



APPLICATION FOR ENROLMENT

CONFIDENTIAL

* ALL sections must be completed

* ALL documentation required before letter of offer will be sent

* Submission of this application does not guarantee enrolment

Student Name:	
Calendar Year of Expected Entry:	
Year Level in which the student is to be enrolled	T <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> Is Student repeating this year? YES <input type="checkbox"/> NO <input type="checkbox"/> Has the student ever been excluded from another school? YES <input type="checkbox"/> NO <input type="checkbox"/>
Other family currently enrolled at Sacred Heart	Name: Name: Name: Name:

A CATHOLIC SCHOOL

This school is part of Catholic Education in the Diocese of Darwin. The school and the Diocese are committed to providing a quality education in a caring environment. A Catholic School is a community of faith and values based on Jesus, his Gospel and the values found there. These are essential to the life of our schools. All students are equally important and the curriculum is directed at the total formation both of the individual and of the school community.

ASSISTANCE WITH COMPLETING THE FORM

If you require assistance completing this form, including translation services, please contact your school.

WHO SHOULD COMPLETE THIS FORM?

Parents/guardians/carers of students or independent student seeking to enrol in Sacred Heart Catholic Primary School within the Diocese of Darwin.

KEEPING STUDENT RECORDS UP-TO-DATE

Please inform your school whenever any information provided on this form (such as contact details, address, and medical information) needs to be changed at a later date.

OFFICE USE ONLY

Date Received:	Possible Learning Support:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Commencement Date:	Special Circumstances:	Yes <input type="checkbox"/> No <input type="checkbox"/>
House:	Parish Member:	Yes <input type="checkbox"/> No <input type="checkbox"/>
MAZE Student Code:	Birth Certificate:	Yes <input type="checkbox"/> No <input type="checkbox"/>
MAZE Family Code:	Baptismal Certificate:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Non-refundable Enrolment Fee Paid: Yes <input type="checkbox"/> No <input type="checkbox"/>	Medicare Immunisation Records :	Yes <input type="checkbox"/> No <input type="checkbox"/>
Receipt No:	Visa/Citizenship Documents:	Yes <input type="checkbox"/> No <input type="checkbox"/>
INTERVIEWED BY:	Academic Reports:	Yes <input type="checkbox"/> No <input type="checkbox"/>
DATE:	NAPLAN Results:	Yes <input type="checkbox"/> No <input type="checkbox"/>
APPROVED BY:	Newsletter List Updated	Yes <input type="checkbox"/> No <input type="checkbox"/>
DATE:	Letter of Offer Sent:	/ /

SECTION 1**STUDENT DETAILS**

Student's Name as recorded on Birth Certificate or, if applicable, on more recent legal document officially recording change of name:

Surname:

First and middle names:

Preferred First Name:

If you believe there is a good reason for the student to be known by some other name in day-to-day school life, inform the principal/delegate of this at time of enrolment interview.

Date of Birth:

Residential Address:

Postcode:

Postal Address: (If different from above)

Postcode:

Is the student in the care of Department of Children and Families? NO YES

If YES – please attach supporting legal documents.

**SECTION 2****STUDENT BACKGROUND INFORMATION**

<p>Student's first language (What was the language/s used most by the student when she was learning to talk?)</p> <p>English <input type="checkbox"/></p> <p>Yes, other _____ (Please specify)</p>	<p>Does the student speak a language other than English at home?</p> <p>No, English only <input type="checkbox"/></p> <p>Other/s _____ (Please specify)</p>
<p>In which country was the student born?</p> <p>Australia <input type="checkbox"/></p> <p>Other _____ (Please specify)</p>	<p>Is the student currently enrolled at another school?</p> <p>No <input type="checkbox"/></p> <p>Yes, other _____ (Please specify)</p>

Student's Indigenous status Is the student of Aboriginal or Torres Strait Islander origin?

No Yes, Torres Strait Islander

Yes, Aboriginal Yes, both Aboriginal & Torres Strait Islander

If YES - Student's Indigenous tribal grouping / clan name / other (if applicable)

If YES - Student's skin name (if applicable) _____

<p>What is the student's residency status?</p> <p>Australian Citizen <input type="checkbox"/></p> <p>Permanent Resident <input type="checkbox"/></p> <p>Temporary Visa Holder <input type="checkbox"/></p>	<p>If born overseas, what date did the student arrive in Australia? / /</p> <p>Visa Expiry Date: / /</p> <p>Visa Code:</p>
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SECTION 3 DETAILS OF STUDENT'S PREVIOUS FORMAL EDUCATION

Details of student's previous school/s

School/Centre/Service	Date of Leaving	Year, Grade or Level attained	State or Territory	Country (if not Australia)
	/ /			
	/ /			
	/ /			

Please attach a copy of the NAPLAN Results

Please attach a copy of previous Achievement Report



SECTION 4

SIBLING INFORMATION

List all children in the family from ELDEST to YOUNGEST – including the enrolling student.

