

Application for Enrolment

for Local and International Students

www.pal.nsw.edu.au

enrolments@pal.nsw.edu.au

CRICOS Provider 03398D



PAL BUDDHIST SCHOOL
Enlightenment through wisdom, morality and diligence

How did you find out about our school?

- Recommended by a friend or colleague
- Search engine (Google, Bing, etc.)
- Online listing (Better Education, Good School Guide etc)
- Print publication (Newspaper, flyers, etc.)
- Social media (Facebook, LinkedIn, Instagram etc)
- Other:

Student Applicant Details

First name: Middle name:

Surname: Preferred name:

D.O.B: (dd/mm/yyyy) / / Gender: Male Female

Email address: Phone number:

Nationality: Ethnicity:

Religious denomination: First language:

Main language spoken at home:

Other language(s) spoken at home:

Are you Aboriginal or Torres Strait Islander descent? No Aboriginal Torres Strait Island Both

Residency status: Australian citizen Permanent Resident Temporary Resident Overseas Student

If the student is a holder of a visa, please provide the following information:

Visa sub-class: Visa expiry date: / /

Passport No: Passport expiry date: / /

Enrolment Details

Current Grade: Toddler K 1 2 3 4 5 6 7 8 9 10 11 12

Starting period (e.g. 2021): OR immediate start

Does your child have any siblings or family currently or previously, enrolled at Pal Buddhist School? Yes No

If yes, what are their names?

Previous Schools

NAME OF SCHOOL(S)	PERIOD OF ENROLMENT
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Special Interests and Achievements

Application for Enrolment

for Local and International Students



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

Parent/Guardian 1 (Primary contact person)

Title: Mr Miss Ms Mrs Dr Other:

First name: Preferred name:

Surname: D.O.B: (dd/mm/yyyy) / / /

Relationship to applicant: Father Mother Other:

Please tick: Authorised to pick-up Day-to-day care Long-term care

Marital status: Single Married Divorced Other:

Email address:

Home number: Mobile number:

Nationality: Ethnicity:

Religious denomination:

Are you Aboriginal or Torres Strait Islander descent? No Aboriginal Torres Strait Island Both

Main language spoken at home:

Other language(s) spoken at home:

Home address:

Billing address: Same as above Different to above:

Skills and Qualifications

Employment status: Full-time* Part-time* Unemployed Retired** Other:

*If employed, what is your occupation?

*Employer's business name?

**If retired, what was your former occupation?

What is your level of completed school education?

Year 9 or equivalent or below Year 10 or equivalent Year 11 or equivalent Year 12 or equivalent

What is your level of completed tertiary education ?

Advanced diploma/diploma Bachelor degree or above Certificate I to IV (including trade cert.)

If yes, please specify your tertiary certification:

Other skills and qualifications:

Your day and time availability:

Application for Enrolment

for Local and International Students



Parent/Guardian 2 (Secondary contact person)

Title: Mr Miss Ms Mrs Dr Other:

First name: Preferred name:

Surname: D.O.B: (dd/mm/yyyy) / /

Relationship to applicant: Father Mother Other:

Please tick: Authorised to pick-up Day-to-day care Long-term care

Marital status: Single Married Divorced Other:

Email address:

Home number: Mobile number:

Nationality: Ethnicity:

Religious denomination:

Are you Aboriginal or Torres Strait Islander descent? No Aboriginal Torres Strait Island Both

Main language spoken at home:

Other language(s) spoken at home:

Home address:

Billing address: Same as above Different to above:

Skills and Qualifications

Employment status: Full-time* Part-time* Unemployed Retired** Other:

*If employed, what is your occupation?

*Employer's business name?

**If retired, what was your former occupation?

What is your level of completed school education?

Year 9 or equivalent or below Year 10 or equivalent Year 11 or equivalent Year 12 or equivalent

What is your level of completed tertiary education?

Advanced diploma/diploma Bachelor degree or above Certificate I to IV (including trade cert.)

If yes, please specify your tertiary certification:

Other skills and qualifications:

Your day and time availability:

Emergency Contacts

EMERGENCY CONTACT 1

Gender: Male Female Authorised pick-up

Name:

Relation:

Phone number :

EMERGENCY CONTACT 2

Gender: Male Female Authorised pick-up

Name:

Relation:

Phone number :

Application for Enrolment

for Local and International Students



Special Circumstances

Are there any special circumstances about the applicant 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.

Yes No

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, to other students or to staff at this school?

Yes No

If **yes**, please provide a brief description of the student's medical or circumstance.

Has the student ever been suspended or expelled from any previous school?

Yes, suspended Yes, expelled No

If **yes**, please state and describe the reason for the student's suspension or expulsion.

Are you aware of any other incidents of the kind listed above in which the student has been involved outside of school setting?

Learning and Support Needs (including disability)

Does the student require support for learning because of a disability? Yes No

Is there anything that you do or modify at home that may help us at school to meet the student's educational needs?

