



# ENROLMENT APPLICATION

**HARVEST**  
CHRISTIAN COLLEGE



*Growing in God's Grace*

# Survey Information

## Why have you chosen to enrol at Harvest Christian College?

(Please tick no more than three, if applicable)

- Christian ethos
- Friends or family at the College
- Broad subject choice
- Integration of Christian beliefs into curriculum and activities
- Location
- Curriculum
- Care and safety
- Discipline
- Extra-curricular activities (e.g. sports, musicals)
- Affordability
- R - 12 education
- Learning support
- Pathways to Uni, TAFE or work
- Other (please specify) .....

## How did you find out about Harvest Christian College?

(Please tick no more than three, if applicable)

- Word of mouth
- Open Day
- Advertising (billboard, radio, magazine)
- Harvest website
- White pages / Yellow pages
- Mail drop
- My Kindergarten / Child care
- My church
- Another College
- Old scholar
- College signs
- College function (e.g. fete, musical)
- Medical practitioner
- Support organisation
- YP Country Times article
- Other (please specify) .....

OFFICE USE ONLY			
Enrolment Fee Receipt No.		Student Transfer Sent <input type="checkbox"/>	
PC School		House Allocation	
Commencement Date		Staff Notification	
IT Manager notified		Library Notification	
School Card Form Received		Enrolment Fee (charge)	
Date of Interview		Bus Route (if applicable)	
Acceptance Letter sent			
Medicals			

# Student Information

## IMPORTANT NOTICE

It is important that we are informed of any specific needs the child has (behavioural, medical, physical or any other needs/concerns) which may require medication, specialised educational support or other attention. Failure to provide complete or accurate information about your child may delay the enrolment process or lead to any subsequent enrolment being cancelled. By submitting this Application, you consent to Harvest Christian College collecting, using and disclosing information about your child for the purpose of assessing the child's needs.

Please answer all questions in the places provided. Please tick (✓) answers where necessary. If you need more space, please attach a sheet with your extended answers to the back of this form and clearly indicate which question you are answering.

Answers to questions marked '\*' are collected as part of this College's ongoing commitment to the National Reporting on Schooling in Australia initiative. See PART C of this form for more information.

*If currently residing in Australia on a VISA, please provide your original Passport so that a copy may be taken.*

## PART A - STUDENT

1. \* Surname: .....
2. \* Given name(s): .....
3. Preferred name: .....
4. \* Date of birth: .....
5. \* Sex: Male / Female (please circle)
6. Year level starting at Harvest: .....
7. Term / Year starting: .....
8. Previous school / kindy: .....
9. Is bus travel required to College? (for students NOT residing in Kadina)
  - No
  - Yes From: .....
10. Are there any Court Orders in place for this student?
  - No
  - Yes (Please provide brief details and attach a copy of the Parenting Order)

.....  
.....

# Family Information of those requesting the enrolment

If currently residing in Australia on a VISA, please provide your original Passport so that a copy may be taken.

## PART A.1 - FATHER, STEPFATHER or GUARDIAN INFORMATION

Surname: ..... Given name(s): .....

Title (Mr / Mrs / Ms / Dr / Ps): ..... Relationship to student(s) .....

Residential address: ..... Suburb: ..... Postcode .....

Postal address: ..... Suburb: ..... Postcode .....

Home ph number: ..... Work ph number: ..... Mobile .....

Home email address: ..... Work email address: .....

Are you an Australian Citizen?

Yes / No → Visa class and number ..... Date of arrival in Australia: .....

## PART A.2 - MOTHER, STEPMOTHER or GUARDIAN INFORMATION

Surname: ..... Given name(s): .....

Title (Mr / Mrs / Ms / Dr / Ps): ..... Relationship to student(s) .....

Residential address (if different to Parent 1):

..... Suburb: ..... Postcode .....

Postal address: ..... Suburb: ..... Postcode .....

Home ph number: ..... Work ph number: ..... Mobile .....

Home email address: ..... Work email address: .....

Are you an Australian Citizen?

Yes / No → Visa class and number ..... Date of arrival in Australia: .....

**Does the student reside with any person other than the parents or guardians enrolling the student?  
If so, please use the space below to provide address and contact details**

Surname: ..... Given name(s): .....

Residential address: ..... Suburb: ..... Postcode .....

Postal address: ..... Suburb: ..... Postcode .....