Brother's/Sister's given names	Surname	DOB	School	Current Year Level
1.				
2.				
3.				
4.				
5.				
6.				

	Usual Mode of Transport (Bus/Walk/Car/Bicycle) ** Before/After School Care
To School	
From School	

** Additional enrolment form required. Enrolment at Sacred Heart Catholic School does not guarantee enrolment with Outside School Hours Care (subject to availability)

**Indicate if the student has been affected by or suffers from any of the following?
(Please select Yes or No)**

*Medical plan completed and signed by medical practitioner to be provided	Yes	No
Asthma *	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy/convulsions *	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes *	<input type="checkbox"/>	<input type="checkbox"/>
Anaphylaxis *	<input type="checkbox"/>	<input type="checkbox"/>
Allergies	<input type="checkbox"/>	<input type="checkbox"/>
Heart Condition/Concerns	<input type="checkbox"/>	<input type="checkbox"/>
A.D.D. / A.D.H.D.	<input type="checkbox"/>	<input type="checkbox"/>
ASD	<input type="checkbox"/>	<input type="checkbox"/>
Specific learning difficulty	<input type="checkbox"/>	<input type="checkbox"/>
Other (provide details)		

Does the student suffer from any significant allergy? No Yes If Yes – please specify:

List any medical alerts, diseases, surgery or disorders, or recurring illnesses:

Are there any sports or other physical activities in which the student should NOT participate?

No Yes If Yes – please specify:

Is the student taking any medication regularly? No Yes

If Yes – please specify, and request the *Medication Consent Form* at interview.

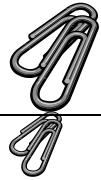
N.B. School staff will not administer any drugs or other medication (including Panadol) except those prescribed by a doctor and supplied in a container bearing a pharmacist’s label stating the student’s name, dosage and time/s for administration.

The request for administration of the medication must be accompanied by a *Medication Consent Form*.

SECTION 6**IMMUNISATIONS**

If "Yes" tick box.

If "No" leave box blank.

**Usual vaccinations up to 5 years of age**

Hepatitis B Vaccine (HEB)	<input type="checkbox"/>	Additional vaccinations	
Combined Diphtheria Tetanus Pertussis (DTP)	<input type="checkbox"/>	Tuberculosis	<input type="checkbox"/>
Poliomyelitis Oral or Injectable (OPV)	<input type="checkbox"/>	Rotavirus	<input type="checkbox"/>
Haemophilus Influenza Type B (HIB)	<input type="checkbox"/>	Diphtheria and Tetanus (CDT)	<input type="checkbox"/>
Measles, Mumps & Rubella (MMR)	<input type="checkbox"/>	Twinrix vaccine (combined Hepatitis A & B vaccine)	<input type="checkbox"/>
Meningococcal Group C (MEN)	<input type="checkbox"/>	Influenza (FLU)	<input type="checkbox"/>
Varicella (Chickenpox) (VZV)	<input type="checkbox"/>		
Pneumococcal (PCV)	<input type="checkbox"/>		

Family Doctor:	Phone Number:
Family Dentist:	Phone Number:
Medicare Number:	Student's Position Number on Card :
Ambulance Cover:	Health Care Card:
Private Health Care Fund:	
Membership Number:	Student's Position Number on Card:

SECTION 7**ADDITIONAL EMERGENCY CONTACTS**

For an emergency where the parent/guardian/carer cannot be contacted, please give details of those to be contacted.

Priority	Name	Emergency Phone 1	Emergency Phone 2	Relationship to Student
1 st				
2 nd				
3 rd				

Please note: Students will not be released into the custody of these or any other persons unless specifically requested by a person whose details appear in Section 13A.

SECTION 8**SPECIAL FAMILY CIRCUMSTANCES**

Please advise any special family circumstances e.g. single parent, dual custody, foster care, access restrictions (give details).

If None, write "None".

If Yes, please request an additional Parent/Guardian/Carer Information Form for completion.

SECTION 9**RELIGION**

Religion: *(Please state :)* _____

Parish or other local religious community _____

Sacraments: *(Attach documentary evidence)* If no sacraments celebrated, tick this box

	Date	Church	Town/Suburb
Baptism			
Confirmation			
Eucharist			

SECTION 10**SPECIAL ASSESSMENT**

Has the student been assessed or treated by any of the following specialist services?