Yes No

Please indicate if the student has any of the following conditions:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Autism | <input type="checkbox"/> Hearing impairment | <input type="checkbox"/> Language disorder | <input type="checkbox"/> Physical ability |
| <input type="checkbox"/> Brain injury | <input type="checkbox"/> Behaviour disorder | <input type="checkbox"/> Intellectual disability | <input type="checkbox"/> Learning difficulties |
| <input type="checkbox"/> Vision impairment | <input type="checkbox"/> Mental health disorder | <input type="checkbox"/> Other: | <input type="text"/> |

Are there any learning adjustments that the School would need to consider implementing? Yes No

If **yes**, please describe what changes or adjustments the school may need to implement to support their learning.

Has any previous education provider prepared a documented plan to support the student's additional learning needs?

Yes No

If **yes**, please provide a copy of the plan and/or details of the plan.

Application for Enrolment

for Local and International Students



Medical and Health Information

Student's Medicare number:

Student's Medicare Card position:

Medicare card expiry date: /

Doctor's Name/Medical Centre:

Doctor's Phone number:

Medical Centre address:

***By filling in your Doctor's details, you have given the school consent to contact him/her in case of emergencies.**

Allergies

Please identify and provide details below of any medical conditions 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.

Please state all the substance(s) of applicant's allergy:

- Has a doctor diagnosed this allergy? Yes No
- Is this a severe allergy (anaphylaxis)? Yes No
- Has the student been hospitalised with anaphylaxis or any other allergy? Yes No
- Does the student have an ASCIA Action Plan for Anaphylaxis or Allergic Reactions? Yes No
- Has the student been prescribed an adrenaline autoinjector (e.g. EpiPen) ? Yes No
- Please list any other medication prescribed for this allergy.
- Does the student keep their own medication in their school bag? Yes No

***It is important that all updated information and documentations, including ASCIA Action Plans, related to allergies are provided to the School.**

Medical Conditions (OTHER THAN ALLERGIES, INCLUDING MENTAL AND PHYSICAL ILLNESS)

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.

Please describe the medical condition

Please state if this condition is physical or mental: Physical Mental

- Has a doctor diagnosed this condition? Yes (Year of diagnosis) No
- Has the student been hospitalised with this condition? Yes (Hospital's name) No
- Is there a documented action plan from a doctor? Yes (Please provide a copy of the plan) No
- Does the student currently see a medical professional on an ongoing basis for this condition?

If so, please provide details of the medical professional:

Name of doctor:

Phone number:

Specialist field:

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

Please note that any failure to submit correct documents may result in applicant's non-acceptance.

Application for Enrolment

For **International Students** only



Education Agent Details

If an agent is being used to complete this application on behalf of a student. Please fill in the details below.

Name of Education Agency:

Education Agency address:

Name of Person of Contact or Education Consultant:

Email address:

Requirements

Do you currently have Overseas Student Health Cover? Yes No

If **yes**, please provide a copy of the policy.

Name of insurance provider:

OSHC expiry date: / /

Where will the student lodge the student VISA application?

Country:

City:

Welfare and Accommodation

Please nominate the option or providing accommodation and welfare to the student:

- 1. I will be living in Australia with my child, as a guardian and caretaker. (Note: All K-6 overseas applicants must tick this option)
- 2. I nominate a direct relative within the definition of an approved relative by the Department of Immigration and Border Protection (DIBP). Please also fill out additional form: **Guardianship Nomination Form**
- 3. I nominate a close relative, distant relative, or family friend, who is over the age of 21 years old. Please also fill out additional forms: **Parent Nominated Homestay Form and Guardianship Nomination Form**
- 4. I request that Pal Buddhist School make arrangements for approved homestay and guardianship arrangements. Please also fill out additional form: **Homestay Application Form**

If either option 1 or 2 are chosen, please fill out the following details of the nominated person responsible for welfare and accommodation of the student:

Name of Guardian: Relationship to applicant:

Email address:

Mobile number: Ethnicity:

Main language spoken at home:

Home address:

Occupation: Employer:

English Language Proficiency

<input type="checkbox"/> IELTS	Score: <input type="text"/>	Date: <input type="text"/>	Please provide a copy of your test results.
<input type="checkbox"/> TOEFL	Score: <input type="text"/>	Date: <input type="text"/>	Please provide a copy of your test results.
<input type="checkbox"/> AEAS	Score: <input type="text"/>	Date: <input type="text"/>	Please provide a copy of your test results.
<input type="checkbox"/> Other	Score: <input type="text"/>	Date: <input type="text"/>	Please provide a copy of your test results.

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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 respect.
- 2) 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.

DISCIPLINE

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 Head of School may exclude the student permanently or temporarily at their absolute discretion.

If the Board of Directors or the Principal believes that a mutually beneficial relationship 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.

FEES

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 circumstances, 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 circumstances.

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

PUBLISHING 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.

PARENT INVOLVEMENT

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:

- 1) Maintain their enrolment, which means all fees and charges need to be paid in full and paid on time
- 2) Attend at least 80% of classes in each term,
- 3) Achieve satisfactory academic results, as determined by the Director of International Students within the allocated course duration,
- 4) Maintain accommodation / welfare arrangements (if approved by the school). Any changes are only made with the approval of the CRICOS officer and/or executives.
- 5) 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.

Declaration

- 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 change.

SIGNATURE OF PARENT/GUARDIAN 1

SIGNATURE OF PARENT/GUARDIAN 2

PRINT NAME OF PARENT/GUARDIAN 1

DATE

PRINT NAME OF PARENT/GUARDIAN 2

DATE