



# STUDENT ENROLMENT 2016

Dear Parents,

The forms enclosed are required for your child to start at our school in 2016.

Could you please take the few minutes it needs to read, fill out and sign the relevant forms, please make sure they are returned to the school office as soon as possible.

**Once enrolment forms are completed and returned with the relevant documentation, a place will be held for your child at our school. Please make sure all documents are filled out accurately and in a neat manner. Please make sure no boxes are left unanswered.**

We have also included a uniform price list (last updated in 2015-prices may vary for 2016) that can be activated by contacting the supplier direct. We encourage you to do this later in the year to get the most appropriate size. School bags, Library bags and sun smart hats are available at the school for purchase. More information regarding student charges will be sent out towards the end of the year. Barwon Heads Primary School has a **one-off total charge** for the year that covers all events, activities, sports excursions etc that will occur. Parents will not be required to make any more payments during the year for school activities and events. The only exclusions will be major camps and individual student participation in isolated activities i.e. zone and state sport participation.

## School Enrolment Support Documents

Please note: In order to complete the enrolment process the Department of Education requires a copy of the following certificates to be supplied to Barwon Heads Primary School with your child's completed enrolment form.

- A **Birth Certificate** (Proof of Age/passport). An Extract of Birth Certificate cannot be accepted.
- An **Immunisation Status Certificate that shows your child has received all vaccines required by 5 years of age.**
- **Proof of residency (rates notice/residential agreement/electricity bill etc)**
- All relevant **Visa** details for those students born overseas.

**These documents are required to finalise enrolment. Your enrolment can be lodged at school now without them if necessary. You will be asked to supply these before the start of 2015.**

## SCHOOL ENTRY IMMUNISATION CERTIFICATES

A school entry immunisation certificate is a specific document which shows your child's record of immunisation. The certificate is an important record that will assist health authorities in protecting children in the event of a vaccine preventable disease occurrence in school.

Please note that it is a legal requirement to provide a school entry immunisation certificate on enrolment to primary school in Victoria.

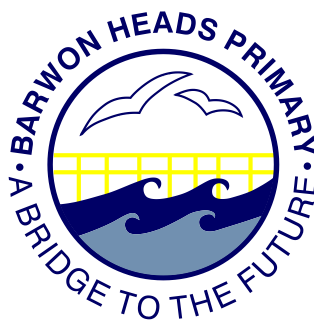
There are now 2 ways parents can obtain a school entry immunisation certificate:

1. Parents will automatically receive a history statement from the Australian Childhood Immunisation Register (ACIR) after your child has completed the 4 year old vaccine schedule and has completed all childhood immunisations required. On the bottom of the page it should state "**This child has received all vaccines required by 5 years of age.**" If it does, this is now accepted as a school entry immunisation certificate in Victoria.
2. Parents whose child's immunisation record are incomplete, missing or if your child has never been vaccinated, you will need to contact your local council immunisation service who will be able to assist you in obtaining a school entry immunisation certificate.

For more information about how to obtain a school entry immunisation certificate please contact your local council immunisation service or visit [www.health.vic.gov.au/immunisation](http://www.health.vic.gov.au/immunisation) under the heading 'frequently asked questions'.

Thank you for your help and co-operation in this important process. If you have any queries about any of the permissions please contact the school.

Mr Darren Roskosch  
Principal



## PRIMARY SCHOOL PRIVACY NOTICE

**Information about the Enrolment Form.  
Please Read This Notice Before Completing The Enrolment Form.**

**This confidential enrolment form asks for personal information about your child as well as family members and others that provide care for your child. The main purpose for collecting this information is so that Barwon Heads Primary School can register your child and allocate staff and resources to provide for their educational and support needs. All staff at Barwon Heads Primary School and the Department of Education & Training are required by law to protect the information provided by this enrolment form.**

Health information is asked for so that staff at Barwon Heads Primary School can properly care for your child. This includes information about any medical condition or disability your child may have, medication your child may rely on while at school, any known allergies and contact details of your child's doctor. Barwon Heads Primary School depends on you to provide all relevant health information because withholding some health information may put your child's health at risk.