SERVICE	YES	NO	NAME OF CENTRE / PRACTITIONER	DATE OF FIRST VISIT	IS YOUR CHILD ATTENDING NOW?
Child Guidance	<input type="checkbox"/>	<input type="checkbox"/>			
Speech Pathologist	<input type="checkbox"/>	<input type="checkbox"/>			
Occupational Therapist	<input type="checkbox"/>	<input type="checkbox"/>			
Physiotherapist	<input type="checkbox"/>	<input type="checkbox"/>			
Psychiatrist	<input type="checkbox"/>	<input type="checkbox"/>			
Psychologist	<input type="checkbox"/>	<input type="checkbox"/>			
Specialist Clinic	<input type="checkbox"/>	<input type="checkbox"/>			
Audiology Clinic	<input type="checkbox"/>	<input type="checkbox"/>			
Learning Support/Enrichment Teacher	<input type="checkbox"/>	<input type="checkbox"/>			
Paediatrician	<input type="checkbox"/>	<input type="checkbox"/>			
Optometrist	<input type="checkbox"/>	<input type="checkbox"/>			
Education Guidance Officer	<input type="checkbox"/>	<input type="checkbox"/>			
Other, please specify					

SECTION 11**DISABILITY VERIFICATION INFORMATION**

Does the student have a disability that has been formally verified or ascertained through profiling for an Education Adjustment Program (EAP)? Yes No

If yes, please indicate below the student's current ascertained/verified diagnosis.

(Please supply documentation)



I give permission for copies of my child’s school records to be transferred from

..... to Sacred Heart Catholic Primary School.

- Latest School report
- Year 3 NAPLAN Test Results
- Year 5 NAPLAN Test Results
- Specialist Reports
- Individual Education Plan/s
- Inspire Documentation (CEONT)

I give permission to Sacred Heart Catholic Primary School to contact my Child’s previous School to discuss their progress.

Parent’s Signature: _____

Child’s Name: _____

Child’s Date of Birth: _____

Date: _____

Indicate any other physical, social/emotional or intellectual conditions which may affect learning or other School activities or which may require additional or emergency attention at school.

NOTE: Read instructions for Parts A, B, C, and D before beginning this section

PART A

**DETAILS OF THE PERSON(S) RESPONSIBLE FOR THE DAY-TO-DAY CARE
OF THE STUDENT AND WITH WHOM THE STUDENT LIVES**

Parent / Guardian / Carer No 1	Parent / Guardian / Carer No 2
Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>	Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>
Mr <input type="checkbox"/> Rev <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>	Mr <input type="checkbox"/> Rev <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>
Given Name/s	Given Name/s
Surname	Surname
Preferred Name:	Preferred Name:
Marital Status:	Marital Status:
Religion	Religion
Parish	Parish
Relationship to Student:	Relationship to Student:
Mother <input type="checkbox"/> Father <input type="checkbox"/> Step-Mother <input type="checkbox"/>	Mother <input type="checkbox"/> Father <input type="checkbox"/> Step-Mother <input type="checkbox"/>
Step-Father <input type="checkbox"/> Guardian <input type="checkbox"/> Carer <input type="checkbox"/>	Step-Father <input type="checkbox"/> Guardian <input type="checkbox"/> Carer <input type="checkbox"/>
Other <input type="checkbox"/> <i>Please specify:</i>	Other <input type="checkbox"/> <i>Please specify:</i>
Residential Address:	Residential Address:
City	City
State Post Code	State Post Code
Postal Address (if different from above):	Postal Address (if different from above):
City	City
State Post Code	State Post Code
Occupation:	Occupation:
Employer:	Employer:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
Mobile Phone:	Mobile Phone:
E-mail Address:	E-mail Address:
Preferred e-mail address for weekly School Newsletter (if different from above)	Preferred e-mail address for weekly School Newsletter (if different from above)
Nationality:	Nationality:
Country of Birth:	Country of Birth:
Language spoken:	Language spoken:
Past student of this school? Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Past student of this school? Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Aboriginal/Torres Strait Islander Culture? Yes <input type="checkbox"/> No <input type="checkbox"/>	Aboriginal/Torres Strait Islander Culture? Yes <input type="checkbox"/> No <input type="checkbox"/>

PART B Parent / Guardian / Carer's regular involvement in School activities.

(Please indicate in boxes if one or both of you would like to contribute to the life of the School in any of these ways. Note that your assistance may not be required immediately in some categories, and a current NT Working with Children Clearance or Ochre Card may need to be provided)

P & F Committee Member <input type="checkbox"/>	School Board Member <input type="checkbox"/>
Classroom Assistance <input type="checkbox"/>	
Extra-curricular (e.g. Sport) <input type="checkbox"/>	- Please Specify:
None at this time <input type="checkbox"/>	

PART C COLLECTION OF DATA ON PARENT BACKGROUNDS

The Federal Government requires schools to collect information from parents in relation to their educational background and occupation. The information collected is used in the reporting of student outcomes against the “National Goals for schooling in the 21st Century”, including the reporting of outcomes of the Year 9 Literacy and Numeracy Testing. (This testing occurred for the first time for Year 9 in May, 2008.)