Home ph number: ..... Work ph number: ..... Mobile .....

Home email address: ..... Work email address: .....

## EMERGENCY CONTACT INFORMATION

Please provide details of emergency contacts OTHER THAN the parents.

Name of emergency contact #1 (other than the parent): .....

Phone number: ..... Relationship: .....

Name of emergency contact #2 (other than the parent): .....

Phone number: ..... Relationship: .....

## SECOND COPY OF NOTICES (for parents at separate addresses)

Information in the form of letters, notes, newsletters, reports etc will be emailed. In the event of parents residing at different addresses, a second copy can be emailed to a parent if requested. Please indicate below if you would like the College to organise this arrangement.

- No
- Yes, emailed to .....

On occasion it is necessary for both parents to sign the one document/form. When this is required the form will be sent to one party, who will be asked to sign and forward it to the other party for signing. Whoever receives the form from the College is asked to be responsible for its return.

## COLLEGE ASSOCIATION MEMBERSHIP

Harvest Christian College is an Incorporated Association. The College is governed by a Board of Governors elected from amongst the members of the College Association. Membership of the College Association entitles the member to vote at Annual General Meetings and Special Meetings for election of Board Members, changes to the Constitution, acceptance of the Annual Accounts and other changes requiring special resolution.

- Yes I am interested in becoming an Association Member. Please send me an information pack.

# Family religious and cultural information

## PART B - CHURCH OR RELIGIOUS AFFILIATION

Church attended: ..... Minister's name: .....

Denomination (if applicable): ..... Church involvement (if applicable): .....

Church address: ..... Suburb: ..... Postcode .....

Church ph number: ..... Mobile: ..... Fax: .....

Does the child support and affiliate with the religious beliefs of the parents?

Yes

No

Not applicable

## PART C - DATA COLLECTION FOR NATIONAL REPORTING

The following information is collected as part of this College's ongoing commitment to the National Reporting on Schooling in Australia initiative.

The Australian Government wishes to use the data provided to help it measure progress towards achieving the National Goals of Schools and all states have agreed to work towards the achievement. The information from each student will be linked with the benchmark Literacy and Numeracy Assessment result for that student. Students from SA Independent Schools will undertake the National Assessment Program - Literacy and Numeracy (NAPLAN) tests in May of each year.

The information will be kept in the College's record storage system and may be reused when the students move into the next year of benchmark assessments.

The information from Schools will be sent to the Association of Independent Schools of SA (AISSA). All data will then be sent to the NAPLAN Testing Agency in SA for collation. Aggregated information, which does not identify individual parents or students, will be forwarded to the Ministerial Council on Education, Employment, Training and Youth Affairs (MCEETYA) for the purpose of National Reporting. Please note the privacy collection notices attached.

The MCEETYA website: <http://www.mceecdya.edu.au> contains more details and background material. The website of AISSA also has important background information: <http://www.ais.sa.edu.au> from the menu >ABOUT AISSA > DATA COLLECTION.

1. Country of birth: ..... Father/Guardian 1: ..... Mother/Guardian 2: .....

2. Nationality: ..... Father/Guardian 1: ..... Mother/Guardian 2: .....

3. Ethnicity: ..... Father/Guardian 1: ..... Mother/Guardian 2: .....

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

Mark one box only in each column

	Student	Father/Guardian 1	Mother/Guardian 2
No, English only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, other (please specify .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5 a) What is the **occupation group** of the father/parent 1/guardian 1? .....

Occupation: .....

5 b) What is the **occupation group** of the mother/parent 2/guardian 2? .....

Occupation: .....

Please select the appropriate parental **occupation group** from the list contained on page 8

- 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, enter '8' in the space provided above.

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

(For persons who have never attended school, please mark 'Year 9 or equivalent or below')

Mark one box only in each column

	Father/Guardian 1	Mother/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 or below	<input type="checkbox"/>	<input type="checkbox"/>

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

Mark one box only in each column

	Father/Guardian 1	Mother/Guardian 2
Bachelor Degree or equivalent	<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"/>

## LIST OF PARENTAL OCCUPATION GROUPS (FOR QUESTION 5)

### 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** [College principal, faculty head/dean, library/museum/gallery director, research facility director]

**Defence Forces** Commissioned Officer

**Professionals** generally have degrees 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, proofreader, 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, kitchen hand, 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, College/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]



## PART D - STUDENT CULTURAL INFORMATION

1. \* Country of birth .....