Barwon Heads Primary School requires information about all parents, guardians or carers so that we can take account of family arrangements. Family Court Orders setting out any access restrictions and parenting plans should be made available to the school. Please tell us as soon as possible about any changes to these arrangements. Please do not hesitate to contact the Principal, if you would like to discuss, in strict confidence, any matters relating to family arrangements.

### **EMERGENCY CONTACTS**

**These are people that the school may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to the school.**

### **Student Background Information**

This includes information about a person's country of birth, aboriginality, language spoken at home and parent occupation. This information is collected so that the school receives appropriate resource allocations for their students. It is also used by the Department to plan for future educational needs in Victoria. Some information is sent to Commonwealth government agencies for monitoring, planning and resource allocation. All of this information is kept strictly confidential and the Department will not otherwise disclose the information to others without your consent or as required by law.

### **IMMUNISATION STATUS**

This assists the school in managing health risks for children. This information may also be passed to the Department of Human Services to assess immunisation rates in Victoria. Information sent to the Department of Human Services is aggregate data so no individual is identified.

### **VISA STATUS**

This information is required to enable Barwon Heads Primary School to process your child's enrolment.

### **UPDATING YOUR CHILD'S RECORDS**

Please let the school know if any information needs to be changed by sending updated information to the school office. During your child's time with Barwon Heads Primary School we will also send you copies of enrolment information held by us. Please use this opportunity to let us know of any changes.

### **ACCESS TO YOUR CHILD'S RECORD HELD BY SCHOOL**

In most circumstances you can access your child's records. Please contact the Principal to arrange this.

**Sometimes access to certain information, such as information provided by someone else, may require a Freedom of Information request. We will advise you if this is required and tell you how you can do this.**

If you have any concerns about the confidentiality of this information please contact the Principal.



# Barwon Heads Primary School

## STUDENT ENROLMENT INFORMATION

OFFICE USE ONLY

## STUDENT DETAILS SECTION

### STUDENT PERSONAL AND ENROLMENT DETAILS

|                           |  |  |
|---------------------------|--|--|
| Student Surname           | Gender M / F<br>(please circle)                      | Authority to publish Student photograph's on DEECD Ultraset <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Student First Given Name  | Birth Date / /                                       |  |
| Student Second Given Name | List Any Other Family Members Attending This School: |  |
| Student Preferred Name    |  |  |

## HOME ADDRESS DETAILS

|   |  |               |
|---|--|---------------|
| No. # & Street  |  |               |
| Suburb  |  | Postcode      |
| Telephone Number  | Silent Number Y / N<br>(please circle) | Mobile Number |
| <b>Mailing Address Details – Write "As Above" if the same as Home Address</b> |  |               |
| Post Office Box Number:   | Suburb:                                |               |
| Postcode:   | Family Email Address:                  |               |

## RESTRICTIONS

|  |   |  |
|--|---|--|
| Is There An Access Alert? Y / N<br>(Please circle one) | If yes, then complete the Access Type and Access Restriction sections below and provide documentation |  |
| Access Type  | Eg. Court Order, Family Law Order, Restraining Order or Other   |  |
| Access Restriction [Description]                       |   |  |
| Is There An Activity Alert? (please circle) Y / N      | If Yes, then describe the Activity Restriction below  |  |
| Activity Restriction: [If Any]                         |   |  |