Do the Mother/Guardian or the Father /Guardian speak a language other than English at home?

	MOTHER/GUARDIAN 1	FATHER/GUARDIAN 2
English Only <input type="checkbox"/> <input type="checkbox"/>
Other <input type="checkbox"/> <input type="checkbox"/>
Please Specify/.....	

What is the highest year of primary or secondary school the parents/guardians have completed?

Please “√” the appropriate box.

	MOTHER/GUARDIAN 1	FATHER/GUARDIAN 2
Year 12 or equivalent <input type="checkbox"/> <input type="checkbox"/>
Year 11 or equivalent <input type="checkbox"/> <input type="checkbox"/>
Year 10 or equivalent <input type="checkbox"/> <input type="checkbox"/>
Year 9 or equivalent <input type="checkbox"/> <input type="checkbox"/>

What is the level of the highest qualification the parents/guardians have completed?

	MOTHER/GUARDIAN 1	FATHER/GUARDIAN 2
Bachelor degree or above.....	<input type="checkbox"/>	<input type="checkbox"/>
Advanced diploma/Diploma.....	<input type="checkbox"/>	<input type="checkbox"/>
Certificate I to IV..... (Including trade certificate)	<input type="checkbox"/>	<input type="checkbox"/>
No non-school qualification.....	<input type="checkbox"/>	<input type="checkbox"/>

For the next questions, please select the appropriate parental occupation group from the list on the following page.

- If you are not currently in **paid** work but have had a job in the last 12 months or have retired in the last 12 months, please use your last occupation.
- If you have **not** been in **paid** work in the last **12 months**, enter ‘8’ in the box below.

	<u>Code</u>	<u>Occupation</u>
What is the occupation group of the parent/guardian 1?	<input type="text"/>	_____
What is the occupation group of the parent/guardian 2?	<input type="text"/>	_____

List of Parental Occupation Groups

Group 1: Senior management in large business organisation, government administration and defence, and qualified professionals

Senior executive/manager/department head in industry, commerce, media or other large organisation.
Public service manager (Section head or above), regional director, health/education/police/fire services administrator
Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]
Defence Forces Commissioned Officer
Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others.
Health, Education, Law, Social Welfare, Engineering, Science, Computing professional
Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]
Air/sea transport [aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller]

Group 2: Other business managers, arts/media/sportspersons and associate professionals

Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business
Specialist manager [finance/engineering/production/personnel/industrial relations/sales/marketing]
Financial services manager [bank branch manager, finance/investment/insurance broker, credit/loans officer]
Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]
Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official]
Associate professionals generally have diploma/technical qualifications and support managers and professionals.
Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional
Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]
Defence Forces senior Non-Commissioned Officer

Group 3: Tradesmen/women, clerks and skilled office, sales and service staff

Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.
Clerks [bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk]
Skilled office, sales and service staff.
Office [secretary, personal assistant, desktop publishing operator, switchboard operator]
Sales [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]
Service [aged/disabled/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]

Group 4: Machine operators, hospitality staff, assistants, labourers and related workers

Drivers, mobile plant, production/processing machinery and other machinery operators.
Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]
Office assistants, sales assistants and other assistants.
Office [typist, word processing/data entry/business machine operator, receptionist, office assistant]
Sales [sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, shelf stacker]
Assistant/aide [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]
Labourers and related workers
Defence Forces ranks below senior NCO not included above
Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]
Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]

STUDENT NAME:		
YEAR LEVEL		YEAR OF ENTRY

The **Parties** to this Contract of Enrolment are the

Please print full name

_____ Mother/Guardian/Carer,

Please print full name

_____ Father/Guardian/Carer

And the School, as represented by the Principal.

- I/we understand and accept that Sacred Heart Catholic School (herein known as the School) is a Christian community in which students are given the opportunity to deepen their understanding of Catholic beliefs, clarify their values and develop real and practical concern for others. The School provides an environment where Gospel values are lived out, allowing the students to experience the hope and optimism of the Gospel message of Jesus Christ. I/we agree to support in every possible way this religious dimension of the School.
- I/we accept that the student is admitted to the School on the condition that they will abide by the School rules, codes of behaviour and policies, including those regarding curriculum, discipline, dress, conduct and well-being and that these processes may be altered, using appropriate processes.
- I/we realise that in sending my child to Sacred Heart Catholic School, I am undertaking certain financial commitments regarding school fees, uniforms etc. I agree that Fees and Levies as determined by Catholic Education Northern Territory and approved by the School Board, will be paid on receipt of invoice. I also understand that pro-rata fees are payable for students commencing or leaving during term. If at any time and for any reason I should find myself unable to meet financial obligations in full, I agree to contact the Finance Department or Principal to make special interim arrangements. I understand that failure to do so may place the debt with a debt collection agency in order to recover the fees.
- I/we agree that my child will take an active part in various activities, including co-curricular, that are run as part of the School educational program, and that I will ensure their attendance at these activities.
- I/we understand the importance of parental involvement with the education of my child. I agree to assist in some capacity and understand that some commitment will be expected of me.
- I/we accept that during the time the student attends the School they will live in the care and control of their family as described in the Student Enrolment Application Form and that any proposed changes in this regard must be notified to the School promptly in writing.
- I/we understand and accept that the completion of this enrolment form does not guarantee enrolment.
- I/we understand that attendance at an enrolment interview does not guarantee an enrolment offer being made.
- I/we have completed this application form fully and to the best of my/our knowledge. Further, I/we acknowledge and accept that if it can be demonstrated that relevant information has been withheld during the application process, especially in relation to the student's individual needs, medical conditions, health care requirements and Parenting Orders, then the enrolment offer may be refused or terminated on these grounds.

