

Application to Enrol in a Victorian Government School

Korumburra Secondary College

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 <u>reasonable adjustments</u> 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

OTOBERT B												
Surname:												
First Given Name:												
Second Given Name:	(if applica	able)										
Preferred First Name:	(if applic	able)										
Date of Birth: (dd-mm		Gender: Male Female Self described:										
Which year are you se	eking to	enrol t	his stud	ent?								
Foundation(Prep)	2	 3	4	5	6	7	8	9	1 10	1 1	1 2	Ungraded

Intended start date:						
☐ Day 1, Term 1	Other	(dd-mm-yyyy)	:/_		/	
			_			
Are you seeking to enrol the student at this school full-time?	?	nove to next se	ection) 🗖	No		
If No, how many days a week would the student be attending	g this school?					
If No, provide a reason why you are seeking part-time enrole	ment:					
	Days /		Has enrolm	ont		
Other school name:	week:		been accep	ted?	Yes	No
Other school name:	Days / week:		Has enrolm been accep		Yes	□No
Do you live in the school's zone?			/00		No	
Go to www.findmyschool.vic.gov.au to find your local school			res		INO	
If this school has multiple campuses, what campus is the s	tudent applyir	ng for?				
Student's Permanent Residence						
our child's permanent residence is the address where they spend the	e majority of thei	r days during th	e school weel	k. If they s	pend an e	equal
mount of time at two addresses, both are considered their permanent	t address and yo	our child will be	entitled to enr	ol in the d	esignated	
eighbourhood school for either address. Please provide proof of pe school will let you know what proof is required. For more informati						
content.sdp.education.vic.gov.au/media/100-point-address-checklist-1	867. When asse	essing your app	lication, the so	chool may	make	
enquiries to verify the information provided, such as checking the elect Electoral Commission head office; checking with a real estate agent; o	or checking whet					orian
occupancy, for example if a rental property is a studio or one bedroom	n unit.				Ü	
No. & Street Address:						
Suburb:						
State:	Pos	tcode:				
How often does this student live at this address?						
□Always			Balanc	ed (50%)		
If the student lives at another address during the school wee		vide further de	etails includi	ing the ac	ldress, v	vho
they reside with, and how many days a week the student live	es there:					
		-4				
Siblings						
A sibling is defined broadly and can include step-siblings and students	residing togethe	er as part of a m	nultiple family	cohabitatic	n or out-o	of-home-
are arrangements, including foster care, kinship care and permanent	care.					
Does the student have any siblings at this school?		Yes	☐ No (move to next section			1)
Name		Current	Reside at same residential			
1		Year Level	address Yes	as tne st		netimes
2			Yes	□ No		netimes
3			☐ Yes	□ No		netimes
4			☐ Yes	□ No		netimes
				— . ••	= 001	
OFFICE USE ONLY						
Proof of the student's permanent residence provided?	☐ Yes			No		
Eligible for enrolment:				-		
-	– Closeness	☐ Yes -	- Compassio	nate	□ No	1

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 enrollment 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

9					
Surname:					
First Given Name:					
Contact Mobile Number:					
Contact Home Phone:					
Contact Email Address:					
Correspondence Address:					
Student lives with Adult 1:	Always	Mostly	Balanced(50	0%) O Cc	casionally
Adult 1 Relationship to Student:	☐ Parent ☐ Relative	☐Step Parent☐Friend	☐Foster Pare	ent Hos	st Family er:
Enrolling Adult 2					
Surname:		A			
First Given Name:					
Contact Mobile Number:					
Contact Home Phone:		7	7 /		
Contact Email Address:				7	
Correspondence Address:		14	2/		
Student lives with Adult 2:	□Always	Mostly	Balanced(50%)	Occasionally	□Never
Adult 2 Relationship to Student:	□Parent □Relative	☐ Step Parent	☐ Foster Parent ☐ Self	☐ Host Family ☐ Other:	
Declaration					
Information is collected and handl www.education.vic.gov.au/Pages/s			ls' Privacy Policy, a	vailable here:	
Please also refer to the Victorian health information in schools: www					
I/We confirm that:					
 I am/We are the persor The information in this I/We agree to authorise 	form is true a	nd correct.		c signature.	
Signature of Enrolling Adult:				Date:	//

Date: ____/ ____/

Signature of Enrolling Adult (if applicable):