1a. Is the child an Australian Citizen?

Yes  No → Visa class and number .....

2. \* Is your child of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, please tick both boxes)

No  Aboriginal  Torres Strait Islander

3. Does the child communicate effectively in English for their age?

Yes  No → Please answer 5a and 5b

4. \* Does the child speak any languages other than English at home?

No  Yes → .....

5a. Is your child attending a language School?

No  Yes → .....

5b. Does your child need assistance to enhance communication?

No  Yes → .....

## PART E - HEALTH AND MEDICAL INFORMATION

1. Please tick one or more of the following if your child suffers from the condition and provide details:

Heart problems .....

Asthma .....

Respiratory problems .....

Drug allergies .....

Food allergies .....

EpiPen

Ointment allergies .....

Diabetes / Hypoglycemia .....

Blood pressure .....

Epilepsy .....

Phobias .....

HIV, Hepatitis A, B, C etc .....

ADD, ADHD, ODD etc .....

Eczema .....

Migraines .....

Allergy to Bites / Stings .....

EpiPen

Other conditions .....

2. Does your child take any regular medication?

- No  Yes → Please list below

Medication to be taken at College:

.....  
.....

Other medication unlikely to be taken at College:

.....  
.....

3. Please indicate if your child's medical condition is deemed Low, Medium or High risk. Examples of High risk medical conditions are: Diabetic-Hypoglycemic reaction, Allergy requiring an EpiPen etc.

- Low  Medium  High

Does your child have a Health Care Plan and / or Emergency Action Plan?

- No  Yes → Please attach or describe below

.....  
.....  
.....

4. Immunisations. Please list:

.....  
.....  
.....

5. Does your child have any disability?

- No  Yes → Please describe below

.....  
.....  
.....

6. Does your child have any **VISION** problems?

- No  Yes → Please provide details

.....  
.....

6a. Have your child's eyes been tested?

- No  Yes → Please provide details

.....

7. Does your child have any **HEARING** problems?

- No  Yes → Please provide details

.....  
.....

7a. Have your child's ears been tested?

- No  Yes → Please provide details
- .....

## PART F - STUDENT INTERESTS

1. Does your child play an instrument?

- No  Yes

If yes, instrument played .....

Number of years learning .....

2. Sports, Clubs and other interests:

Is your child involved in any out of College sport?

- No  Yes

If yes, sports played .....

2a. Is your child a member of any other club e.g. theatre, dance, chess etc

- No  Yes

If yes, please list details .....

Please list any other interests or hobbies .....

.....

## PART G - CURRICULUM & LEARNING SUPPORT

1. Has your child ever received support from others? e.g. tutor, psychologist, occupational therapist, speech pathologist, access assistant

- No  Yes → Please provide details

Specialist's Name: .....

Details .....

.....

.....

2. Please tick any services that your child has ever received:

- |  |  |
|--|--|
| <input type="checkbox"/> Novita Children's Services                | <input type="checkbox"/> Down Syndrome Society                           |
| <input type="checkbox"/> Townsend College Visiting Teacher Service | <input type="checkbox"/> Intellectual Disability Services Council (IDSC) |
| <input type="checkbox"/> Autism Association                        | <input type="checkbox"/> Families SA                                     |
| <input type="checkbox"/> Cora Barclay                              | <input type="checkbox"/> Hospital based child development units          |
| <input type="checkbox"/> Community health services                 | <input type="checkbox"/> Private practitioners                           |
| <input type="checkbox"/> Options coordination                      | <input type="checkbox"/> Gifted and Talented Council                     |
| <input type="checkbox"/> Others (please list) .....                |  |

3. Will any external support providers be provided in the College?

- No  Yes → Please provide details (e.g. the name of the provider, the number and duration of visits per week and facilities required).

.....  
.....  
.....

4. Has your child ever been placed on a modified curriculum or received learning support?

- No  Yes → Please provide details

.....  
.....  
.....

5. Please provide a copy of the latest report with this application.

- Report attached  Yes  No

### **PART H - BEHAVIOURAL INFORMATION**

1. Has your child ever been expelled from any other College/School?

- No  Yes → Please provide details

.....  
.....  
.....

2. Has your child ever been suspended from any other College/School?

- No  Yes → Please provide details

.....  
.....  
.....