Consents

1. In the event of any illness or injury requiring urgent medical treatment I/we consent for medical and/or hospital attention to be sought. Any medication (including Panadol) that is to be administered at school must be supplied in the original packaging bearing a pharmacist's label stating the student's name, dosage and time/s for administration. The request for administration of the medication must be accompanied by a *Medication Consent Form*.

YES NO

2. I/we consent to the student being identified (photographed and/or named) in any School or Catholic Education related publications, including a School Year Book, Newsletters, audio-visual representations and records of achievement. I/we consent to the student being identified (photographed and/or named) on the School website, Facebook site or on any Catholic Education related website or marketing tool.

YES NO

Mother/Guardian/Carer's
name: *Please print in full*

Signature

Date

Father/Guardian/Carer's name:
Please print in full

Signature

Date

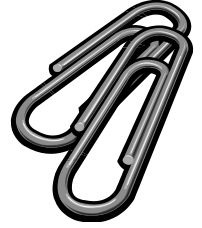
Principal / Delegate's name:

Signature

Date

DOCUMENT CHECKLIST

When applying to enrol your child at this school, please check that you have provided copies of the following: -



- Birth certificate
- Medicare Immunisation History Statement
- Sacramental certificates
- Copy of latest school report
- Copy of NAPLAN Results
- Documentation relating to special needs (any reports, action plans, assessments, etc.)
- Court orders (if applicable)
- Copy of Current Centrelink Concession Card (if applicable)

Please ensure the following has been completed at the time of lodgement:-

- Non-refundable Enrolment Fee Paid
- Enrolment Contract has been read in full and signed by guardians

If your child is NOT an Australian Citizen, you will need to provide:

- Passport or travel documents
- Current visa and previous visas (if applicable)

In addition, if your child is a temporary visa holder you will also need to provide:

- Authority to Enrol or evidence of permission to transfer provided by the International Student Centre (If holding an International full fee student visa, sub-class 571P)
- Authority to Enrol for visitor and temporary resident holders may be required (other than sub-class 571P referred to above) issued by the Temporary Visa Holders Program Unit
- Evidence of the visa the student has applied for (if the student holds a bridging visa)



2024 Term Dates

School Office Reopens	Tuesday 16 January
Australia Day Holiday	Friday 26 January
All Students Resume Transition to Year 6	Wednesday 31 January

TERM 1 **Wednesday 31 January – Friday 5 April**

Good Friday	Friday 29 March
Easter Monday	Monday 1 April

Mid-semester break Monday 8 April – Friday 12 April

TERM 2 **Monday 15 April – Friday 21 June**

Anzac Day	Thursday 25 April
May Day Holiday	Monday 6 May
King's Birthday Holiday	Monday 10 June

Semester break Monday 24 June - Friday 11 July

TERM 3 **Tuesday 16 July – Friday 20 September**

Darwin Show Day	Friday 26 July
Picnic Day Holiday	Monday 5 August

Mid-semester break Monday 23 September - Friday 4 October

TERM 4 **Monday 7 October - Thursday 12 December**

Semester break Monday 16 December - Tuesday 28 January 2025



ENROLMENT POLICY

Policy

Sacred Heart Catholic Primary School is a Catholic Faith community living Christian values within a wider community. We enrol Catholic children and non-Catholic children whose parents value and support the mission of our school.

Eligibility

Children need to turn five on or before 30th June in the year they are enrolled in Transition.

Procedure

Enrolment applications are available from the school and from the school website. All relevant documentation must be completed and returned to school, along with a \$100 per family enrolment fee prior to the scheduling of an enrolment interview. The enrolment fee is non-refundable and is deducted from the first term's fees.

All Catholic children living in the parish will be given the opportunity to enrol at Sacred Heart Catholic School.

An application for enrolment must be completed for each child to be enrolled.

