

Application for Enrolment

International Students



Please use one form per child and complete clearly in black pen – thank you.

Student Details

Surname	Preferred Name
First Given Name	Other Given Names
VSN (Victorian Student Number – if known)	
Date of Birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Self-described (Please specify)
Country of Birth	Nationality
Religious Affiliation	
Languages Spoken (other than English)	
Year of Entry (e.g. 2015)	Entry Year Level
Current School	
Current Year Level	
Previous Schools and Years of Attendance (where applicable)	
School	Year(s)
School	Year(s)
Currently resides with (please complete details overleaf) <input type="checkbox"/> Both Parents <input type="checkbox"/> Parent 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> local support person	

Referring Agent

Name	
Address	
	City
	Country
Tel	Email
Where will you be residing during your schooling period at Carey?	
With whom?	

ADMISSIONS USE ONLY

Student ID	Status
Date	Action
	Staff Initials

Parent 1

Surname	Title
Preferred Name	First Given Name
Other Given Names	
Relationship to Child	Nationality
Country of Birth	
Languages Spoken (other than English)	
Address	
Postcode	Country
Home Phone	
Home Email	Is this your preferred email? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Phone	Mobile
Business Email	Is this your preferred email? <input type="checkbox"/> Yes <input type="checkbox"/> No
Occupation	Job Title
Employer	

Parent 2

Surname	Title
Preferred Name	First Given Name
Other Given Names	
Relationship to Child	Nationality
Country of Birth	
Languages Spoken (other than English)	
Address	
Postcode	Country
Home Phone	
Home Email	Is this your preferred email? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Phone	Mobile
Business Email	Is this your preferred email? <input type="checkbox"/> Yes <input type="checkbox"/> No
Occupation	Job Title
Employer	

Surname	Title
Preferred Name	First Given Name
Other Given Names	
Relationship to Child	Nationality
Country of Birth	
Languages Spoken (other than English)	
Address	
Postcode	Country
Home Phone	
Home Email	Is this your preferred email? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Phone	Mobile
Business Email	Is this your preferred email? <input type="checkbox"/> Yes <input type="checkbox"/> No
Occupation	Job Title
Employer	

If possible, please provide details of at least two people in Australia who can be contacted in an emergency, should you not be available

Name:	Name:
Relationship:	Relationship:
Phone:	Phone:
Mobile / Alt Phone:	Mobile / Alt Phone:
Address:	Address:

[illegible]

Please note: Full and frank disclosure is required or the enrolment may be compromised.

Medical Information

☐ Please tick here if the student has no existing medial conditions.

Please provide details of medical conditions relevant to the student's care and appropriate management procedures as required.

Medical condition/s

Please specify

Medical condition/s

Please specify

Medical Action Plans

Please tick if the student has any of the following medical conditions. An up-to-date medical action plan must be provided with this form if the student has any of these conditions.

☐ Anaphylaxis ☐ Asthma ☐ Diabetes ☐ Epilepsy

Medical Consent

Please note that as part of the conditions of enrolment you provide the School with your consent to arrange first aid and medical treatment in the event of an emergency and agree to indemnify the School for the cost of such treatment.

☐ Yes I/we further consent for over-the-counter medications to be administered.

☐ No I/we do not consent for over-the-counter medications to be administered.

If no, please advise:

Parent Name

Parent Signature

Date: / /

Family Information

Please complete the appropriate sections below about the student's siblings.

Name of siblings	Date of Birth	Previously at Carey?	Current student at Carey?	Applied to Carey?	House	Currently enrolled at (name of school)?
		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes		
		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes		
		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes		
		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes		

If either parent attended Carey, please provide the following information

Parent 1

Final Year

House

Name during School years

Parent 2

Final Year

House

Name during School years

Is there another relative who is attending, or who has attended Carey? ☐ Yes ☐ No

Name

Final Year

House

Relationship to Student

How did you hear about Carey?

☐ Word of Mouth☐ Media advertisements☐ Open Mornings☐ Website

☐ Agent☐ Education Expo☐ Other, please specify

What are your reasons for seeking entrance to Carey?

☐ Academic Excellence☐ Broad/Balanced Program☐ Co-curricular Activities offered

☐ Co-education☐ Discipline☐ Father/Mother attended Carey☐ Friends at the School

☐ Locality☐ Religious Foundation and Influence☐ Pastoral Care/Wellbeing Program☐ Reputation

Parent 1 Signature

Date

Parent 2 Signature

Date

local support person/Other Signature (if applicable)

Date

Application Checklist

Please supply with this application form:

- a copy of the student's birth certificate or current passport
- a copy of the student's recent academic results/school reports
- Information regarding any English language courses that the student has completed or is undertaking and any associated reports
- English language assessment results (AEAS test preferred)
 - if these are not yet available please give scheduled testing date / /

Please note that payment of the Administration Fee to the School does not guarantee enrolment. The Administration Fee is only payable at the point of acceptance of an offer. The Administration Fee of \$AUD200* is non-refundable and non-transferable.

On acceptance of a provisional Offer of Enrolment a non-refundable and non-transferable fee of \$AUD1,800* for Year 10 – Year 12 entry is payable.

In signing this Application for Enrolment you consent to us using your personal information and the Student's personal information for the purposes of receiving copies of marketing communication

such as our School magazine or invitations to Open Morning, by mail or email. Please let us know if you do not wish to receive any marketing material.

Please send the completed form to::

The Admissions Manager
Carey Baptist Grammar School
349 Barkers Road, Kew, Victoria 3101, Australia
Tel: +61 3 9816 1242
Email: admissions@carey.com.au

For further information please email:
Admissions Office
admissions@carey.com.au

The Application for Enrolment is also available online at carey.com.au

The following School Rules, Policies and Forms can be found on our Website:

- Child Safe Policy
- Reporting Child Abuse Procedure
- Complaints and Appeals Policy
- Overseas Student Transfer Policy

- Student Behaviour
- Uniform and Appearance
- Privacy
- Enrolment Procedure and Policy – International Students
- Fee Schedule and Further Information – International covering:
Annual Fees and Additional Charges, Withdrawal of a Student, Uniform and Books, Digital Learning Program

- Term dates/holidays
- Curriculum (pathways) information (pathways.carey.com.au)

After orientation further School Policies and Information become accessible on CareyLink.

Carey Baptist Grammar School Limited
ABN 83 051 576 062 CRICOS #00135G

* Fees and Condition of Enrolment are subject to change without notice

February 2024