



Our Lady of
Mercy College

Application for Enrolment

Student Name:

Academic year for which enrolment is sought (e.g., Year 7):

Calendar year for which enrolment is sought (e.g., 2028):

OFFICE USE ONLY

Interview Date:

Interview Time:

Interviewer:

Application Fee Received

Birth Certificate School Report Naplan Visa Medical Form Immunisation Statement

APPLICATION FOR ENROLMENT (Page 2/4)

Student Information:

Academic year for which enrolment is sought (e.g., Year 7):

Calendar year for which enrolment is sought (e.g., 2023):

Current School:

Suburb:

First Name:

Middle Name:

Surname:

Preferred Name:

Date of Birth: / /

Gender: Male Female Other

Residential Address:

Suburb:

Postcode:

Language Spoken at Home:

Second Language

Country of Birth:

Nationality:

Indigenous Status: Aboriginal Descent Torres Strait Islander Descent Both Neither

Citizenship / Visa: Citizen New Zealand Citizen Permanent Resident Temporary Resident Other

Visa Class / No:

Date of Arrival:

Religion:

Parish:

Baptism Date: / /

Reconciliation: / /

Holy Communion: / /

Confirmation: / /

Caregiver / Guardian 1:

Relationship to student:

Title: First Name:

Surname:

Country of Birth:

Nationality:

Language:

Religion:

Residential Address:

Suburb:

Postcode:

Postal Address (if different):

Email Address:

Mobile:

Home Number:

Caregiver / Guardian 2:

Relationship to student:

Title: First Name:

Surname:

Country of Birth:

Nationality:

Language:

Religion:

Residential Address:

Suburb:

Postcode:

Postal Address (if different):

Email Address:

Mobile:

Home Number:

Living Arrangements and Guardianship:

Student lives with: Both Caregiver / Guardian 1 and 2 Caregiver / Guardian 1 Caregiver / Guardian 2

Other

Are there any current Family Court Orders or current Restraining Orders that would apply to the child? Yes No

Name of Person(s) with legal guardianship of the student:

If applicable, please attach a copy outlining details of any special or restricted access arrangements.

Siblings:

Name: School/ Year:

Name: School/ Year:

Name: School/ Year:

Other Information:

State the reason why you wish your child to attend the College:

Has the student been suspended or expelled from any previous school? Yes No

How many days has your child been absent from school last term?

APPLICATION FOR ENROLMENT (Page 4/4)

I/we understand and accept that the completion of this application/enrolment form does not guarantee an enrolment interview. Successful applicants will be determined in accordance with the school's enrolment criteria.

I/we understand and accept that attendance at an interview does not guarantee an enrolment offer being made.

I/we understand that enrolment of a student in one Catholic school does not guarantee the enrolment of that student in any other Catholic school.

I/we have completed this application form fully and to the best of my/our knowledge.

Further, I/we acknowledge and accept that if it can be demonstrated that I/we have withheld information relevant to the application/enrolment process, especially in relation to this student's Parenting Orders, then the enrolment may be refused or terminated on this ground.

I/we have read and fully understand and agree that enrolment in a Catholic school means that we and our child will participate fully in all required aspects of the educational program of the school including the Religious Education program of the school.

I/we have read and fully understand and agree to the terms and conditions set out in the school fee collection policy.

I/we agree to abide by the policies and directions of the school and the Catholic Education Commission of Western Australia as they are enacted from time to time.

Caregiver / Guardian 1:

Signature:

Date: / /

Caregiver / Guardian 2:

Signature:

Date: / /

Please enclose the following supporting documentation:

Birth Certificate

Most recent school report

NAPLAN report

Baptism certificate (if baptised Catholic)

Priest reference

Copy of Passport, Visa or travel documents – including date of entry stamp (if born overseas)

AIR Immunisation Statement (not more that 2 months old at time of enrolment)

Other relevant education or psychological assessments

Copy of Parenting, Restraint or Custodial Order (if applicable)

Please return to: Enrolments Department
Our Lady of Mercy College
100 Leisure Drive, PO Box 220, Australind WA 6233
Ph: (08) 9720 3300
enrolments@olmca.wa.edu.au