Enrolment does not automatically follow as a result of an application. As there are limits to class sizes, children may be placed on a waiting list. Preference will be given to:

- Children who enter Transition through the Early Learning Centre
- Siblings of students already enrolled at Sacred Heart Catholic School
- Children of Catholic families within the Parish
- Non-Catholic enrolments may be considered, provided the parents are able to satisfy the school leadership team of their commitment and understanding of the Gospel values. Such enrolments will be accepted on the understanding that children participate in the Religious Education Program of Sacred Heart Catholic School.

Enrolments from outside the parish will be considered for pastoral reasons at the discretion of the Principal. In assessing these applications, the effect on neighbouring Catholic schools will be taken into account.

Catholic children with special needs who are residents in the parish will be enrolled according to the school's ability to provide a quality education for them. This will be assessed using the "Special Needs Enrolment Policy" set out by the Northern Territory Catholic Education Office.

Enrolment is subject to an interview with the Principal or member of the Leadership Team. Original birth and baptism certificates are required at the interview. Families with children not born in Australia, are required to provide passport and visa documents. Sacred Heart Catholic School follows NT Catholic Education and NT Department of Education guidelines with regard to enrolling overseas students.

Support of the school

If the application is accepted, it is understood that parents will comply with the spirit of the school's Mission Statement by:

- ✚ Supporting and encouraging Gospel values and the standards or behaviour that those imply
 - ✚ Understanding and supporting school goals and programme.
 - ✚ Accepting and supporting school rules, school policies and procedures
 - ✚ Co-operating with regulations set down from time to time by the school administration. Such regulations are designed to ensure the safety of all and the efficient management of school facilities
 - ✚ Working in partnership with staff
 - ✚ Accepting that children who attend Sacred Heart will partake fully in every aspect of the school program
 - ✚ Accepting the responsibility to be active members of the school community; to pay fees and school levies set annually in consultation with the School Board and listed in the Information Booklet for families.
 - ✚ Maintaining regular communication with the school. Families with low incomes are welcome to discuss accounts available with the Principal. No applicant will be excluded because of inability to pay full fees.
 - ✚ Contributing to fundraising, working bees and the social development of the School Community.
 - ✚ Participating in the form of teacher interviews, class meetings, sacramental programs and various classroom involvement
 - ✚ Ensuring children wear appropriate and correct school uniform each day and arrive promptly to school each morning
 - ✚ Assisting wherever possible and supporting the activities and fund raising efforts of the Parents & Friends Association.
- Enrolment in a Catholic primary school does not guarantee an automatic admission to a Catholic secondary school. A separate enrolment for education beyond Year 6 needs to be completed at the preferred school.



SCHOOL FEES AND CHARGES 2024

	Per Fortnight	Per Term	Per Year
1 Child	125.05	625.25	2,501.00
2 Children	226.60	1,133.00	4,532.00
3 Children	320.90	1,604.50	6,418.00
4 Children	355.75	1,778.75	7,115.00

FEES AND LEVIES:

TUITION FEE

\$1450.00 per annum
(per child)

RESOURCES & EQUIPM LEVY

\$615.00 per annum
(per child)

IT LEVY

\$111.00 per child
(per child)

MAINTENANCE LEVY

\$325.00 per annum
(per family)

OPTIONAL : **Building Fund**

\$200.00 per annum
(per family)

Payment to the building fund is voluntary & tax deductible.

N.B.

- * A 5% discount applies when total annual fees are paid in full in term 1.*
- * A Sibling discount applies if you have more than one child attending Catholic Schools in the NT.*
- * Fees will be charged on a pro-rata basis of enrolment.*
- * Four weeks notice of termination of enrolment is required or full fees may be charged at the discretion of the Principal.*

Sacred Heart Catholic Primary School 34 Emery Avenue, Woodroffe |

PO Box 271, Palmerston, 0831, Northern Territory

Phone: 08 8924 8700 | Fax: 08 8924 8788 Email:

admin.shps@nt.catholic.edu.au | www.shpsnt.catholic.edu.au



Dear Families

In our effort to send out School Fee accounts promptly and accurately, we request that families provide information regarding siblings attending other Catholic School in the NT.

Sibling Discounts apply if you have more than 1 child studying at a Catholic School in the NT.

To be eligible please fill in the tear off slip below and return it to the front office. Families attending Sacred Heart Catholic School with more than 1 child also need to complete this form.



Children attending Sacred Heart Catholic Primary School

Student Name	Year Level
1.	
2.	
3.	
4.	

Children attending another Catholic School in NT

Student Name	School	Year Level
1.		
2.		
3.		
4.		

