

## **APPLICATION FOR ENROLMENT**

Family Name of Child:			
Given Name(s):		Sex:	Date Of Birth
Sibling of Current Student? Y	'es □ No□		
Immunisation Status: □ Fu□ School has been provided			atement
NATIONALITY			
Country of Birth:	🗆 At	ustralian Citizen 🛮 Othe	er
If student is a permanent or	temporary visa holder, pl	lease supply the following	ng information:
Current Visa Sub-Class:	Expiry Date	:	
Is the student of Aboriginal of	or Torres Strait Islander o	rigin?	
☐ No ☐ Aboriginal ☐ To	orres Straight 🛮 Both A	Aboriginal and Torres Sti	rait Islander
DETAILS OF PARENT/GUARD	DIAN 1		
Title: First Name:		Surname:	
Postal Address:			
Residential Address:			
Suburb:	Post Code:	Mobile: _	
Home Phone:	Email:		
Place of employment & occu	pation:		
Work Phone:			
DETAILS OF PARENT/GUARD	DIAN 2		
Title: First Name:		Surname:	
Postal Address:			
Residential Address:			
Suburb:			
Home Phone:	Email:		
Place of employment & occu	pation:	<del> </del>	
Work Phone:			
		counts:	

CUSTODY Child resides with:	□ both parents	☐ mother only	☐ father only	☐ shared custody				
	Orders regarding the	·	•	•				
·								
yes, piease attacii	a copy and detail care	e arrangements						
This information will	NT/ DISABILITY/ LEAR I assist the School Prin Die to assist the School	cipal to consider who	ether any specific or a	dditional resources are				
☐ Allergy – anaphyla	axis	☐ Hearing Conditi	on (e.g. Otis media)					
☐ Allergy – Other			n Care needs (e.g. Tub	e feeding)				
☐ Asthma ☐ Diabetes ☐ Autism Spectrum Disorder ☐ Deef on Heart of Hearing			☐ Diagnosed Migraine/headaches					
		☐ Seizure disorder (e.g. Epilepsy) ☐ Mental Health (e.g. anxiety) ☐ Rehavioural (a.g. ARR/ARUR)						
								☐ Deaf or Hard of H☐ Spech La
☐ Specific Speech Language Impairment ☐ Physical Disability ☐ Vision Impairment ☐ Specific Learning Difficulty ☐ Other		·						
If YES, please specify	/ below and attach a c		ormation/diagnoses t	o this application.				
	y below and attach a c	opy of all reports/inf						
EDUCATIONAL BACK		opy of all reports/inf	ncluding day care etc.	.)				
EDUCATIONAL BACK	KGROUND AND PROF	opy of all reports/inf	ncluding day care etc.	) d special classes or				
EDUCATIONAL BACK  1. Has your child been intervie	KGROUND AND PROF	opy of all reports/inf  ILE INFORMATION (in  The section of the se	ncluding day care etc.	) d special classes or				
EDUCATIONAL BACK  1. Has your child been intervie	KGROUND AND PROFI d been assessed by ar ewed by any other hea viour in the school cor	opy of all reports/inf  ILE INFORMATION (in  The section of the se	ncluding day care etc.	) d special classes or				
EDUCATIONAL BACK  1. Has your child been intervied and/or behave □ Yes □ No	KGROUND AND PROFI d been assessed by ar ewed by any other hea viour in the school cor	opy of all reports/inf  ILE INFORMATION (in  The section of the se	ncluding day care etc. psychologist, attender ny matter that may a	d special classes or ffect his/her learning				
EDUCATIONAL BACK  1. Has your child been intervier and/or behave and/or behave 2. Please give description.	KGROUND AND PROFI d been assessed by ar ewed by any other hea viour in the school cor	opy of all reports/inf  ILE INFORMATION (in  The second counsellor/  The second counsellor and the professional for a counsellor and the second coun	ncluding day care etc. psychologist, attender ny matter that may a	d special classes or ffect his/her learning				
1. Has your child been interview and/or behave 2. Please give descriptions.	KGROUND AND PROFI d been assessed by ar ewed by any other hea viour in the school cor details and provide cop	opy of all reports/inf  ILE INFORMATION (in  Interport of the state of	ncluding day care etc. psychologist, attended ny matter that may a	d special classes or ffect his/her learning				

	Requested Admission Calendar Year:			Requested Year Group:			
Requested Term of Entry: Term 1	□ Term 2 □	Term 3 □ Te	rm 4 🗆	Specific Date:			
Name of all siblings:							
	Age:	Attend MRM	S? Yes [	□ No □			
	Age:	Attend MRM	S? Yes [	□ No □			
	Age:	Attend MRM	S? Yes [	□ No □			
If siblings attend elsewhere, please	e specify						
How did you hear about Margaret    Family/Friends previously or cur   Margaret River Montessori Web   Margaret River Montessori Face   Internet Search   Other Montessori School or Asso   Advertisement   Other, please specify	rently attending ssite book ociation	g our school					
Your application will be acknowled been successful <u>OR</u> confirmation o	•		n indicati	on that the application has			
We acknowledge that we have prothis school and that we have read disclose any information that may cancellation of the enrolment. We and that our agreement to pay tuit of illness or absence from the sch Margaret River Montessori School	the Prospectus  impact upon of e understand the tion fees for the tool for any cau	and current Fee our child's/child nat new studen e full 4-week pe	Schedule ren's edu ts are ade riod is no	e. We understand that failure to cation at MRMS could result in mitted on a 4-week trial periont t subject to adjustment becaus			
Guardianship / Custody - Name of	person(s) who h	as legal custody	/ / guardia	anship of the child:			
SIGNATURE:		DATE:					
31GNATORL							
(Parent / Guardian)		DATE:					
(Parent / Guardian)  SIGNATURE:  (Parent / Guardian)		DATE:					

An application fee of \$150 is required when submitting this form.
Application Fee Payment
☐ Cash ☐ Cheque payable to Margaret River Montessori School ☐ Credit Card Master Card or Visa
☐ Bank Deposit (BSB 306-021 Account 0510267, please mark with your surname)
Credit Card No:/
Signature of cardholder: Secure Code
Next steps:
- If not done already, you should make a booking to undertake classroom observations. This is usuall done without your child. Please let us know if this is not possible as we are happy to assist.
- If you would like a meeting with the Principal without your child, please book a time for this.
<ul> <li>You will be contacted in the term prior to when your child would be due to start to attend an enrolment interview with the Principal.</li> </ul>
- Following the interview the Principal will contact you should any further information be required. If a place is to be offered to your child, you will receive a Letter of Acceptance and a Welcome Pack.
<ul> <li>You will be contacted by your child's new teacher to attend a Meet and Greet in the classroom with the teacher (parents and child attend together).</li> </ul>
<ul> <li>At this point in time you will begin to receive our School newsletter and be included in all School and Class correspondence.</li> </ul>
- Fees will not be charged until your child has commenced attending.
We are very happy to assist you with whatever you need in order to feel comfortable proceeding with our Application and/or Enrolment process. Please do not hesitate to ask if you have any queries.
Office Use Only
☐ Birth Certificate ☐ AIRS ☐ VISA ☐ Past School Reports ☐ Entered