## PRIMARY FAMILY DETAILS SECTION

**(NOTE: The 'PRIMARY' Family is: "The family the student mostly lives with" )**

**Adult A & Adult B must share the same home**

| <b>ADULT A:</b>  |       |                                     | <b>ADULT B:</b>  |       |                                     |
|--|-------|-------------------------------------|--|-------|-------------------------------------|
| <b>Gender</b><br>(circle)  | M / F | <b>Title</b><br>Ms, Mrs, Mr, Dr etc | <b>Gender</b><br>(circle)  | M / F | <b>Title</b><br>Ms, Mrs, Mr, Dr etc |
| <b>Legal Surname</b>   |       |                                     | <b>Legal Surname</b>   |       |                                     |
| <b>Legal First Name</b>  |       |                                     | <b>Legal First Name</b>  |       |                                     |
| <b>Occupation</b>  |       |                                     | <b>Occupation</b>  |       |                                     |
| <b>Employer</b>  |       |                                     | <b>Employer</b>  |       |                                     |
| <b>Country of Birth</b>  |       |                                     | <b>Country of Birth</b>  |       |                                     |
| <b>*Does Adult A Speak a Language Other Than English at Home? (Please Circle)</b><br>No, English Only <span style="float: right;">Yes</span>   |       |                                     | <b>*Does Adult B Speak a Language Other Than English at Home? (Please Circle)</b><br>No, English Only <span style="float: right;">Yes</span>   |       |                                     |
| Please indicate additional languages spoken by Adult A   |       |                                     | Please indicate additional languages spoken by Adult B   |       |                                     |
| <b>Is an interpreter required? (Please circle) Yes No</b>  |       |                                     | <b>Is an interpreter required? (Please circle) Yes No</b>  |       |                                     |
| <b>*What is the Highest Year of Primary or Secondary School Adult A has Completed? (please circle)-</b><br>Year 9 or equivalent or below 10 11 or 12   |       |                                     | <b>*What is the Highest Year of Primary or Secondary School Adult B has Completed? (please circle)-</b><br>Year 9 or equivalent or below 10 11 or 12   |       |                                     |
| <b>*What is the Level of the Highest Qualification Adult A has Completed (please circle) –</b><br>Bachelor Degree or above / Advanced Diploma or Diploma<br>Certificate I to IV (Including Trade Certificate)<br>No non-school qualification   |       |                                     | <b>*What is the Level of the Highest Qualification Adult B has Completed (please circle) –</b><br>Bachelor Degree or above / Advanced Diploma or Diploma<br>Certificate I to IV (Including Trade Certificate)<br>No non-school qualification   |       |                                     |
| <b>Relationship to Student (please circle)</b><br>Parent, Step-Parent, Adoptive Parent, Foster Parent, Host Family, Relative, Friend   |       |                                     | <b>Relationship to Student (please circle)</b><br>Parent, Step-Parent, Adoptive Parent, Foster Parent, Host Family, Relative, Friend   |       |                                     |
| <b>*What is the Occupation Group of Adult A Please select the appropriate parental occupation group from the attached list.</b> (If the person has not been in paid work but has had a job in the last 12 months, or has retired in the last 12 months please use their last occupation to select from the attached occupation group list. If the person has not been in paid work for the last 12 months enter 'N') <input style="float: right; width: 50px; height: 20px;" type="text"/> |       |                                     | <b>*What is the Occupation Group of Adult B Please select the appropriate parental occupation group from the attached list.</b> (If the person has not been in paid work but has had a job in the last 12 months, or has retired in the last 12 months please use their last occupation to select from the attached occupation group list. If the person has not been in paid work for the last 12 months enter 'N') <input style="float: right; width: 50px; height: 20px;" type="text"/> |       |                                     |
| <b>ADULT A: Contact Details</b>  |       |                                     | <b>ADULT B: Contact Details</b>  |       |                                     |
| <b>Can we contact you at work? (please circle)</b>   |       | Y / N                               | <b>Can we contact you at work? (please circle)</b>   |       | Y / N                               |
| <b>Are you usually home during business hours? (please circle)</b>   |       | Y / N                               | <b>Are you usually home during business hours? (please circle)</b>   |       | Y / N                               |
| <b>Work phone number</b>   |       |                                     | <b>Work phone number</b>   |       |                                     |
| <b>Mobile phone number</b>   |       |                                     | <b>Mobile phone number</b>   |       |                                     |
| <b>The Student Lives With the Primary Family:</b><br>(circle one) Always <span style="margin-left: 100px;">Mostly</span> <span style="margin-left: 100px;">Balanced</span><br>Occasionally <span style="margin-left: 100px;">Never</span>  |       |                                     | <b>Send Correspondence Addressed to:</b><br>(circle one) <b>A</b> = Adult A <span style="margin-left: 100px;"><b>B</b> = Adult B</span><br><span style="margin-left: 100px;"><b>C</b> = Both Adults</span> <span style="margin-left: 100px;"><b>N</b> = Neither</span>   |       |                                     |

\*These questions are asked as a requirement of the Commonwealth Government. All schools across Australia are required to collect the same information.