SACRED HEART
CATHOLIC PRIMARY SCHOOL



**SACRED HEART CATHOLIC
PRIMARY SCHOOL**

PO Box 271 Palmerston NT 0831
P 08 8924 8700 F 08 8924 8788
Email: admin.shps@nt.catholic.edu.au

Direct Debit Request

**Request and Authority to debit the account named below to pay
Sacred Heart Catholic Primary School**

**Request and Authority
to debit**

Your Surname: _____

Your Given names: _____ "you"

Child's Full names: _____ (SF / ASC / ELC)

Child's Full names: _____ (SF / ASC / ELC)

Child's Full names: _____ (SF / ASC / ELC)

request and authorise Sacred Heart Catholic Primary School to arrange, through its own financial institution, a debit to your nominated account any amount Sacred Heart Catholic Primary School has deemed payable by *you*.

This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from *your* account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

**Insert the name and
address of financial
institution at which
account is held**

Financial institution name: _____

Address: _____

**Insert details of
account to be debited**

Name/s on account: _____

BSB number (Must be 6 Digits): |_|_|_|_| - |_|_|_|_|

Account number: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Start date/day for deduction: _____

Frequency (please circle): weekly / fortnightly / monthly / termly

Acknowledgment

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Sacred Heart Catholic Primary School as set out in this Request and in your Direct Debit Request Agreement.

**Insert your signature
and address**

Signature _____
(sign and print full name)

Address _____

Date ___ / ___ / ___

**Second account
signatory (if required)**

Signature _____
(sign and print full name)

Address _____

Date ___ / ___ / ___



NT Age of Entry & School Years for 2024

In the Northern Territory, these are the normal year levels for each age; if your child's date of birth is near the cut-off date for a particular year level, it may mean that factors such as stage of development, maturity and social interactive skills may see your child at a grade level below the one listed for their date of birth.

Year Born	Age Turning by 30 th June 2024	Year Level
2021	3	Early Learning Centre
2020	4	Early Learning Centre
2019	5	Transition
2018	6	1
2017	7	2
2016	8	3
2015	9	4
2014	10	5
2013	11	6
2012	12	Yr 7 at Middle School



SCHOOL UNIFORM 2024

It is an expectation that **full school uniform will be always worn** unless notified otherwise in an official school newsletter.

GIRLS: A checked dress with extended shoulder line, dropped waist with two inverted pleats, **or** Red Polo Shirt, Black Taslon or Micro-Fibre shorts or skorts which are available from school.

BOYS: Red polo shirt available from school. Black Micro-Fibre shorts which are available from school or black Stubbies/Ruggers available from Big W, K-Mart, Target and Lowes.

- **All shorts are to be above the knees, not at or below.**
- **No other shorts are acceptable.**

FOOTWEAR



Our school uniform policy will be strictly enforced. All children are to wear **PLAIN BLACK LEATHER UPPER SCHOOL SHOES**. These may be the hard top traditional style or sports shoes which are black – but may not be adorned with stripes, logos, etc. They **MUST** be all black.

Due to Work Health & Safety Requirements, slip on shoes, baby doll styles, (which expose the top of the foot) and canvas Volley type shoes are not acceptable. Plain white socks without writing or logos are to be worn.

HATS

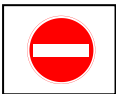


As outlined in our Sun Smart Policy, it is **compulsory** for the black brimmed hat (available from school) to be worn at all times on the playground, oval etc. and recommended that it be worn to and from school if walking in the sun.

HAIR ACCESSORIES should be simple and either red, black or white in colour.

JEWELLERY AND MAKE UP

Watches and earrings may be worn (studs or sleepers only and no more than one earring per ear is permitted). One signet ring may be worn but should be removed in sporting activities. Crosses or crucifixes may be worn.



Bracelets, friendship bands and anklets are not part of our uniform. In the first instance students will be asked to remove the offending items. After that the items will be confiscated and can only be collected by parents from Mr Versteegh

Painted fingernails, toenails, make up and bright coloured dyed hair is not permitted.

Sacred Heart Uniform Prices 2024	
Red polo shirts/sports polo	\$30.00 each
Black microfibre shorts	\$20.00
Black skorts	\$20.00
Red Fleecy jacket with zip	\$25.00
Red V necked fleecy lined jumper	\$20.00
Broad brimmed hats	\$10.00
Library Bag	\$7.00
Year 6 Commemorative polo shirt	\$40.00
Eftpos, credit card, cash or cheque accepted	



Acceptable Internet Use Agreement

Parents are advised that Internet access and use of computer facilities is available to staff and students at Sacred Heart Catholic Primary School.

The Internet is an electronic highway connecting thousands of computers all over the world linking millions of subscribers. Students have access to e-mail, bulletin boards, newsgroups and the World Wide Web. We are very pleased to offer this level of access and believe the Internet offers vast, diverse, and unique resources to both students and teachers. Our goal in providing this service is to promote educational excellence by facilitating resource sharing, research, innovation and communication.

This School follows the Catholic Education Office principles, policy and procedures for computer facilities and external networks. People using our facilities must take responsibility for their own actions. To ensure you and your children understand what is expected, we ask you to read, sign, and return this Acceptable Use Policy.

