



How did you find																			
Recommended by a friend or colleague Search engine (Google, Bing, etc)																			
Online publication (Better Education, Good School Guide, etc.) Newspaper or print publication Social media (Facebook, LinkedIn, Instagram, etc.) Other:																			
STUDENT APPL Surname					.g. 3,	,									-				
Given Names																			
Date of birth	D	D	M	M	Υ	Υ	Υ	Υ			Ger	nder		Mc	ıle		Fe	emale	
Nationality								Passpo	ort Nun	ber									
Religious Denominatio	n																		
Email Address																			
Home Number																			
Mobile Number																			
Child's First Language																			
Main Language Spok	en at l	Home																	
Other Language(s) Sp	oken (at Hor	ne																
Is the student of Abori	ginal c	of Torr	es Stro	ait Islan	der ori	gin?		No		Abori	iginal		Tori	res Str	ait Islar	nder		Both	
Student's Residency St	atus :		Austro	alian C	itizen				Perma	nent Re	esident								
			Temp	orary	Reside	nt			Overse	eas Stu	dent								
If the student is the hol	der of	a visc	a, plea	se pro	vide the	e follo	wing i	nformo	ıtion:										
Visa sub-class									Visa e	expiry	date	D	D	M	M	Υ	Υ	Υ	Υ
ENROLMENT D																			
The grade you wish to	enter	(Plea	se tick)		3		4	5	(5	7	8	3	9	10)	11	1:	2
Preferred year of Ent	ry (e.g	. 202	O)				/or		Immed	iately									
Current school and ac Does this student ha								:		11	المتدالت	D I. D.		ماد ک مد	12	V		NI-	
If yes, what is the fo						rrenti	y, or	previo	ousiy, e	enrolle	ea ar	rai b	uaani	st Scn	0016	Yes		No	
PREVIOUS SCH						ıs scho	ols the	studer	nt has a	ittende	ed:								
Name of School											ars of	scho	oling	atter	nded				
Name of School Years of schooling attended																			
Name of School										Ye	ars of	scho	oling	atter	nded				
SPECIAL INTERE	STS	ANI) AC	HIEV	EME	NTS													

Application for Enrolment for Local and International Students



Due to legal obligations, details of both parents are required to be provided.

PARENT 1 / GUARDIAN 1 (PRIMARY CONTACT PERSON)

Title	Mr	Miss	Ms	Mrs	Dr	Other:				
Family Name										
Given Name										
Country Of Birth										
Maritial Status	Single	Married	Divorced	Other:						
Lives With Student?	Yes	No								
Relationship To Student	Father	Mother	Other:							
Aboriginality	No	Aboriginal	Torres Strait Isla	ınder						
Home Address										
Postal Address	stal Address									
Email Address										
Phone Number	Other Phone Number (Optional)									
Please Tick :	Emergency Co	ntact Au	uthorized to Pick up	Day to	Day Care	Long-Term Care				
Occupation										
Employment Status	Full-Time	Part-Time	Unemployed	Retire	d Othe	er:				
Employer										
Day and Time Availab	ility									
What Is The School Edu	ucation Level Cor	npleted?								
Year 9 or equi	valent or below	Year 10 or	equivalent	Year 11 or equiv	valent	Year 12 or equivalent				
What Is The Tertiary E	What Is The Tertiary Education Level Completed?									
Advanced Dipl	Advanced Diploma/Diploma Bachelor degree or above Certificate I to IV (including trade certificate									
Other Skills and Qualif	fications									
Main Language spoker	n at home									

Application for Enrolment for Local and International Students



Due to legal obligations, details of both parents are required to be provided.

