**Enrolment enquiry** form

**We welcome enrolment enquiries for our College throughout the year. To enable us to consider the enrolment of your young person, please fill in all sections of this form and return it to our College office or via email to gsc@twb.catholic.edu.au.**

**Data collection notice**

Good Samaritan College (GSC) collects and records personal, sensitive and health information from young people and their caregivers before and during the course of a young person’s enrolment.

## **Purpose of collection**

The primary purpose of collecting and recording this information is to enable the provision of quality Catholic education to students. In addition, some of the information that is collected and recorded is to satisfy GSC’s legal obligations and to enable the College to discharge its duty of care to students, parents and caregivers.

## **Disclosure of information**

This information may be disclosed by us for administrative, educational, health and safety purposes to others including, but not limited to, personnel within the Toowoomba Catholic Schools Office, other schools, medical practitioners, child safety authorities and people providing services to schools such as specialist visiting teachers and consultants.

## **Security**

Your information will be securely filed by the College in alignment with our [Privacy Statement](https://www.twb.catholic.edu.au/media/3911/tcsprivacystatement2020.pdf).

## **Our privacy position**

Toowoomba Catholic Schools Office and schools are bound by the *Privacy Amendment (Private Sector) Act 2000*, and have adopted the ten (10) National Privacy Principles. Further information can be found in our [Privacy Statement](https://www.twb.catholic.edu.au/media/3911/tcsprivacystatement2020.pdf).

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| --- |
| **Permission of parent/carer to collect and share information** |
| I, the undersigned give permission for Good Samaritan College to seek and store information about the young person named below, before and during the course of the young person’s enrolment.  |
| **Young person’s name** |   |
| **Name of parent/carer** |   |
| **Signature of parent/carer** |   |
| **Date** |   |

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| **Young person’s details** |
| **Name of young person** |
|   |
| **Residential address (Young person must live within the Toowoomba city area if they require GSC buses to transport them to and from their place of residence)** |
|   |
| **Young person’s phone number** |   |
| **Date of birth (young person must be 12-17 years at time of enrolment)** |   |
| **Gender** | [ ]  male [ ]  female [ ]  other |
| **Is the young person…** | [ ]  Aboriginal [ ]  Torres Strait Islander[ ]  Aboriginal and Torres Strait Islander[ ]  none of these |
| **Does the young person have a disability or medical needs?** | [ ]  yes [ ]  no |
| **If yes, please provide details.** |
|   |
| **Name of last school attended** |
|   |
| **Year level** |   |
| **When was the young person last at school?** |   |
| **Parent/carers details** |
| **Name of parent/carer** |
|   |
| **Relationship to young person eg mother, uncle** |
|   |
| **Parent/carer’s phone number** |   |

**As a small College, and due to having a significant wait list, we request detailed information in order to be able to progress and consider enrolment.**

**In our experience, having a comprehensive understanding of the needs of our young people betters their chances of transitioning successfully the College.**

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| --- | --- | --- | --- | --- |
| **Key area** | **no concerns** | **some concerns** | **moderate concerns** | **significant concerns** |
| **attendance at school** | [ ]  | [ ]  | [ ]  | [ ]  |
| **engagement in learning** | [ ]  | [ ]  | [ ]  | [ ]  |
| **safety - self** | [ ]  | [ ]  | [ ]  | [ ]  |
| **safety - others** | [ ]  | [ ]  | [ ]  | [ ]  |
| **literacy skills** | [ ]  | [ ]  | [ ]  | [ ]  |
| **numeracy skills** | [ ]  | [ ]  | [ ]  | [ ]  |
| **emotional regulation** | [ ]  | [ ]  | [ ]  | [ ]  |
| **social skills** | [ ]  | [ ]  | [ ]  | [ ]  |
| **mental health** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Key area** | **Comments** |
| **strengths** |   |
| **interests** |   |
| **extra-curricular (sports, community groups)** |   |
| **career aspirations** |   |
| **work or home commitments** |   |
| **family circumstances (siblings, living arrangements)** |   |
| **Why is this young person seeking an enrolment in an alternative educational setting?** |   |
| **Why is this young person seeking an enrolment in a Catholic college?** |   |

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| **Is there any other information that you would like us to know or consider about your young person?** |
|   |
| **Name of parent/carer** |   |
| **Signature of parent/carer** |  |
| **Date** |   |

**Please return your completed enquiry form to our College office or via email to** **gsc@twb.catholic.edu.au****.**

**A member of the Good Samaritan College team will get back to you to arrange a meeting time after we have contacted your young person’s last school and any other relevant organisations.**