



# Student and Family Details

**It is important that you complete all sections of the form in full & provide signatures where requested.**  
**THE COLLEGE RESERVES THE RIGHT TO CORRESPOND WITH BOTH PARENTS OF THE ENROLLED STUDENT IF THE NEED ARISES, UNLESS THE COLLEGE HAS BEEN GIVEN FORMAL NOTICE OF LEGALLY BINDING RESTRICTIONS ON SUCH COMMUNICATION.**

The signatory on this form is responsible for supplying accurate and complete information

Please email this form to [enrolments@mta.qld.edu.au](mailto:enrolments@mta.qld.edu.au)

<b>STUDENT DETAILS:</b>			
<b>Student Code:</b>		<b>Family Code:</b>	
<b>Date of Commencement:</b>		<b>HR Group:</b>	
<b>Year Level at entry:</b>			
Surname:		Given Names:	
Preferred Name:		Date of Birth:	
Home Address:			
Religion:		Parish:	
Sacraments Received:	<input type="checkbox"/> Baptism	<input type="checkbox"/> Reconciliation	<input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation
Current School:		No of years attended:	
Previous School:		No of years attended:	
Transport:	<input type="checkbox"/> Car	<input type="checkbox"/> Train	<input type="checkbox"/> Walk <input type="checkbox"/> Bus No: _____

<b>RESIDENTIAL STATUS:</b>			
*Country of Birth:			
If student was not born in Australia, Exact Full Date of Arrival :			
Type of Resident	<input type="checkbox"/> Permanent	<input type="checkbox"/> Temporary	Australian Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
*Is the student Aboriginal?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	*Torres Strait Islander? <input type="checkbox"/> Yes <input type="checkbox"/> No
Main language spoken at home:		Secondary Language spoken at home:	

<b>LIVING ARRANGEMENTS:</b>	
Does the student live with both parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If NO, with whom does she reside:	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both Parents (Shared) <input type="checkbox"/> Mother / Stepfather <input type="checkbox"/> Father / Stepmother <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Grandparents <input type="checkbox"/> Other _____
If the student changes her place of residence regularly (eg: week about), please indicate and give details and provide all addresses on Page 3:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any special conditions relating to the student's living arrangements and/or parental contact with the student of which the College should be aware please indicate and give details:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are there any Family Court Orders relating to this student, please indicate. <b>Please provide a copy to the Principal.</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**ALLOWANCES RECEIVED:**

Does the student receive ABSTUDY?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**MEDICAL DETAILS:**

Please outline vision, hearing, speech or other health related problems and any regular medication taken. *If your daughter requires a medical management plan e.g. diabetes, epilepsy, anaphylactic shock please outline in FORM M:*


Name of Doctor:		Doctor's Phone No:	
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**SISTER/S CURRENTLY ATTENDING MOUNT ALVERNIA COLLEGE:**

Name:		Home Room:	
Name:		Home Room:	
Name:		Home Room:	

**SISTER/S PAST STUDENTS OF MOUNT ALVERNIA COLLEGE:**

Name:		Years Attended:	
Name:		Years Attended:	
Name:		Years Attended:	
Is the student's mother or guardian a past student of the College?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Mother's Surname at School:		Years Attended:	

**SISTER/S FUTURE STUDENTS OF MOUNT ALVERNIA COLLEGE:**

Name:		Year to Commence:	
Name:		Year to Commence:	
Name:		Year to Commence:	

**ADDITIONAL INFORMATION:**

Please outline any additional information you think necessary:


**CONSENT:**

I/We consent to photos of my/our child engaged in school activities appearing in multi-media articles as the college deems suitable.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**Parent/Guardian Signature:** \_\_\_\_\_

I/We give permission for my/our child to go on minor excursions and sporting ventures organized by the school? ie bus travel within a 60km radius of the school or walking within a 2km radius of the	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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school.

