



St Marcellin
CATHOLIC COLLEGE

Application to Enrol Pre-Kindergarten FORM

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STUDENT LEGAL SURNAME (AS SHOWN ON BIRTH CERTIFICATE)

STUDENT LEGAL FIRST NAMES (AS SHOWN ON BIRTH CERTIFICATE)

		<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE
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Preferred Name (if applicable)

Date of Birth

Gender

Academic Year of Entry: Pre-Kindergarten → Calendar Year of Entry	20	Does the student live in a shared family arrangement?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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Address		State	Postcode
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Birthplace	Nationality	<input type="checkbox"/> YES <input type="checkbox"/> NO	Australian Permanent Resident	Aboriginal	<input type="checkbox"/> YES <input type="checkbox"/> NO	Torres Strait Islander	<input type="checkbox"/> YES <input type="checkbox"/> NO
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<i>If not Australian born →</i>	Country of Citizenship	Date of arrival in Australia	Number of years in Australia	Visa type
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Religious Denomination	Parish	Suburb	<input type="checkbox"/> YES <input type="checkbox"/> NO
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OFFICE USE ONLY

RECEIPT:	DATE:	APPLICATION:
INTERVIEW DATE:	INTERVIEW TIME:	INTERVIEWER:

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2024.v3



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PARENT / GUARDIAN 1

Title		Surname		First Name	
Address*		(*only required if different from student)		State	Postcode
How often does the student live with this Parent? <input type="checkbox"/> ALWAYS <input type="checkbox"/> SHARED <input type="checkbox"/> NEVER					
Birthplace*			Nationality*		
Religious Denomination*		Parish*		Suburb	
Contact Numbers	Home	Mobile	Business	Email	

PARENT / GUARDIAN 2

Title		Surname		First Name	
Address*		(*only required if different from student)		State	Postcode
How often does the student live with this Parent? <input type="checkbox"/> ALWAYS <input type="checkbox"/> SHARED <input type="checkbox"/> NEVER					
Birthplace*			Nationality*		
Religious Denomination*		Parish*		Suburb	
Contact Numbers	Home	Mobile	Business	Email	

CUSTODY / GUARDIANSHIP

Name of person(s) with legal guardianship of the student

If applicable a copy of any Parenting or Restraint Order is attached YES NO

Any other conditions enforced at law?

SIBLINGS CURRENTLY ATTENDING A CATHOLIC SCHOOL

Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>
Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>
Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>
Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>

SIBLINGS CURRENTLY ATTENDING OTHER SCHOOLS

Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>
Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>
Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>
Name	<input type="text"/>	Year Level	<input type="text"/>	School	<input type="text"/>

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FURTHER INFORMATION

Please state the reason/s you have chosen to send your child to St Marcellin Catholic College?

Is there anything you'd like to share at this stage about your child's journey?

How did you first hear about the College?

WORD OF MOUTH

ADVERTISING

OPEN DAY /
INFORMATION EVENT

WEBSITE

SOCIAL
MEDIA

DISCLOSURE

Do you agree that the information supplied in the Student Information and Family Information sections, can be provided to the relevant Parish Priest?

YES

NO

ENROLMENT AGREEMENT

It is essential both parents/carers/guardians and students read and sign the following agreements prior to submitting this application for consideration.

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 College'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 the College means that we and our child will participate fully in all required aspects of the educational program of the College including the Religious Education program of the College.

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

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

I/we understand that enrolment in Pre-Kindergarten does not automatically enrol, nor guarantee your child in future year levels at the College. A separate application will need to be submitted to enrol for Kindergarten to Year 12 at the school.

SIGNATURE OF PARENT / GUARDIAN 1

DATE (DD/MM/YY)

SIGNATURE OF PARENT / GUARDIAN 2

DATE (DD/MM/YY)

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CHECKLIST FOR FAMILIES - APPLICATION STAGE

Submit the below to enrolment@stmarcellin.wa.edu.au:

Required	If applicable
<input type="checkbox"/> Application Form - ensure all parents / guardians have read and signed the Enrolment Agreement on page 3	<input type="checkbox"/> Parish Priest Reference Form
<input type="checkbox"/> Immunisation Records <i>(Australian Immunisation Register (AIR) History Statement - not more than 2 months old)</i>	

CHECKLIST FOR FAMILIES - ENROLMENT INTERVIEW

Originals of these documents should be presented at the enrolment interview:

Required	If applicable
<input type="checkbox"/> Original Birth Certificate	<input type="checkbox"/> Passport / Visa / Citizenship Certificate <i>(if born outside Australia) - including date of entry stamp</i>
	<input type="checkbox"/> Parents Citizenship or Visa documents <i>(if both parents were born overseas)</i>
	<input type="checkbox"/> Parenting, Restraint or Custodial Order <i>(if applicable)</i>
	<input type="checkbox"/> Catholic Baptism Certificate <i>(if Baptised Catholic)</i>

STUDENT INDIVIDUAL NEEDS

The School Education Act 1999 requires the provision 'of details of any condition of the enrollee' that may call for special steps to be taken for the benefit of protection of the enrollee or other persons in the school (16G). To assist the College to respond to individual requirements please provide documentation, including any diagnosis at the interview. This information will assist with planning for his/her learning and welfare during school hours.

CEWA STANDARD COLLECTION NOTICE

The up to date version can be accessed at www.cewa.edu.au/publication/cewa-privacy-collection-notice/

SCHOOL AGE CALCULATOR

All children of compulsory school age must be enrolled at school and attend every day. Find the year your child can start school with the below School Age Calculator.

[Enrol at a Western Australian school - Department of Education](#)