Please read the following points carefully before verifying you understand your child's responsibilities. If you are unsure about any points, please contact the school before signing the policy. Teachers will ensure that students understand their responsibilities at a level appropriate to the child's age before using the computer facilities and external networks.

It is acceptable to:

Use the Internet for research on any information that relates to your education at school, and to communicate with your peers, teachers or other persons who are involved in your education.

It is unacceptable to:

Breach any laws, such as copyright (including software) or undertake any unlawful activity as defined in Commonwealth or Territory laws;

Transmit or deliberately access and/or receive material that may be considered inappropriate in that it may be of a threatening, sexually explicit, harassing, offensive or discriminatory nature, or material that may be harmful whether physically or emotionally to others;

Use material downloaded from a network without recording the source;

Interfere with or disrupt any other users on the network through your activities;

Place your personal details or photographs on the Internet or details of any other person without authorisation;

Reveal your password to anyone not authorised to receive it, nor must you obtain or use anyone else's password.

I declare that I have read and understood this Acceptable Use Policy for Computer Facilities and External Networks at Sacred Heart Catholic Primary School, and that I have explained this to my child in order that he/she is aware of and understands the Acceptable Use Policy.

Parent/guardian signature:

Parent/guardian signature:

Student name:

Student signature:



Dear Families,

Many of you will know someone who is affected by anaphylaxis, a life threatening allergic reaction. Our school does its best to be an allergy aware school. Staff have had training in severe allergy management and we have implemented lots of strategies to help keep students at risk of anaphylaxis as safe as we can. We have some students who live with the real risk of an anaphylaxis reaction to foods. In the past we have requested that nuts are not provided as a food at Sacred Heart Catholic School, due to the risk of food allergies for some students.

We have a “Nut Free” approach in ALL classrooms. The only way to manage a food allergy is avoidance of the allergen. While we have implemented several strategies to help prevent a severe allergic reaction, we can never totally eliminate the risk of an anaphylaxis but we can all do things that will help lessen the risk. Please consider the children with food allergies when packing your child’s lunch or when sending in food for any occasion, including school excursions. The school canteen, Early Learning Centre and Outside School Hours Care Service has removed foods containing nuts as a safety measure. Foods that ‘may contain traces of nuts’ are fine for the nonallergic students to consume at school as long as they do not share food.

Class groups that have food allergic students will receive a class note asking parents to not send in peanut butter sandwiches, nut bars, Nutella or egg sandwiches as young children can be messy eaters and not contain their food. Children will be asked to wash their hands after eating and desk surfaces will be wiped down if children eat at their desks.

We appreciate your support in providing a safe environment for all of our students.

Kind Regards,

Stephen Versteegh
Principal



Dear Parents and Guardians

In addition to copyright law and individual agreements with copyright owners, Sacred Heart Catholic Primary School will only supply material for publications following consultation with the appropriate nominated individual/s.

Publications encompasses all forms of transmissions whereby material is made widely available, including print and electronic publication, broadcast, telecast, public exhibitions and web dissemination. Publication may be through sale of not for profit distribution.

By signing this form, I give permission with the understanding that this material is supplied to Sacred Heart Catholic Primary School and/or the Catholic Education Office, Darwin, in good faith and will not be used in any way that may cause embarrassment, or offend the sensitivities of the nominated individual/s. In addition, Sacred Heart Catholic Primary School and the Catholic Education Office will not use this material for any other purpose, nor make any copies of the material other than those stated below, and they will not manipulate or change the images or sounds without permission. Sacred Heart Catholic Primary School cannot take any responsibility for third party use of names and images.

Therefore we request parents complete the consent for publication of student names, photographs of students and student work for Sacred Heart Catholic Primary School and CEO publications (e.g. newsletters and displays), school and/or CEO Websites and other marketing through print, audio visual and social media.

I understand that my child's name and/or image may be used and hereby grant permission for use of

Please choose one:

- Name and photo
- Name only (please indicate if only first name is to be used)
- Photo only
- NO USE OF PHOTO OR NAME PERMITTED

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please choose as required:

- Sacred Heart Class Dojo Communications
- Sacred Heart Catholic Primary School Website.....
- Sacred Heart Catholic Primary School Print Publications.....
- Television, Radio and Print Media attending Sacred Heart Catholic Primary School Events.....
- CEO General Catholic School TV commercial.....
- CEO Print Publications.....
- CEO Website.....
- **ALL OF THE ABOVE**.....
- NO PUBLICATIONS

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

STUDENT NAME: _____

YEAR LEVEL: _____ ROOM: _____

FULL NAME PARENT/GUARDIAN: _____

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CONTACT NUMBER: _____

PARENT/GUARDIAN SIGNATURE: _____

Date: ____/____/____