3. Has your child ever been on a Behaviour Management Program?

- No  Yes → Please provide details

.....  
.....  
.....

4. Does your child require any special measures taken in relation to their behaviour and College activities?

- No  Yes → Please provide details

.....  
.....  
.....

5. Has your child had any truancy concerns?

- No  Yes → Please provide details

.....  
.....  
.....

**PART I - MOBILITY, ACCESS AND INDEPENDENCE INFORMATION**

1. Please tick the main mode of transport your child will use to get to and from College:

- Private car  Walk  
 Bike  DECD Bus from .....
- Harvest Bus from .....

2. Does your child use any of the following movement aids?

- Wheelchair  Scooter  
 Callipers  Other .....

3. Are there any mobility concerns that need to be addressed by the College?

- No  Yes → Please provide details

.....  
.....  
.....

4. Does your child have any independence concerns?

- No  Yes → Please provide details

.....  
.....  
.....

5. Can your child manage personal care needs independently (toilet, dressing, eating etc)?

- Yes  No → Please provide details

.....  
.....  
.....

## **PART J - PERMISSIONS**

Colleges often need to seek parental permission to cover a wide range of activities and situations. We hope that by placing most of the potential situations on one sheet it will save time and paper.

### **Permission to borrow library books**

I give permission for my child to borrow books from the library and I accept financial responsibility for any book damaged or lost by my child.

Signed .....

### **Permission to go on local walks**

I give permission for my child to go on supervised local walks.

Signed .....

### **Permission to administer Panadol**

I give permission for Paracetamol to be administered to my child if deemed necessary. Notification will be sent home in my child's diary if this occurs.

Signed .....

### **Permission to inspect for head lice**

The South Australian Health Commission recommends that everyone checks their hair every week for head lice. Checking and treating children's hair is BY LAW A PARENT'S RESPONSIBILITY. Sometimes Colleges offer to arrange head checks if there is a community outbreak of head lice.

I understand and accept that if my child is found to be infested they will be withdrawn from close contact with other children until collected for treatment by parents or caregivers. I understand that I will need to collect my child promptly if head lice are evident as a result of this check. I understand that my child can be excluded from College where infestation is found.

Signed .....

I give permission for a staff member to check my child's hair for head lice. I understand any such check will be conducted sensitively.

Signed .....

### **Permission to be photographed**

I give permission for my child to be photographed (by still or video camera) whilst attending Harvest Christian College, either individually or in groups, whether the photograph be taken for College purposes or by a commercial photographer selected by the College.

Signed .....

### **Permission for photographs in newsletter, newspaper and on electronic media**

The Harvest Christian College newsletter contains photographs of the students which appears on the Harvest Christian College website. Before we can include the newsletter in its entirety on the web site, we need your permission for your child's photograph to be included.

I give permission for my child's photograph to be used in the College newsletter, in the newspaper and in electronic media used by Harvest Christian College.

Signed .....

### **Permission for photos to be used in College promotional material**

Sometimes photos from College activities are used in College promotional material like brochures etc.

I give permission for my child's photograph to be used in College promotional material.

Signed .....

## PART K - COLLEGE FEES

### Terms and Conditions:

Accounts will be billed on an annual basis at the commencement of the year, according to the College Fee Schedule and Important Financial Information published prior to the commencement of the College year. Unless otherwise arranged and agreed with the College Finance Office, all fees will be billed to the person or persons responsible for the account as nominated below.

School fees may be split between one parent/guardian and the other providing both parents/guardians have signed the agreement section below, accepting and being responsible for their share of the fees.

Fees are payable by the statement due dates unless an application to pay by instalment has been provided by the parent(s)/guardian(s) and has been accepted by the Finance Office. Instalment payments are made through a Direct Debit from your bank account on either a weekly, fortnightly or monthly cycle. The College offers a range of payment methods to suit the circumstances of each family.

If alternate arrangements have not been agreed with the Finance Office, fees which are not paid by the statement due dates may incur a late-payment penalty fee to cover the administrative costs of collection and may risk a student being withdrawn from the College. Should your account be forwarded to a collection agency due to non-payment of college/tuition fees, you will be responsible for the costs of collection and or legal and court fees associated with this. Fee Remission Forms are available for families experiencing financial difficulties.