## EMERGENCY CONTACTS (OTHER THAN PARENTS)

**(Only list if English speaking) These are extremely important in case of an emergency**  
If sibling's emergency contacts are different please contact the general office.

|   | Name | Relationship: Neighbour, Relative, Friend or Other | Telephone Number |
|---|------|--|------------------|
| 1 |      |  |                  |
| 2 |      |  |                  |
| 3 |      |  |                  |

## MEDICAL DETAILS FOR STUDENT

In the event of illness or injury to my child whilst at school, on an excursion, or travelling to or from school; I authorise the Principal or teacher-in-charge of my child, where the Principal or teacher-in-charge is unable to contact me, or it is otherwise impracticable to contact me to:

- Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner,
- Administer such first aid as the Principal or staff member may judge to be reasonably necessary.

**SIGNATURE OF PARENT / GUARDIAN:**

Medical Alert (please circle)      Y / N      **If Yes, complete following section**

Disability (please circle)      Y / N      **If YES give Disability ID Number:**

Hearing Impairment      Y / N      Vision Impairment      Y / N

Speech Impairment      Y / N      Mobility Impairment      Y / N

**ASTHMA Medical Condition Details**      Y / N – If Yes please complete the following

**Further Details:**

|                                     |                |                               |                 |
|-------------------------------------|----------------|-------------------------------|-----------------|
| <b>Symptoms:</b><br>(Please circle) | Cough    Y / N | Difficulty Breathing    Y / N | Wheeze    Y / N |
|-------------------------------------|----------------|-------------------------------|-----------------|

Symptoms After Exertion    Y / N      Tight Chest    Y / N

Does your child have an Asthma Management Plan?    Y / N  
*If Yes, please complete an asthma management plan supplied by the general office*

**ANY OTHER Medical Condition Details** Y / N – If Yes please complete the following

**Medical Condition:**

**Further Detail:**

**Symptoms**

## FAMILY DOCTOR / MEDICAL CARE DETAILS

|  |  |                                      |  |
|--|--|--------------------------------------|--|
| <b>Doctor's Name / Medical Clinic</b>              |  | <b>Individual or group practice:</b> |  |
| Street   |  | Suburb                               |  |
| Postcode   |  | Telephone Number                     |  |
| Ambulance Subscriber<br>(please circle)      Y / N |  | Medicare Number                      |  |

## DEMOGRAPHIC DETAILS FOR STUDENT

|  |   |
|--|---|
| <b>In which country was the student born?</b>  | If Country of Birth is <b>NOT</b> Australia then advise the following |
| <b>Date of Arrival in Australia OR<br/>Date of Return to Australia</b>   | /       /   |
| <b>Residential Status</b> P = Permanent T = Temporary (circle) <b>P / T</b> <i>IF T, the next line must be completed</i> |   |
| <b>Visa Sub Class</b>  | <b>Visa Statistical Code</b>  |
| <b>Visa Expiry Date</b> /       /<br>[dd – mm - yyyy]  |   |

