student live at this address?			
☐ Always	☐ Mostly	☐ Balanced (50%)	
If the student lives at another address during the school week, please provide further details including the address, who they reside with, and how many days a week the student lives there:			

Siblings

A sibling is defined broadly and can include step-siblings and students residing together as part of a multiple family cohabitation or out-of-home-care arrangements, including foster care, kinship care and permanent care.

Does the student have any siblings at this school?		☐ Yes	☐ No *(move to next section)*	
Name		**Current Year Level**	**Reside at same residential address as the student**	
1			☐ Yes ☐ No	☐ Sometimes
2			☐ Yes ☐ No	☐ Sometimes
3			☐ Yes ☐ No	☐ Sometimes
4			☐ Yes ☐ No	☐ Sometimes

OFFICE USE ONLY				
Proof of the student's permanent residence provided?	☐ Yes	☐ No		
Eligible for enrolment:				
☐ Yes - DNS	☐ Yes - Sibling	☐ Yes – Closeness	☐ Yes – Compassionate	☐ No

PARENT/CARER DETAILS

This form should be completed by parents or carers who are responsible for enrolling their child in school. It is the responsibility of the person completing this form to consult with all other adults that need to be involved in the enrolment process. If required information is not provided or there is a dispute between parents about a child's enrolment, the enrolling principal is required to consider the student's education and wellbeing when deciding whether to defer or accept the enrolment.

Enrolling Adult 1

Surname:				
First Given Name:				
Contact Mobile Number:				
Contact Home Phone:				
Contact Email Address:				
Correspondence Address:				
Student lives with Adult 1:	☐ Always	☐ Mostly	☐ Balanced(50%)	☐ Occasionally
Adult 1 Relationship to Student:	☐ Parent ☐ Relative	☐ Step Parent ☐ Friend	☐ Foster Parent ☐ Self	☐ Host Family ☐ Other: _____

Enrolling Adult 2

Surname:					
First Given Name:					
Contact Mobile Number:					
Contact Home Phone:					
Contact Email Address:					
Correspondence Address:					
Student lives with Adult 2:	☐ Always	☐ Mostly	☐ Balanced(50%)	☐ Occasionally	☐ Never
Adult 2 Relationship to Student:	☐ Parent ☐ Relative	☐ Step Parent ☐ Friend	☐ Foster Parent ☐ Self	☐ Host Family ☐ Other:_____	

Declaration

Information is collected and handled in accordance with the Schools' Privacy Policy, available here: www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx.

Please also refer to the Victorian Government School Privacy Collection Notice for details on handling of personal and health information in schools: www.education.vic.gov.au/Pages/Schools'-Privacy-Collection-Notice.aspx

I/We confirm that:

- **I am/We are the person/people named as completing this form.**
- **The information in this form is true and correct.**
- **I/We agree to authorise this form by electronic means with an electronic signature.**

Signature of Enrolling Adult: Type name here _____ Date: _____ / _____ / _____

Signature of Enrolling Adult (if applicable): Type name here _____ Date: _____ / _____ / _____