**Parent/Guardian Signature:**

**PARENT/GUARDIAN INFORMATION:**

**Parent/Guardian 1 (Residing with Student)      Parent/Guardian 2 (Residing with Student)**

Name:		Name:	
Relationship to Student:		Relationship to Student:	
Home Address:		Home Address:	
Home Phone:		Home Phone:	
Work Phone:		Work Phone:	
Mobile Phone:		Mobile Phone:	
Email Address:		Email Address:	
Occupation:		Occupation:	
Type of Employment:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual	Type of Employment:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual
Employer:		Employer:	
Religion:		Religion:	
Country of Birth:		Country of Birth:	
First Language:		First Language:	
Marital Status:		Marital Status:	

**Parent/Guardian 3 (If applicable)      Parent/Guardian 4 (If applicable)**

Name:		Name:	
Relationship to Student:		Relationship to Student:	
Home Address:		Home Address:	
Home Phone:		Home Phone:	
Work Phone:		Work Phone:	
Mobile Phone:		Mobile Phone:	
Email Address:		Email Address:	
Occupation:		Occupation:	
Type of Employment:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual	Type of Employment:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual
Employer:		Employer:	
Religion:		Religion:	
Country of Birth:		Country of Birth:	
First Language:		First Language:	
Marital Status:		Marital Status:	

**EMERGENCY INFORMATION:**

Please give the name of someone **(other than parents)** – this person is called only when we are unable to contact either Parent/Guardian.

Name:		Relationship to Student:	
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Phone:		Mobile Number:	
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**CONTACT INFORMATION:**

**BILLING ADDRESS:**

If Accounts are required to be sent to both parents/guardians at different addresses, please provide a second mailing address. **A FAMILY FEE ACCOUNT WILL NOT BE SPLIT BETWEEN PARENTS AND GUARDIANS.**

Address 1:		Address 2:	
Name:		Name:	
Address:		Address:	

**CORRESPONDENCE ADDRESS:**

If correspondence/reports are required to be sent to both parents/guardians separately, please provide a second mailing and email address.

Address 1:		Address 2:	
Name:		Name:	
Address:		Address:	
Email Address:		Email Address:	

**SMS ADDRESS:**

Mobile numbers are used for absentee notification and urgent college messages. If notifications are required to be sent to both parents/guardians separately, please provide a second mobile number.

Contact 1:		Contact 2:	
Mobile Number:		Mobile Number:	

**DECLARATION:**

I/We hereby acknowledge, affirm and agree that the information provided in this form is true as at date of completion and that there is no information relating to this enrolment application that has been omitted.

Parent/Guardian 1		Parent/Guardian 2	
Name:		Name:	
Signature:		Signature:	
Date:		Date:	

The following information is required to be collected for Australian Government purposes.

**\*Does the student or their mother/caregiver or their father/caregiver speak a language other than English at home? (If more than one language, indicate the one that is spoken most often)**

	Student	Mother/Caregiver	Father/Caregiver
English only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cantonese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Italian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vietnamese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mandarin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tagalog (Filipino)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Samoan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Greek	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
German	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	_____		

**Mother/Caregiver**

**\*Circle one of the Occupation/Groups below (see instructions on next page):**

Group No:  1  2  3  4  8

\*What is the highest year of primary or secondary school completed?: (Tick on box)

- Year 12 or equivalent
- Year 11 or equivalent
- Year 10 or equivalent
- Year 9 or equivalent

What is the level of the highest qualification completed? (Tick on box)

- Bachelor degree or above
- Advanced Diploma/Diploma
- Certificate I to IV (including trade certificate)
- No non-school qualifications

**Father/Caregiver**

**\*Circle one of the Occupation/Groups below (see instructions on next page):**

Group No:  1  2  3  4  8

\*What is the highest year of primary or secondary school completed?: (Tick on box)

- Year 12 or equivalent
- Year 11 or equivalent
- Year 10 or equivalent
- Year 9 or equivalent

What is the level of the highest qualification completed? (Tick on box)

- Bachelor degree or above
- Advanced Diploma/Diploma
- Certificate I to IV (including trade certificate)
- No non-school qualifications

## List of Parental Occupation Groups (for question in Family Details)

Instructions: Please select the appropriate parental occupation group number from the list.

If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation.

If the person has not been in paid work in the last 12 months, circle '8' in the box.

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

**Senior executive/manager/department head** in industry, commerce, media or other large organization.

**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/office/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, officer/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 including:

**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 aid, 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)

**Group 8: If person has not been in paid work in the last 12 months.**