|  |  |   |  |  |  |
|--|--|---|--|--|--|
| <b>Student Speaks English</b><br>(please circle) | Y / N  | <b>Students main LOTE spoken at home if different to English:</b> | <b>Usual Mode Of Transport</b><br>(please circle)  | <b>W = Walking</b><br><b>P = Public Bus</b><br><b>C = Driven</b><br><b>O = Other</b> | <b>Y = Bicycle</b><br><b>M = Tram</b><br><b>S = Self Driven</b><br><b>B = School Bus</b> |
| <b>Living Arrangement</b><br>(please circle)     | <b>A = Arranged by State-Out of Home Care</b><br><b>B = At home with TWO Parents/Guardians</b><br><b>H = Homeless Youth</b><br><b>I = Independent</b><br><b>O = At home with ONE Parent/Guardian</b> |   | <b>Will you be applying for travel assistance?</b><br>(please circle)<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br><b>Do you live more than 4.6km from the school?</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No |  |  |
| <b>Indigenous Background</b><br>(please circle)  | <b>N = No Indigenous Background</b><br><b>K = Aboriginal</b><br><b>T = Torres Strait Islander</b><br><b>B = Both Aboriginal &amp; Torres Strait Islander</b>   |   | <b>Distance to School In Kilometres</b>  |  |  |

## SCHOOL DETAILS

|  |           |  |       |   |       |  |
|--|-----------|--|-------|---|-------|--|
| <b>Date Of First Enrolment in an Australian School</b>   | /       / | <b>Name of Previous School:</b>                |       |   |       |  |
| <b>Repeating Year</b><br>(Please circle)   | Y / N     | <b>Integration Required</b><br>(Please circle) | Y / N | <b>Full Time Student</b><br>(Please circle) | Y / N | <b>If not Full Time – Time fraction for Part Time Student</b><br>I.e. 0.8 = 4 days |
| If you are a part time student please indicate if you are enrolled with another school and provide us with your Schools name:  |           |  |       |   |       |  |
| <b>Does your student have a Victorian Student Number (VSN)?</b>  |           |  |       |   |       |  |
| <input type="checkbox"/> Yes Please Specify <input type="checkbox"/> Yes, but the VSN is unknown <input type="checkbox"/> No. The student has never been issued a VSN  |           |  |       |   |       |  |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |           |  |       |   |       |  |

|   |       |
|---|-------|
| <b>Ab Study Allowance</b> (please circle) | Y / N |
|---|-------|

Thank you for taking the time to complete this Student Information form. The details are confidential, but are required to enable staff to enrol your child at our School. If any of the above details change please contact the School on 52542324 to update our records, these details are very important in an emergency.

**Signature(s) of Parents / Guardians:**

\_\_\_\_\_ Date \_\_\_\_\_

## ALTERNATIVE FAMILY DETAILS

**(NOTE: The 'ALTERNATIVE' Family is: "The family the student sometimes / occasionally lives with.)**

**Adult A and Adult B must share the same home**

| <b>ADULT A:</b>   |  | <b>ADULT B:</b>   |  |
|---|--|---|--|
| <b>Gender</b><br>(circle)   | M / F  | <b>Title</b><br>Ms, Mr, Dr etc  |  |
| <b>Surname</b>  |  | <b>Surname</b>  |  |
| <b>First Name</b>   |  | <b>First Name</b>   |  |
| <b>Address</b>  |  | <b>Address</b>  |  |
| <b>Telephone</b>  |  | <b>Telephone</b>  |  |
| <b>Occupation</b>   |  | <b>Occupation</b>   |  |
| <b>Employer</b>   |  | <b>Employer</b>   |  |
| <b>Work Phone Number</b>  |  | <b>Work Phone Number</b>  |  |
| <b>Can we contact you at work?</b>  |  | <b>Can we contact you at work?</b>  |  |
| <b>Country of Birth</b>   |  | <b>Country of Birth</b>   |  |
| <b>Native Language</b><br>(Write <b>E</b> if English)   |  | <b>Native Language</b><br>(Write <b>E</b> if English)   |  |
| <b>Other Language</b>   |  | <b>Other Language</b>   |  |
| <b>Adult A – Level of School Education</b><br>(Please circle) - (Year 9, 10, 11 or 12)          |  | <b>Adult B – Level of School Education</b><br>(Please circle) - (Year 9, 10, 11 or 12)          |  |
| <b>Adult A – Non School Education</b><br>(Please circle) - Degree / Diploma / Trade Certificate |  | <b>Adult B – Non School Education</b><br>(Please circle) - Degree / Diploma / Trade Certificate |  |
| <b>Family Occupation Code (Choose from the list provided):</b>                                  |  |   |  |
| <b>ADULT A: (Please circle)</b>   |  | <b>ADULT B: (Please circle)</b>   |  |
| A   | B  | C   | D  |
| <b>Relationship To Student</b><br>(circle)  | Parent, Step-Parent, Adoptive<br>Parent, Foster Parent, Host<br>Family, Relative, Friend | <b>Relationship To Student</b><br>(circle)  | Parent, Step-Parent, Adoptive<br>Parent, Foster Parent, Host<br>Family, Relative, Friend |
| <b>Language spoken at home</b> (Write <b>E</b> if language is English)                          |  |   |  |