PARENT 2 /	GUARDIAN 2	SECONDARY	CONTACT PERSON)
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Title	Mr	Miss	Ms	Mrs	Dr Other:				
Family Name									
Given Name									
Country Of Birth									
Maritial Status	Single	Married	Divorced	Other:					
Lives With Student?	Yes	No							
Relationship To Student	Father	Mother	Other:						
Aboriginality	No	Aboriginal	Torres Strait Island	ler					
Home Address									
Postal Address									
Email Address									
Phone Number			Other Phon	e Number (Optional)					
Please Tick :	Emergency Co	ontact Au	uthorized to Pick up	Day to Day	Care Long-Term Care				
Occupation									
Employment Status	Full-Time	Part-Time	Unemployed	Retired	Other:				
Employer									
Day and Time Availab	ility								
What Is The School Edu	ucation Level Co	mpleted?							
Year 9 or equi	valent or below	Year 10 or	equivalent Ye	ar 11 or equivalent	Year 12 or equivalent				
What Is The Tertiary E	ducation Level C	ompleted?							
Advanced Dipl	oma/Diploma	Bachelor de	gree or above	Certificate I to IV	' (including trade certificate				
Other Skills and Qualif	ications								
Main Language spoker	n at home								
What Other Languages Can You Speak?									
ADDITIONAL EMERG	ENCY CONTAC	CTS IF PARENTS/	GUARDIANS ARE N	IOT AVAILABLE					
	Emergency Conto	act 1		Emergency Contact	12				
Gender	Male Femal	e Authorized to	o Pick up	Male Female	Authorized to Pick up				
Full Name									
Relationship to Student									
Phone Number									

for Local and International Students



SPECIAL CIRCUMSTANCES Are there any special circumstances about the student seeking to be enrolled that the School should know prior to enrolment? Special circumstances can include unusual living arrangements, victim of bullying, home arrangements, family arrangements, court orders, etc. If Yes, please provide a brief description of the circumstances. Supporting documentation may be required. STUDENT'S HISTORY To your knowledge, is there anything in the student's history or circumstances (including medical history) which might pose a risk of any type to this student, other students. Or staff at this school? Yes If Yes, please provide a brief description of the student's medical or other history Has the student ever been suspended or expelled from any previous school? Yes, suspended Yes, expelled If Yes, please state and describe the reason for the suspension or expulsion Are you aware of any other incidents of the kind listed above in which the student has been involved outside of the school setting? STUDENTS WITH LEARNING AND SUPPORT NEEDS, INCLUDING DISABILITY (if applicable) Does the student require support for learning because of a disability? Is there anything that you do or modify at home that may help us at school to meet the student's educational needs? Please indicate if the student has any of the following conditions autism a hearing impairment a language disorder a physical disability difficulties in learning acquires brain injury behaviour disorder intellectual disability mental health disorder a vision impairment other Are there any learning adjustments that the School would need to consider implementing? Yes If Yes, please describe what changes or adjustments the School may need t implement to support the student's learning. Has any previous education provider prepared a documented plan to support the student's additional learning needs? No If Yes, please provide a copy of this plan and/or details of the plan.

Specialist field

5. Please describe the prescribed medication, if any, required.



for Local and Infern	ational Stude	nts						PAL BUDDHIST S Enlightenment through Wisdom, Moral	CHOC	
MEDICAL AND HEALTH I	NFORMATION									
Student's Medicare Number					Stuc	lent's Medicare (Card Refe	rence Number	T	
Nedicare Card Expiry Date					5.00					
octor's Name/Medical Cente	er			Doctor	's Phone	Number				
octor's Address										
*By filling in your Doctor's details, you have given the school consent to contact him/her in case of emergencies.										
LLERGIES										
Please identify and provide details below of any medical condition for which the student is being treated. If there is more than one condition or if there is insufficient space, please attach additional pages and include all answers to the questions below.										
ease state all the species or										
. Has a doctor diagnosed thi	is allergy?				No	Yes				
Is this a severe allergy (and	ıphylaxis)?				No	Yes				
Has the student been hospit	ralised with a sever	re allergic read	ction (anaph	ylaxis) or any	other a	llergy? No		Yes		
Does the student have an A	SCIA Action Plan f	or Anaphylaxi	is or Allergic	Reactions?	No	Yes	(ple	ease provide a cop	y)	
. Has the student been presci	ribed an adrenalir	ne autoinjector	(e.g. EpiPen)	Ś	No	Yes				
Please list any other medical	ation prescribed fo	or this allergy								
*It is important that all upd	lated information	and documen	ntations, incl	uding ASCIA	Action	Plans, related to	allergies	are provided to th	e Scl	
EDICAL CONDITIONS O	THER THAN AL	LERGIES ANI	D ANAPH	LAXIS, INC	LUDING	G MENTAL AN	ID PHYSI	CAL ILLNESS		
ease identify and provide d		-			-		is more th	nan one condition c	or if	
ere is insufficient space, plea Please describe the medica		al pages and	include all a	nswers to the	question	s below.				
	, containen									
DI			DI							
Please state if this is condition		ental:	Physical	Mer		16				
Has a doctor diagnosed			No		'es	If yes, year of a			4	
2. Has the student been hos			No		'es	If yes, which hos		6.1		
3. Is there a documented as4. Does the student currently			No an ongoing b		es ondition?		rovide a c	copy of this plan.		
If so, please provide deta			an origonig t	7G313 TOT 11113 C	o idinori					
Name of doctor				Phone	number					

