



Guildford Grammar School

FOUNDED 1896

# Application for Enrolment

**Preparatory (K-6) • Senior (7-12)**

*Please read and complete all pages*

## Student

First Name: ..... Middle Name: .....

Surname: .....  Day Student

Calendar Year of Entry: ..... Academic Year of Entry: .....  Boarder

**All sections must be fully completed and the following documents (if applicable) included:**

- \$120 Application Fee (including GST)
- Semester 1 and 2 school reports from the last two years (as requested by the Admissions team) and NAPLAN results as applicable by age
- Letter of Reference (Only Boarders must provide a reference from their current Teacher or Principal)
- Copy of your child's Full Birth Certificate (not an extract)
- Medicare or Australian Immunisation Register History Statement and any relevant medical documents
- Full-time Kindergarten
- Part-time Kindergarten (Mon, Tues, Wed)

***Please note that enrolment in Kindergarten or Pre-Primary does not guarantee a place in the Little Explorers Program.***

## Office use only

Enq ID: ..... Acceptance Fee: .....

Fut Syn ID: ..... Endowment Fee: .....

House/Qtr Allocation: ..... Interview Date: .....

**Application for Enrolment**  
**Preparatory (K-6) • Senior (7-12)**

### Student Information

First Name: ..... Middle Name: .....

Surname: ..... Preferred Name: .....

Date of Birth: ..... / ..... / ..... Gender: .....

Place of Birth: ..... Country of Birth: .....

Nationality: ..... Religious Denomination: .....

Country of Citizenship: .....

First Language: .....

Australian Permanent Resident: Yes / No  Aboriginal  Torres Strait Islander  
*(please circle)*

Current Residential Address: .....

..... State: ..... Postcode: .....

Current School: .....

Current Year Level: .....

### Students born outside of Australia: **Citizenship/Visa must be sighted**

Date of Arrival: ..... / ..... / ..... Visa Number: .....

Nationality: ..... Visa Class: .....

Passport Number: ..... Visa Expiry Date: ..... / ..... / .....

Who does the student reside with?  Both parents  Mother  Father  Other

### Student Immunisation Details

Fully Immunised: Yes / No **Please attach full medical immunisation record**  
*(please circle)*

**Application for Enrolment**  
**Preparatory (K-6) • Senior (7-12)**

## Student Learning Information

Does your child have any special needs (medication, physical, cognitive, learning)?

***If yes, please provide details below and attach additional diagnostic report documents and plans if the space provided is inadequate.***

**Medical Alert Bracelet:** Yes / No *(please circle)* - if yes, please provide details etc. below.

**Paediatrician:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Occupational Therapist:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Allergies:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Required Medication:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Physical:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Sensory:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Speech:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Psychiatrist/Psychologist/Counsellor:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Behavioural:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

**Cognitive/Learning:** .....  
Date of assessment: ..... / ..... / ..... Information attached: Yes / No *(please circle)*

Has your child ever received supplemental funding? Yes / No *(please circle)*

Is your child currently receiving NDIS funding? Yes / No *(please circle)*

Has your child previously received NDIS funding? Yes / No *(please circle)*

Has your child previously received state funding? Yes / No *(please circle)*

*if yes:*  AISWA  CEWA  Dept. of Ed.

***Relevant details relating to or involving the student (e.g. family structure, ill health, physical disability, allergies, other learning requirements), must accompany this application. In cases of special learning requirements, the School needs to be fully informed in order to provide adequate support for your child should a place be offered. The School reserves the right to consider termination of the enrolment if relevant material is not disclosed.***

**Application for Enrolment**  
**Preparatory (K-6) • Senior (7-12)**

## Family Information

**Parent/Guardian 1** Relationship to Child: .....

Title and Surname: .....

First Name: .....

Address: .....

State: ..... Postcode: .....  **Fee address** (please tick)

Occupation: ..... Employer: .....

Nationality: ..... Religious Denomination: .....

Country of Birth: ..... First Language: .....

Home Telephone: ..... Work Telephone: .....

Mobile: ..... Email: .....

**I wish to receive school correspondence  
at this email address** (please tick)

**Parent/Guardian 2** Relationship to Child: .....

Title and Surname: .....

First Name: .....

Address: .....

State: ..... Postcode: .....  **Fee address** (please tick)

Occupation: ..... Employer: .....

Nationality: ..... Religious Denomination: .....

Country of Birth: ..... First Language: .....

Home Telephone: ..... Work Telephone: .....

Mobile: ..... Email: .....

**I wish to receive school correspondence  
at this email address** (please tick)

***If a third party is covering fees, please provide details***

**Application for Enrolment**  
**Preparatory (K-6) • Senior (7-12)**

**Family Information (continued)**

Are there any court orders pertaining to this child? Yes / No  
*(please circle)*

***If yes, please provide details and copies***

.....  
.....  
.....  
.....

**Emergency Contact Details (other than Parent/Guardian)**

Emergency Contact Name: .....

Relationship to Child: .....

Address: .....

State: ..... Postcode: .....

Home Telephone: ..... Work Telephone: .....

Mobile: ..... Email: .....

**Association with Guildford Grammar School**

Is the parent, grandparent, sibling or other relative an Old Guildfordian? Yes / No *(please circle)*

Name: ..... Year: ..... House: .....

Relationship: .....

Name: ..... Year: ..... House: .....

Relationship: .....

Name: ..... Year: ..... House: .....

