



Application for Enrolment

Student details

Application Year to Commence (i.e. 2019)

Year Level to Commence (i.e. Year 7)

Student's first name

Student's last name

Preferred first name

Residential Address

Post Code

Date of birth

Country of birth

Nationality

Citizenship

Language spoken at home

Religious denomination

Parish and Location

Sacraments received to date

Baptism Yes No

First Communion Yes No

Confirmation Yes No

Name of School currently attending

Current Year Level

Suburb of the School

Year first commenced at an Australian School

Victorian Student Number [VSN]

This information must be completed before this Application can be processed. The VSN can be found on the school report.

Does the student have a Victorian Student Number?

Yes, please specify:

Yes, but the VSN is unknown.

No, the student has not been issued a VSN or the student is from another state.

Family details

Sister/s currently attending the College

Names and Year Levels

Details of: Parent 1 Guardian

(Please select relationship)

Name

Residential Address

Home Telephone No.

Mobile No.

Email address

Occupation/Industry

Religious denomination

Details of: Parent 2 Guardian

(Please select relationship)

Name

Residential Address

Home Telephone No.

Mobile No.

Email address

Occupation/Industry

Religious denomination

Marital status

Married Separated Divorced Widowed DeFacto

Date Received:

Receipt No:

Student No:



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Additional Information

Please indicate any further information concerning the applicant or her family which should be known to the College to help support her in her learning: eg. Please give details of any severe illness, disability, special learning needs, advanced abilities, special skills or funding received. **Full and frank disclosure is required for processing of this application.**

Relatives who are former students

Please indicate if there are any relatives who are former students of the College, their relationship to your daughter and the year they left the College:

Name	Maiden Name	Relationship	Year Left
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Correspondence to be sent to:

Name/s

Mailing Address

Declaration

We agree that the information provided on the application for enrolment is true and correct. I/We agree to be jointly and severally liable for all fees and charges levied for my/our daughter's education. I/We agree and to be bound by the terms and conditions of entry and the relevant policies and procedures of the College.

Both Parents/Guardians must sign and date here:

Date:

Date:

(Please provide explanation if both parents are unable to sign)

How did you hear about Catholic Ladies' College

Reputation

Pupil

Relation has/is attending College

Primary School

Open Day / School Tour

Advertising

Local resident

Social Media

Other

Please return the completed Application Form and Application Fee of \$90 (non-refundable), together with a copy of:

- Your daughter's Birth Certificate, Passport or Certificate of Citizenship

AND a copy of the following documents, if they apply to your daughter:

- Baptism Certificate
- Court Orders relating to Legal Guardianship (where applicable)

To:

The Registrar
Catholic Ladies' College Ltd
19 Diamond Street ELTHAM VIC 3095

Privacy/Collection Statement

Catholic Ladies' College is bound by the National Privacy Principles contained in the Commonwealth Privacy Act. Please refer to our website for the Privacy Policy and Standard Collection Notice of Catholic Ladies' College at www.clc.vic.edu.au



Catholic Ladies' College

Catholic Ladies' College Ltd
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Tradition Of The Sisters Of Charity
19 Diamond Street
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Australia

T 03 9439 4077
F 03 9431 1157
www.clc.vic.edu.au
ABN 44 058 164 891

Remittance Advice when paying by credit card

Catholic Ladies' College Ltd

Date:

For Payment of:

Please debit my credit card for: Amount \$

Charge my credit card type: Visa / Mastercard / Amex

Expiry Date:

-

- - -

Cardholder Name

Signature