Application for Enrolment for Local and International Students



FOR INTERNATIONAL STUDENTS ONLY

	CATION AGI			n on behalf of a stude	nt, please fill in the details	below:					
	e of Education				m, product im military defend						
	ne of Contact Pe		tion Consultant								
Emai	l Address				Phone numb	er					
Age	Agency Address										
OTH	OTHER DETAILS										
Do y	ou currently hav	ve Overseas S	Student Health Cov	ver? Yes	No						
	If Yes, ple	ase provide o	a copy of the polic	cy.							
	Name of	insurance pro	vider								
	Expiry date of OSHC D M M Y Y Y Y										
Whe	ere will the stude	ent lodge the s	student visa applic	cation?							
	Country										
	City										
WEL	FARE AND A	CCOMODA	TION								
Plea	se nominate the	option for pro	oviding accommod	dation and welfare to	the student:						
				lefinition of an approvardianship Nomination		ment of Immigration and Border Protection (DIBP					
	2. I nomin	ate a close re	lative, distant relat	tive, or family friend, v	who is over the age of 21	years old.					
					estay Form and Guardians						
	-			e arrangements for ap mestay Application Fo	proved homestay and gua m	ardianship arrangements.					
	ner option 1 or tudent:	2 are chosen,	please fill out the	following details of the	e nominated person respor	nsible for welfare and accommodation of					
Nam	e of Nominated	d guardian			Relationship to	Student					
Hom	e Address										
Emai	l Address										
Mob	ile Phone				Home Phone						
Oca	pation										
ENGLISH LANGUAGE PROFICIENCY											
				glish language tests?							
	IELTS	Score		Test date		Please provide a copy of the test results.					
	TOEFL	Score		Test date		Please provide a copy of the test results.					
	AEAS	Score		Test date		Please provide a copy of the test results.					
	Other	Score		Test date		Please provide a copy of the test results.					

for Local and International Students

PAL BUDDHIST SCHOOL Edightenous through Wildow, Mordity and Diligence

TERMS AND CONDITIONS OF ENROLMENT

ACADEMIA

At all times, students must ensure:

- 1. That the regulations and procedures of the School are satisfactorily observed in all respects
- That the student conforms to the disciplinary authority of the Principal and those to whom authority may be delegated.
- 3. That the student continues to make satisfactory commitment to their studies

DISCIPLIN

If the Principal, or any person deputizing for the Principal, considers that a student is guilty of a serious breach of the rules or has otherwise engaged in conduct which is prejudicial to the school or its students or its staff, the Principal or Deputy Principal may exclude the student permanently or temporarily at their absolute discretion.

If the Board of Directors of the Principal believes that a mutually beneficial relation ship of trust and co-operation between a parent and the school has broken down to the extent that it adversely impacts on that relationship, then the school, the Board of Directors or the Principal may require the parent to remove the child from the School.

No remission of fees will apply in either case.

FFES

Fees are subject to change without notice. All fees are payable in advance. Other costs such as for camps, excursions, materials or purchases are payable separately. The parents/guardians of a student are jointly and individually responsible for payment of fees.

Fees must be paid within thirty days after the commencement of a term. If fees are not paid when due the student's name will be removed from the School's roll and the student will be barred from attending classes unless the School Board directs otherwise.

If the student is absent from the School, fees will not be refunded in whole or in part. In exceptional drawnstances, the parent/guardian may seek special consideration from the School and the School Board may, in its sole discretion, grant a refund. Approved by the Principal and will only be granted in special drawnstances.