Relationship: .....

Name: ..... Year: ..... House: .....

Relationship: .....

**Application for Enrolment**  
**Preparatory (K-6) • Senior (7-12)**

**Association with Guildford Grammar School (continued)**

*Please list the names of siblings who are current students at the School, or who are enrolled to attend in future years.*

Name: ..... Academic Year: .....

Name: ..... Academic Year: .....

Name: ..... Academic Year: .....

Name: ..... Academic Year: .....

**Terms and Conditions of Enrolment**

1. **A non-refundable Application Fee of \$120 per student must accompany this Application.**
2. Lodgement of this Application does not guarantee a place at the School.
3. I/we have completed this application form to the best of my/our knowledge. Further I/we acknowledge and accept that if it can be demonstrated that I/we have withheld information relevant to the application/enrolment process, especially in relation to this student's individual needs, medical conditions, health care requirements and/or Court Orders, then the enrolment process may be refused or terminated on this ground.
4. Parents must supply their child's Australian Immunisation Register (AIR) History Statement upon enrolment. If your child has a valid reason why they cannot be vaccinated a GP needs to complete, sign and submit an AIR Immunisation Medical Exemption Form or provide notification directly in the child's online AIR record.
5. I/we will provide a copy of the student's most recent school reports prior to the interview.
6. I/we will advise the School of any change of personal details including email details between the time of application and the duration of the enrolment.
7. A formal offer of a place at the School is made following a successful interview with the Principal or delegated representative. I/we understand that attendance at an interview does not guarantee an offer of a place. Both parents/guardians must accompany the student to the interview, except under exceptional circumstances. Required paperwork must be signed and returned to the School prior to a student commencing at the School. **A non-refundable Acceptance and Endowment fee of \$3,000 is payable per family upon the offer of a place.**
8. Leave of absence can only be granted for a one (1) year period. In exceptional circumstances, extensions to this request may be requested in writing to the Principal and places are granted upon availability.
9. I/we agree that if necessary, a credit check may be undertaken by the School with any schools you have been previously associated with.
10. I/we agree to abide by and support the philosophies of the School and lend full support to the staff of the School in the implementation of these philosophies.
11. I/we accept full responsibility for the school fees and any other cost involved for the duration of enrolment of this student at the School.
12. I/we understand that the Annual Fee set out in the Fees and Charges Schedule is payable in accordance with the published payment options of the School each year. Charges for goods and services are payable as rendered. A student may not be permitted to enter the School at the beginning of any Term unless all fees and charges are paid up to date.
13. I/we understand that a term's notice must be provided to the School in writing, otherwise the School is entitled to charge a term's fee in lieu of notice given.
14. An offer of enrolment as a boarder is for a full academic year of four terms. Any request for withdrawal will require the balance of the boarding fees for the remainder of the year to be paid.
15. The School, at its discretion, may seek to recover from you any damage to the School's property caused or contributed to by the student, net of any amount the School may recover under the School's insurance policies.
16. I/we authorise the School to incur costs on my/our behalf where they relate to the student's medical expenses arising from accident or illness.
17. I/we agree that the student is solely responsible for loss or damage to personal property brought to the School.
18. **All information collected on this form will be used and stored in accordance with the School's Privacy Policy, which is available on the school's website at [www.ggs.wa.edu.au](http://www.ggs.wa.edu.au)**

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### Privacy Requirements

Should any information about your family or child be of a sensitive or private nature, attach a separate letter outlining these circumstances.

***I/We agree to the collection and use of personal information for my child and family.***

### Photo and video consent

The School takes and uses a range of photos and video of school-related activities and events throughout the year, for use in various school publications, marketing, advertising and social media.

Please indicate whether you provide consent to photos and video of your child being used for the following purposes:

- Internal communications and publications      Yes / No
- Promotional materials and advertising          Yes / No
- Social media consent                                      Yes / No  
*(please circle)*

**Internal communications and publications:** Internal materials used to share school news with our school community such as our biannual magazine, weekly newsletter or campus posters.

**Promotional materials and advertising:** Advertising materials used to promote our wonderful school such as our website, online advertising or print advertising.

**Social media:** Social media posts shared across Facebook, Instagram, Twitter or LinkedIn to promote and share school news. Only first names are referenced.

### Parental Agreement to Guildford Grammar School – Terms and Conditions

- I/We agree to the terms and conditions and give permission to process this Application for Enrolment. I/we understand that by signing this application I/we am agreeing to and will abide by the above terms and conditions for the full term of this child's enrolment at Guildford Grammar School.**

..... Date: ..... / ..... / .....      ..... Date: ..... / ..... / .....

signature of Parent/Guardian 1                                      signature of Parent/Guardian 2

### Payment Details

Pay the amount **\$120** by:     Cash     Cheque     Credit Card     Direct Deposit

**Credit Card Details**       Mastercard     Visa     Amex

Name on card: .....      Card No.:

Expiry Date: ..... / .....      Signature: .....

**Direct Deposit Details**

Account: **Guildford Grammar School Inc.**    Bank: **Westpac**    BSB: **036-000**    Account No. **869683**  
Payment Reference: **[Student Name, Academic Year of Entry, Calendar Year of Entry]**  
*(e.g. David Citizen, Year 9, 2022)*

SWIFT code for overseas payments: **WPACAU2S**

**Cheque Details**

Payable to: **Guildford Grammar School, 11 Terrace Road, Guildford, Western Australia 6055**