

APPLICATION for ENROLMENT

Student's Surname	Given Name	Date of Birth	Sex M <input type="checkbox"/> / F <input type="checkbox"/>
Parent/Guardian 1 (Mr/Mrs/Miss/Ms/Other)	Email Address:	Preferred Contact Number:	
Parent/Guardian 2 (Mr/Mrs/Miss/Ms/Other)	Email Address:	Preferred Contact Number:	
Residential Address of Student:			
Seeking Entry Into: <input type="checkbox"/> Year 7 <input type="checkbox"/> Year 8 <input type="checkbox"/> Year 9 <input type="checkbox"/> Year 10 <input type="checkbox"/> Year 11 <input type="checkbox"/> Year 12			
In Year: <input type="checkbox"/> 2018 <input type="checkbox"/> 2019 <input type="checkbox"/> 2020			
Student's current school and year level:			
Are there any Family Court orders regarding the day to day or long term care, welfare and development of the child? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Is your child currently under suspension from a school? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Has your child ever been excluded from a school? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, name of school:			
Names of any siblings currently attending Fremantle College:			
Is your child a Citizen/Permanent Resident of Australia? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, please indicate date entered Australia _____, Visa Sub Class Number _____ and submit the Visa Grant Notification for your child to support your application.			
Does your child have a disability or medical condition? Medical Condition YES <input type="checkbox"/> NO <input type="checkbox"/> Physical YES <input type="checkbox"/> NO <input type="checkbox"/> Intellectual YES <input type="checkbox"/> NO <input type="checkbox"/> Other YES <input type="checkbox"/> NO <input type="checkbox"/> Please outline nature of disability/medical condition: This information will assist the College Principal with considering whether any specific or additional resources are required and available to assist the school with providing the best educational program for your child. Do you intend to apply for the Specialised Learning Program for Students with ASD? YES <input type="checkbox"/> NO <input type="checkbox"/> (See Page 3 of this form)			
Please provide the following 2 forms of proof of address with your application: Primary proof of address (a rates notice or rental agreement) Attached <input type="checkbox"/> Secondary proof of address: (eg: a utility bill or drivers licence). Attached <input type="checkbox"/>			
I declare that the information provided on this form is true. Signature of parent/guardian _____ Date _____			
Thank you for your application. If you also wish to apply for one or more of the Fremantle College Specialist or Academy program please continue with the following pages of this application form.			

Office Use Only Date Received:

In / Out of LIA

Initial:

Contemporary Music		Academic Excellence	
Marine Studies		Performing Arts	
ICT		AFL	
Autism			

School Report		Full pack provided	
NAPLAN		SAER	
Swimming Level		Visa Information	
Visa Information		Autism pack provided	

APPLICATION for SPECIALIST PROGRAMS and ACADEMIES

Only complete the relevant section(s) of this part of the application form for the Specialist Program and/or Academies you are applying for.

Please nominate the **Approved Specialist Program** you are applying for:

- Specialist Contemporary Music Program
- Specialist Marine Studies Program
- Specialist ICT Program
- Autism Extension Program

Please nominate the college **Academy Program** you are applying for:

- Academic Excellence
- Performing Arts Academy
- AFL Academy Boy/Girls

Specialist Contemporary Music Applicants ONLY

Instrument: _____ SIM or other tutor: _____

Name of music school if attended: _____

Performances you have participated in: _____

Other relevant experience: _____

(examples: AMEB grade, read and play notation well, play in local community band, write and record my own material, publishing contemporary digital pieces on Soundcloud etc)

- I understand that successful entrance into this competitive program will be based upon audition and interview.
- I have attached a copy of the most recent school report, and music report if applicable, to this application.

Specialist Marine Studies program Applicants ONLY

Highest Swimming Level attained: _____

Does your child have any physical issues that might impair their ability to swim, snorkel or scuba dive, including respiratory or ear problems?

YES NO If yes, please specify: _____

- If my child is successful at entering this program, I understand that he/she is obliged to attend all excursions and off site learning, some of which will be outside school hours.
- I understand that successful entrance into this competitive program will be based upon interview and having attained a minimum swimming level (Education Dept or equivalent) of **8** or above.

I have attached the following documentation to this application:

- Copy of most recent NAPLAN report
- Documentation indicating highest swimming level attained
- Copy of most recent school report

Specialist ICT Program Applicants ONLY

My child will have a well maintained device (as recommended by Fremantle College and associated software as outlined in the BYOD scheme on the website) in working order with them at all times.

I understand that successful entrance into this competitive program will be based upon my child preparing an ICT project in advance and presenting their implementation of the project at interview, details of which will be provided.

I have attached the following documentation to this application:

- Copy of most recent school report
- Copy of most recent NAPLAN report

Academic Excellence Applicants ONLY

I wish for my child to be considered for Academic Excellence Academy in the following learning areas:

English

Mathematics

Science

Humanities and Social Sciences

I understand that successful entrance into this competitive program will be based upon student achievement.

I have attached the following documentation to this application:

Copy of most recent school report

Copy of most recent NAPLAN report

Additional supporting evidence if applicable ie PEAC report or other Academic testing

Please indicate if you have also applied for the Gifted and Talented Selective Academic Program

Performing Arts Academy Applicants ONLY

If my child is successful at entering this program, I understand that he/she is obliged to attend all rehearsals and subsequent performances, some of which will be outside school hours.

I understand that successful entrance into this competitive program will be based upon an audition workshop.

I have attached a copy of the most recent school report to this application.

AFL Academy Boys/Girls Applicants ONLY

If my child is successful at entering this program, I understand that he/she is obliged to attend all training sessions and subsequent games, mostly held outside school hours.

I understand that successful entrance into this competitive program will be based upon interview and practical testing.

I have attached a copy of the most recent school report to this application.

Specialised Learning Program for Students with Autistic Spectrum Disorder Applicants ONLY

I wish to apply for the Specialised Learning Program for Students with Autistic Spectrum Disorder (SLP ASD) for the intake year above. I confirm that my child meets the following criteria for entry into this program: (please tick all that apply)

Student is eligible for enrolment in Western Australian public schools in years 7-12;

Student has a multidisciplinary diagnosis of Autistic Spectrum Disorder without accompanying intellectual impairment;

Student is academically capable of understanding and coping with grade level content and tasks;

Student experiences significant social, emotional and/or behavioural issues and challenges directly attributed to the impact of autism;

Student independently manages personal care requirements; and

Families can provide reliable transport to and from the college.

I have attached the following documentation to this application.

Most recent medical diagnosis and documentation of Autistic Spectrum Disorder

Copy of most recent school report

(To be completed by student.)

Describe any background, interests, reasons that you believe make you a strong candidate for your chosen Specialist or Academy program at Fremantle College.

PARENT/GUARDIAN DECLARATION:

If this application is successful;

- I accept that in addition to the secondary school fees and charges incurred by families, all Specialist and Academy programs may attract extra charges due to their specialist nature. To support my child's education in his/her special program I commit to pay all associated fees and charges. I understand that my child's ongoing enrolment in the program is dependent upon these fees being paid in full.
- I understand that there may be timetable restrictions preventing my child from accepting more than one Specialist or Academy program.
- I understand that ongoing participation in these programs will depend upon my child maintaining:
 - a satisfactory level of achievement in academic studies
 - an exemplary standard of behaviour and
 - an excellent attendance rate while enrolled at Fremantle College.

I declare that all information provided on this form is true and accurate.

Signature of parent/guardian: _____

Date: _____