



LIWARA CATHOLIC PRIMARY SCHOOL

5 TUART ROAD, GREENWOOD. WA 6024 P.O. BOX 63 GREENWOOD WA 6024

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Email: admin@liwara.wa.edu.au Website: www.liwara.wa.edu.au

EXPRESSION OF INTEREST FOR ENROLMENT

ACADEMIC YEAR OF ENTRY (Pre Kindy - 6) _____ **YEAR OF ADMISSION** _____

Entry age for Pre-Kindy is when your child turns 3.

Entry age for Kindergarten is the year your child turns 4 if born prior to 1 July. Children turning 4 on 1 July or after enter the year they turn 5.

STUDENT INFORMATION

Surname: _____ Male/Female: _____

First Name: _____ Second Name: _____

Preferred Name: _____ Date of Birth: _____

Place of Birth: _____ Country of Birth: _____ Nationality: _____

Religion: _____ Baptism Date: ___/___/___ Language at home: _____

If born outside Australia: Date of Arrival ___/___/___ Visa Code _____ Expiry Date ___/___/___

A copy must be included with this form.

Is your child of Aboriginal or Torres Strait Islander origin? Yes / No

Current school (if applicable): _____ Location _____ Year Level _____

Individual Needs: Does your child have any special medical or educational needs?

FAMILY INFORMATION

MOTHER / LEGAL GUARDIAN

TITLE: _____ FIRST NAME: _____ SURNAME: _____

NATIONALITY: _____ COUNTRY OF BIRTH: _____ MOBILE: _____

EMAIL: _____ RELIGION: _____

FATHER / LEGAL GUARDIAN

TITLE: _____ FIRST NAME: _____ SURNAME: _____

NATIONALITY: _____ COUNTRY OF BIRTH: _____ MOBILE: _____

EMAIL: _____ RELIGION: _____

Address: _____

Suburb: _____ Post Code: _____ Home Phone: _____

Siblings already at Liwara Catholic Primary School

NAME: _____ NAME: _____

NAME: _____ NAME: _____

- I/we acknowledge and accept the terms set out in the Information Collection Notice on the website, in accordance with the Privacy Act and the Liwara Catholic School Privacy Policy. This Expression of Interest for Enrolment Form has been completed to the best of my/our knowledge

Signature of Mother / Legal Guardian _____ Date _____

Signature of Father / Legal Guardian _____ Date _____

OFFICE USE ONLY: APPLICATION FEE RECEIVED YES / NO DATE RECEIVED ___/___/___

ENROLMENT PRIORITY

Liwara Catholic Primary School exists for the primary purpose of providing Catholic children from the parish of All Saints with a Catholic education thus enrolment priority is given to:

1. Siblings of existing Catholic families within the school
2. Siblings of existing Non-Catholic families within the school
3. Catholic students from within the Parish with a Parish Priest Reference
4. Catholic students from outside the Parish with a Parish Priest Reference
5. Non-Catholic students from other Christian denominations
6. Other Non-Catholic students

Aboriginal and Torre Strait Islanders will be given enrolment preference wherever possible and practical.

This Expression of Interest for Enrolment Form is consistent with the Enrolment Policy as stated by Catholic Education.

PLEASE NOTE:

- Completion of this Expression of Interest for Enrolment Form does not guarantee an enrolment interview or offer.
- Enrolment will involve an interview with the Principal. A letter of invitation will follow and enrolment in the school will be processed on receipt of all requested documents.

Liwara Catholic Primary School is conscious of each person's right to privacy for personal information. Information relating to the Schools Privacy and Information Collection notice can be found on the schools Website under Student Enrolment Policy.

FEE FOR LODGEMENT

A non-refundable lodgement fee of \$30.00 per child or \$60.00 per family (3 or more children) for this Expression of Interest for Enrolment is required. Please include payment with this form. Payment may be made via cash, cheque, EFTPOS or credit card in person or if you wish to email this form please include the credit card details below.

Please debit my credit card \$30.00 per child or \$60.00 per family (3 or more children) for lodgement of this form:

Visa Mastercard Amount \$ _____

Name on Card: _____

Card Number:

Expiry Date: / Signature: _____