## ALTERNATIVE FAMILY DETAILS

**(NOTE: The 'ALTERNATIVE' Family is: "The family the student sometimes / occasionally lives with.)**

**Adult A and Adult B must share the same home**

| <b>ADULT A:</b>   |  | <b>ADULT B:</b>   |  |
|---|--|---|--|
| <b>Gender</b><br>(circle)   | M / F  | <b>Title</b><br>Ms, Mr, Dr etc  |  |
| <b>Surname</b>  |  | <b>Surname</b>  |  |
| <b>First Name</b>   |  | <b>First Name</b>   |  |
| <b>Address</b>  |  | <b>Address</b>  |  |
| <b>Telephone</b>  |  | <b>Telephone</b>  |  |
| <b>Occupation</b>   |  | <b>Occupation</b>   |  |
| <b>Employer</b>   |  | <b>Employer</b>   |  |
| <b>Work Phone Number</b>  |  | <b>Work Phone Number</b>  |  |
| <b>Can we contact you at work?</b>  |  | <b>Can we contact you at work?</b>  |  |
| <b>Country of Birth</b>   |  | <b>Country of Birth</b>   |  |
| <b>Native Language</b><br>(Write <b>E</b> if English)   |  | <b>Native Language</b><br>(Write <b>E</b> if English)   |  |
| <b>Other Language</b>   |  | <b>Other Language</b>   |  |
| <b>Adult A – Level of School Education</b><br>(Please circle) - (Year 9, 10, 11 or 12)          |  | <b>Adult B – Level of School Education</b><br>(Please circle) - (Year 9, 10, 11 or 12)          |  |
| <b>Adult A – Non School Education</b><br>(Please circle) - Degree / Diploma / Trade Certificate |  | <b>Adult B – Non School Education</b><br>(Please circle) - Degree / Diploma / Trade Certificate |  |
| <b>Family Occupation Code (Choose from the list provided):</b>                                  |  |   |  |
| <b>ADULT A: (Please circle)</b>   |  | <b>ADULT B: (Please circle)</b>   |  |
| <b>A</b>  | <b>B</b>   | <b>C</b>  | <b>D</b>   |
| <b>Relationship To Student</b><br>(circle)  | Parent, Step-Parent, Adoptive<br>Parent, Foster Parent, Host<br>Family, Relative, Friend | <b>Relationship To Student</b><br>(circle)  | Parent, Step-Parent, Adoptive<br>Parent, Foster Parent, Host<br>Family, Relative, Friend |
| <b>Language spoken at home</b> (Write <b>E</b> if language is English)                          |  |   |  |