The College provides a significant discount to low income families who qualify for School Card (n.b. School Card must be applied for each year – eligibility does not carry forward from one year to the next). School Card Application Forms are available from the College Office. Please note: Full fees will be charged until confirmation of School Card approval.

In the event of the withdrawal of a student from the College, in the absence of a prior agreement, parents are required to give written notice of a minimum of one term's notice (not including holidays), or pay the equivalent amount of fees in lieu of notice.

1. Name and Address of person/s responsible for account:

.....  
.....

I agree to the Terms and Conditions as stated above.

Signature of Payer .....

2. In some circumstances fees can be split and billed to more than one person. Please indicate if a split account is required and provide a second name and address.

Split Fee Account Required

Please list details of split account requirements e.g. percentage of split payments or people who may be responsible for an individual student's financial obligations:

.....  
.....

3. Name and Address of second payer for split account:

.....  
.....

I agree to the Terms and Conditions as stated above.

Signature of Second Payer .....

4. Please indicate how you intend to pay College fees:

- Annual Account
- Term by term
- By an approved instalment arrangement \*\* processed:
  - Weekly
  - Fortnightly
  - Monthly commencing on / /
  - Direct Debit Instalments
  - CentrePay
  - Other (BPay, cash, cheque, EFTPOS)

\*\* upon completion of a formal agreement

5. Do you believe you will be entitled to apply for School Card? (n.b. School Card must be applied for each year – eligibility does not carry forward from one year to the next.) School Card Application Forms are available from the College Office. Please note: Full fees will be charged until confirmation of School Card approval.

- Yes
- No



# Harvest Christian College Vision Statement

*Harvest Christian College is committed to honouring and serving God by providing a Biblically based Christian Education in a caring and nurturing environment to equip future generations for life with hope, meaning and purpose.*

*This will be achieved by:*

- bringing the Word of God and the love of Christ into the homes and hearts of our College members and the wider community
- working together as a united Body of parents, Staff and Board for this common goal and the overall well-being of our College
- providing an educational facility where the focus is on both academics and the spiritual development and individual needs of our students

*This will happen through:*

- committed Christian teachers, who will by word and example, teach in a way that is encouraging and supportive, recognising that each student is an individual who possesses various gifts and abilities
- teachers who will provide pastoral care and nurturing, as well as striving to provide excellence in the teaching of students in their care
- a strong support network made up of Christian parents, Staff and College Board continually striving together to serve God and one another, where each will feel special and valued, both in our College and as members of the wider community

*With God's blessing, Harvest Christian College will continue to spread the love of the Lord until He returns.*

*"Knowledge, Character, Service and Destiny aligned with Jesus."*

# Harvest Christian College Mission Statement

*Harvest Christian College is a low fee F-12 College that exists to educate students within a loving and caring Christian environment and to equip them with the life skills that will assist them to achieve excellence in their chosen careers and vocations.*

*It does this by employing teachers who:*

- have a clear commitment to Jesus Christ as their Lord and Saviour
- are professionally qualified and competent in their areas of teaching
- show a capacity to apply their faith to the concepts within the curriculum and the realities of life
- are dedicated to supporting students in a loving and caring Christian manner

*By using teaching materials and curriculum that:*

- reflect the Christian view of life
- prepare the students for their chosen career whether that be tertiary studies or employment
- includes music studies, computing studies and the study of a language other than English

*By having class sizes that provide the best possible learning environment.*

*By providing buildings and equipment that are:*

- suitable and adequate to fulfil the needs of the curriculum
- kept in good order and repair

*By providing a safe working and learning environment and providing training opportunities to ensure that this happens.*

## PART L - DECLARATION BY PARENTS / CAREGIVERS

We the undersigned request enrolment to Harvest Christian College and agree to the following:

- That our child be enrolled at Harvest Christian College, and agree for our child to be taught in accordance with the Basis of Faith of the Copper Triangle Christian School Association.
- I / We understand that the College has full discretion in the discipline of our child and that the College reserves the right to dismiss, suspend or place on probation students who do not respect the College's standards or do not cooperate in the educational process.
- I / We have read the College Policy Booklet and agree to the conditions set out therein.
- I / We agree to support the College Uniform Policy by providing the required uniform for my/our child and ensuring that it is appropriately maintained and worn.
- I / We understand that from time to time the College policies are changed and updated and agree to abide by and uphold any changes made.
- I / We authorise the College to contact a doctor or Ambulance and, if necessary, to arrange for hospital treatment in case of emergency. I / We accept responsibility for all costs involved.
- I / We agree to notify the College before 9:15am on the days when my / our child will be absent from College.
- I / We agree to publicly support the College in a positive way in the community and to use the College Grievance Policy where required.
- I / We hereby accept full responsibility for full payment of all fees billed in relation to the child being enrolled on this form. I / we further understand and accept that I / we may be charged penalty fees for late payments of fees, including all conditions contained in Part K of this document.
- I / We understand that should our account be forwarded to a collection agency due to non-payment of college/tuition fees, we will be responsible for the costs of collection and or legal fees associated with this.
- I / We agree to this enrolment contract in its entirety and as accepted by me/us in the previous pages.
- I / We understand that the College yard is supervised from 8.30am until 3.00pm and that the College cannot accept responsibility for children in the yard outside of these times.
- I / We understand and accept that a full term's notice must be given prior to withdrawing a child or transferring to another school/college. If not, a full term's fees are payable in lieu of notice.

**\*\*Both parents/guardians are required to sign unless the applicant is a sole parent.\*\***

Father / Stepfather/Guardian

Name: ..... Signature: ..... Date: .....

Mother / Stepmother/Guardian

Name: ..... Signature: ..... Date: .....

## PART M - AUTHORITY TO COLLECT INFORMATION FROM OTHER AGENCIES AND COLLEGES

**IMPORTANT: Please choose the option you prefer from those listed below.**

- I / we, the undersigned, GIVE APPROVAL for authorised representatives of Harvest Christian College to collect information about the student relating to Parts E, G, H, and I of this form, from past Colleges, agencies and support organisations, and to discuss this information with authorised representatives of those organisations.

**OR**

- I / we, the undersigned, request that SPECIFIC APPROVAL be requested and authorised by me/us IN EACH INSTANCE to collect information about the student relating to Parts E, G, H, and I of this form, from past Colleges, agencies and support organisations, and to discuss this information with authorised representatives of those organisations. I / we understand that progress on this enrolment is dependent on the speed with which the approval is granted and the information supplied.

**OR**

- I / we do NOT give approval for Harvest Christian College to collect information about the student from past Colleges, agencies and support organisations, and to discuss this information with authorised representatives of those organisations. I / we understand that progress on this enrolment is dependent on the speed with which the approval is granted and the information supplied.

Father / Stepfather/Guardian

Name: ..... Signature: ..... Date: .....

Mother / Stepmother/Guardian

Name: ..... Signature: ..... Date: .....

## PART N - DECLARATION BY PARENTS / GUARDIANS

I / we, the undersigned, declare that the information contained in this Application for Enrolment, is to the best of my / our knowledge, complete and correct.

I / we affirm that as a parent / guardian with the Harvest Christian College community, which includes all parents, staff, students, volunteers and guests, I / we will encourage my child in fulfilling their personal student declaration (for students in Years 7 to 12).

Father / Stepfather/Guardian

Name: ..... Signature: ..... Date: .....

Mother / Stepmother/Guardian

Name: ..... Signature: ..... Date: .....

### STUDENT DECLARATION (Middle College and Senior College Students only)

The community of Harvest Christian College recognises and affirms that each person is fearfully and wonderfully made by God, the Creator of all things, and is therefore deserving of being treated with respect and honour, not because of what they do or achieve, but because of who they are.

I declare that as a member of the Harvest Christian College community (which includes all parents, staff, students, volunteers and guests) and understanding that as a Harvest Christian College student I am a role model for other students, I will in all areas of College life:

- **Respect** and honour each member of the College and value their rights as members of the College community
- Act with **integrity** in all areas of College life
- **Serve** the College community with a willing heart
- Strive for **excellence** in all areas of College life

I will demonstrate this commitment to contribute positively to the culture of the College by:

- Willingly submitting to those who care for and have authority over me
- Applying myself to my studies to the best of my ability
- Behaving in a manner that upholds and enhances the reputation of the College within the College grounds, travelling to and from College, and when involved in excursions and other extracurricular activities
- Wearing the College Uniform with pride
- Caring for the College environment and all facilities

Student

Name: ..... Signature: ..... Date: .....

Father / Stepfather/Guardian

Name: ..... Signature: ..... Date: .....

Mother / Stepmother/Guardian

Name: ..... Signature: ..... Date: .....