SCHOOL PROPERTY

Parents or Guardians must make good of damages to school property or apparatus (other than fair wear and tear) caused by their child or ward. The school accepts no liability for personal property brought to the school

PUBLISING STUDENT INFORMATION

The School may publish information about the student for the purposes of sharing his/her experiences with other students, informing the School and broader community about school and student activities and recording student participation in noteworthy projects or community service. The communications in which the student's information may be published include but are not limited to the School Website, social media, school newsletters, letters and promotional and marketing material. I give permission for the School to publish information about the student in publicly accessible communications. This permission remains effective until advised otherwise.

Parents are required to take part in all school events, as directed by executives and staff.

PARTICIPATION IN THE LIFE OF THE SCHOOL

Students are required to take part in all compulsory activities as directed by staff, including camps and excursions.

RELATED POLICIES

For comprehensive disclosure, the terms and conditions of enrolment should be read in conjunction with all the school policies.

CONDITIONS FOR INTERNATIONAL STUDENTS ONLY:

ENGLISH LANGUAGE REQUIREMENTS

All students are assessed by the school for language proficiency. Students with sufficient English language will not require intensive English tuition. Transcripts from their previous school showing that the student has passed the basic English studies provided by the school should be submitted as part of the enrolment application. Where intensive English tuition is required, this will be delivered by the school at the student's expense.

ACCOMMODATION AND WELFARE REQUIREMENTS

All students under the age of 18 years are required to live in accommodation with a parent/guardian/homestay provider approved by the School as part of their enrolment conditions. Enrolment will be terminated if students breach this condition.

Students 18 years and over will be required to live in organised accommodation or private arrangements approved by the Principal prior to such arrangements being made. Enrolment may be terminated if students breach this condition.

If a student changes his or her living arrangements without approval from the school, the student is in breach of student visa condition 8532 and Border Protection will be notified. The student's visa may become subject to cancellation.

REFUND POLICY

The Application Fee is non-refundable. Where a student visa is not granted and the student is therefore unable to arrive, a full refund of tuition fees will also be made. In keeping with Pal Buddhist School Refund Policy, 6 months' written notice is required where a student plans to leave, or 1 term's fees will be charged in lieu. Where a student leaves mid- term, tuition fees for the remainder of that term will not be refunded.

MAINTAINING VISA REQUIREMENTS

To fulfill visa obligations students must:

Maintain their enrolment, which means all fees and charges need to be paid in full and paid on time, Attend at least 80% of classes in each term,

Achieve satisfactory academic results, as determined by the Director of International Students within the allocated course duration.

Maintain accommodation / welfare arrangements (if approved by the school). Any changes are only made with the approval of the Director of International Students.

It is a condition of enrolment that students maintain Overseas Student Health Cover (OSHC) for the duration of their student visa.

Violations of the above will be reported to the Dept. of Immigration and Border Protection, which may jeopardize the student's visa.

PARENT INVOLVEMENT

DECLARATION AND SIGNATURE

- I have provided information about the learning and support needs, including health condition(s) and/or special need(s) and/or relevant history of the student
- I consent to the School seeking information from previous schools, NSW government departments, public hospitals, health professionals or other organisations that may
 also hold information related to the student.
- I consent to the health professional(s) treating any medical or health condition identified in this application, and to provide the School with information about any condition that has been identified in this application. This may include any other aspects of the student's health that may impact on the condition or on the health and safety of this student or other students at school or on staff at the school.
- I declare that the information provided in this application is, to the best of my knowledge and belief, accurate and complete.
- I am aware that if information I have given is false or misleading, any decision made as a result of this application may be changed.

Signature of Parent 1 / Guardian 1		Signature of Parent 2 / Guardian 2
Print Name of Parent 1 / Guardian 1	Date	Print Name of Parent 2 / Guardian 2 Date

OFFICE USE ONLY				
Application Fee	Paid	Date	Receipt No.	
Entrance Exam	Date	Marked		
Enrolment Interview	Date	Interviewer	Accepted	
Acceptance Letter Sent Date	Dale	IIIICI TICWCI	Accepied	
	Data	Grade Level		
Expected Commencement	Date	Grade Level		