**BARWON HEADS PRIMARY SCHOOL COASTAL UNIFORMS**  
**ORDER FORMS 2015/16**

| ITEM                     | COST | 4 | 6 | 8 | 10 | 12 | 14 | 16 | TOTAL |
|--------------------------|------|---|---|---|----|----|----|----|-------|
| HOODED WINDCHEATER       | \$30 |   |   |   |    |    |    |    |       |
| HOODED JACKET            | \$32 |   |   |   |    |    |    |    |       |
| FLEECY JACKET            | \$26 |   |   |   |    |    |    |    |       |
| POLAR FLEECE JACKET      | \$30 |   |   |   |    |    |    |    |       |
| POLAR FLEECE VEST        | \$20 |   |   |   |    |    |    |    |       |
| CREW NECK WINDCHEATER    | \$22 |   |   |   |    |    |    |    |       |
| V-NECK JUMPER            | \$38 |   |   |   |    |    |    |    |       |
| POLO SHIRT SHORT SLEEVE  | \$19 |   |   |   |    |    |    |    |       |
| POLO SHIRT LONG SLEEVE   | \$20 |   |   |   |    |    |    |    |       |
| PETER PAN COLLAR SHIRT   | \$24 |   |   |   |    |    |    |    |       |
| TARTAN TUNIC             | \$60 |   |   |   |    |    |    |    |       |
| SCHOOL DRESS             | \$32 |   |   |   |    |    |    |    |       |
| GINGHAM SKORTS           | \$19 |   |   |   |    |    |    |    |       |
| NAVY GABERDINE SKORTS    | \$23 |   |   |   |    |    |    |    |       |
| NAVY GABERDINE SHORTS    | \$21 |   |   |   |    |    |    |    |       |
| NAVY GABERDINE PANTS     | \$27 |   |   |   |    |    |    |    |       |
| TRACK PANTS              | \$19 |   |   |   |    |    |    |    |       |
| TRACK PANTS / KNEE PADS  | \$21 |   |   |   |    |    |    |    |       |
| NAVY LYCRA LEGGINGS      | \$20 |   |   |   |    |    |    |    |       |
| NAVY LYCRA BIKE PANTS    | \$10 |   |   |   |    |    |    |    |       |
| NAVY COTTON BLEND TIGHTS | \$10 |   |   |   |    |    |    |    |       |
| <b>TOTAL</b>             |      |   |   |   |    |    |    |    |       |

**Coastal Uniforms Cnr Everist Rd and Smithton Grove Ocean Grove**  
**Ph / fax 03 5255 4897 Emai: coastaluniform@optusnet.com.au**  
**Postal address: PO Box 375 Ocean Grove**

**PAYMENT CAN BE MADE BY CREDIT CARD**

Card Type (Visa, MasterCard): \_\_\_\_\_ Card Number: \_\_\_\_\_

Full Name on Card: \_\_\_\_\_ Card Expiry Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

# Parental Occupation Group Codes

## Group A Senior management in large business organisation, government administration and defence, and qualified professionals

Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation

Public Service Manager (Section head or above), regional director, health / education / police / fire services administrator

Other administrator (school principal, faculty head / dean, library / museum / gallery director, research facility director)

Defence Forces Commissioned Officer

Professionals - generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others:

- **Health, Education, Law, Social Welfare, Engineering, Science, Computing** professional
- **Business** (management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)
- **Air/sea transport** (aircraft / ship's captain / officer / pilot, flight officer, flying instructor, air traffic controller)

## Group B Other business managers, arts/media/sportspersons and associate professionals

Owner / Manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business

Specialist Manager (finance / engineering / production / personnel / industrial relations / sales / marketing)

Financial Services Manager (bank branch manager, finance / investment / insurance broker, credit / loans officer)

Retail sales / Services manager (shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency)

Arts / Media / Sports (musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official)

Associate Professionals - generally have diploma / technical qualifications and support managers and professionals:

- **Health, Education, Law, Social Welfare, Engineering, Science, Computing** technician / associate professional
- **Business / administration** (recruitment / employment / industrial relations / training officer, marketing / advertising specialist, market research analyst, technical sales representative, retail buyer, office / project manager)
- **Defence Forces** senior Non-Commissioned Officer

## Group C Tradesmen/women, clerks and skilled office, sales and service staff

Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group

Clerks (bookkeeper, bank / PO clerk, statistical / actuarial clerk, accounting / claims / audit clerk, payroll clerk, recording / registry / filing clerk, betting clerk, stores / inventory clerk, purchasing / order clerk, freight / transport / shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk)

Skilled office, sales and service staff:

- **Office** (secretary, personal assistant, desktop publishing operator, switchboard operator)
- **Sales** (company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher)
- **Service** (aged / disabled / refuge / child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor)

## Group D Machine operators, hospitality staff, assistants, labourers and related workers

Drivers, mobile plant, production / processing machinery and other machinery operators

Hospitality staff (hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper)

Office assistants, sales assistants and other assistants:

- **Office** (typist, word processing / data entry / business machine operator, receptionist, office assistant)
- **Sales** (sales assistant, motor vehicle / caravan / parts salesperson, checkout operator, cashier, bus / train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker)
- **Assistant / aide** (trades' assistant, school / teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum / gallery attendant, usher, home helper, salon assistant, animal attendant)
- **Labourers and related workers**
- **Defence Forces** - ranks below senior NCO not included above
- **Agriculture, horticulture, forestry, fishing, mining worker** (farm overseer, shearer, wool / hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/ logging worker, miner, seafarer / fishing hand)
- **Other worker** (labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)



# PARENT AGREEMENTS/PERMISSIONS

- **Student Name** ..... **Class** .....
  
- This form is designed to help staff:
- Have confidence in choosing students to participate in school promotions including having their photos published in the local media or
- Have an authorised officer check their hair for head lice.
- Also included is a number of acceptable usage agreements covering the Internet, PG films and use of class sets.
- This form will be considered confidential and be kept in the students file at the office until the student no longer attends Barwon Heads Primary School.
- The school needs to be notified in writing by a parent/guardian if at any stage you wish to make an alteration.
  
- Signed..... (Parent/Guardian)Date .... / .... / ...
- **School Promotions and Photographs**
- **Head Lice Inspection Authority**
- **Internet & E-mail – Acceptable Users Agreement**
- **Use of class sets/library books**
- **Viewing of ‘PG’ rated material**
- **Changes to Agreements**
- 
- **School Promotions and Photographs** ***all grades***
- Occasionally, photographs/video of students are taken for special activities, events, sport, publicity, etc. Cooperation is sought to use these images to recognise and promote student participation and achievement in both our school and the wider community of Barwon Heads.
- I give my consent for my child’s image and work to be reproduced for such relevant school publications and promotional material, newsletters, internet site, etc.
- Signed..... (Parent/Guardian)
- **Head Lice Inspections** ***all grades***
- In case of an outbreak of head lice, I give my permission for my child’s hair to be checked by the school authorised officer. I understand that it is my responsibility to inform the school if my child has head lice and that children can only be returned to school after treatment.
- Signed..... (Parent/Guardian)  
Computer/user/admin/enrolmentdetails/2011enrolmentinformation/parentagreements2011
  
- **Internet & E-mail – Acceptable Users Agreement** ***all grades***
- I understand and will follow the guidelines outlined.
- I understand that access to the internet and e-mail; facilities are a privilege and that inappropriate use will result in the loss of this privilege.

- 1. The primary focus will be educational
- 2. Responsible, appropriate and respectful language shall be used at all times.
- 3. Privacy – do not include personal information (name, address, phone numbers)
- 4. Users must take full responsibility for their own actions. Where a user finds inappropriate
- 
- Signed.....(Student)I have discussed these guidelines with my child.
- Signed..... (Parent/Guardian)
- **Use of Class Sets and library Books** *all grades*
- In the event of damage or loss of school texts/library books, I agree to reimburse the school for the required amount to cover replacement.
- Signed..... (Parent/Guardian)
- **Viewing of 'PG' rated material** *all grades*
- Given previous notice of the material to be shown , I agree to my child viewing 'G' & 'PG' rated material as designated by the teacher.
- Signed..... (Parent/Guardian)
- The Administration Office is open between 8.30am and 4.30pm Monday to Friday.
- We offer Credit Card facilities for your convenience.
- Tracy Davey & Tiara Ridwan
- Contact Numbers:-
- General Office: **52542324**
- FAX : 52543073
- ` Email – [barwon.heads.ps@edumail.vic.gov.au](mailto:barwon.heads.ps@edumail.vic.gov.au) School website – [www.bhps.vic.edu.au](http://www.bhps.vic.edu.au)

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