



Enrolment Application

APPLYING FOR YEAR _____ IN 20_____

STUDENT SURNAME _____

STUDENT FIRST NAME _____
(as shown on Birth Certificate)

Please print and complete this form, marking NA for information that is Not Applicable. Return form to Our Lady of Mercy College with attached documents *if appropriate** to your application. To ensure a valid application, check our website for enrolment closing dates.

Incomplete applications WILL NOT be accepted.

CHECKLIST OF REQUIREMENTS

- Copy of Birth Certificate
- Copy of Baptism Certificate
- Supporting Material*
- Copy of Visa/Australian Passport/Australian Citizenship Certificate*
- Application Fee \$80.00 (non refundable)

Our Lady of Mercy College
A Ministry of Mercy Education Ltd
52 Cape Street Heidelberg 3084 Tel: **03 9459 2511** Fax: **9459 0579**
Web: www.olmcheidelberg.catholic.edu.au

College Registrar: Ms Merri O'Halloran
Email: mohalloran@olmcheidelberg.catholic.edu.au

The information you provide is collected for administration purposes in processing your enrolment application. Your daughter's name, current school and parish will be shared with other Catholic secondary schools in the region at the time of finalising enrolment offers (September of each year). All other information will be kept confidential and will not be disclosed for any other purpose.
If your application is successful, the College will use the information for education and administration purposes (cf. OLMC Privacy Policy on website).

Student Details

Surname _____ First names _____
(as shown on Birth Certificate)
Preferred First Name _____
Residential address _____ Postcode _____
Postal address _____ Postcode _____
Home Phone _____
Date of birth _____ Country of birth _____ Place in family _____

Resident Status: Australian Citizen
 Permanent Resident Please attach copy of Visa
 Temporary Resident Please attach copy of Visa

Note: Children born in Australia do not automatically acquire Australian citizenship unless at least one parent is an Australian citizen or permanent resident at the time of the child's birth. If a child is born in Australia and neither parent was an Australian citizen or permanent resident at the time of the birth, please provide a copy of the child's citizenship certificate, or Australian passport, or relevant visa.

Year of Arrival in Australia _____ Day _____ Month _____ Year _____
Commenced School in Australia _____ Day _____ Month _____ Year _____

Present School _____ Suburb _____

Present Grade/Year Level _____ Number of years at current school _____

Language spoken at home _____

Special education needs and detail of support offered at present school _____

Sisters who are current/past pupils at OLMC (if past pupil please enter year left)

Name _____ Class/Year left _____ Name _____ Class/Year left _____

Name _____ Class/Year left _____

If mother was a past pupil at OLMC: Maiden name Years attended

Religion & Sacraments

Religion _____ Parish church attended/suburb _____

Sacraments received: Baptism Yes Year No

A copy of the certificate of Baptism is required with this application Attached

Eucharist YES Year _____ NO Confirmation YES Year _____ NO

Family Details & Information

Student lives with: Both Parents Mother Only Father Only Other

Are there any Family Court Orders, Parenting Plans that have been issued in relation to the enrolling student?

Yes No

(If YES supporting documentation must be provided)

Parent Information	First Contact (please tick)	Second Contact (please tick)
	Mother <input type="checkbox"/> Father <input type="checkbox"/> Other* <input type="checkbox"/>	Mother <input type="checkbox"/> Father <input type="checkbox"/> Other* <input type="checkbox"/>

*Relationship to Student

Surname _____
 First Name _____ Title _____
 Religion _____
 Date of Birth _____
 Country of Birth _____
 Citizenship _____
 Residential Address _____
 _____ Postcode _____
 Telephone _____
 Mobile _____
 Work _____
 Email _____
 Occupation _____
 Name of Employer _____

*Relationship to Student

Surname _____
 First Name _____ Title _____
 Religion _____
 Date of Birth _____
 Country of Birth _____
 Citizenship _____
 Residential Address _____
 _____ Postcode _____
 Telephone _____
 Mobile _____
 Work _____
 Email _____
 Occupation _____
 Name of Employer _____

Accounts to be sent to

Mother Father Both Parents

Account Address _____ Postcode _____

Emergency Contact

Name _____ Relationship to student _____
 Address _____
 Postcode _____ Phone _____ Mobile _____

Further Information

Please give any further information you would like us to be aware of in regard to this application. Please feel free to add one extra page.

Note:

1. For students enrolling in Years 8-12, the most recent school report and NAPLAN results are required.
2. Detailed health information is not required until acceptance of enrolment.

Enrolment Preference

Schools applied to (including Our Lady of Mercy College). Many parents apply for enrolment at more than one school and it is wise to do so but we do need to know your order of preference. You are unable to have 2 first preferences. If this order changes, could you please notify the College in writing. Enrolment information will be shared with other Catholic colleges.

1st Preference _____ 2nd Preference _____ 3rd Preference _____

Conditions of Enrolment

- I/we agree with and support the teachings of the Catholic Church and rules and regulations of the College
- I/we agree that my daughter will participate fully in the Religious Education program and attend liturgies, days of reflection and renewals which form part of the life of the College
- I/we understand the expectation that my daughter is to take part in the year level activities and whole school activities and camps organised by the College as part of the compulsory curriculum
- I/we will take every reasonable opportunity to involve myself in the education of my daughter and the life of the College
- I/we will support the College in its application of student welfare policies
- I/we give permission for my daughter to receive medical assistance if the school staff considers that this action is advisable and I agree to pay the expenses incurred
- I/we agree to pay the fees and levies charged by the College and to give one term's notice or the payment of one term's fees if my daughter is withdrawn from the College as set out in OLMC Tuition Fee and other Charges Policy.

Signatories

Father/Guardian's signature _____ Date _____

Mother/Guardian's signature _____ Date _____

Student's signature (if in Year 8 or above) _____ Date _____

Application Fee - \$80.00 (non refundable)

PLEASE TICK (✓) METHOD OF PAYMENT: (inc GST) Cheque Cash Visa Mastercard

Card Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Expiry Date ____/____/____

Name on Card _____

Signature on Card _____ Date ____/____/____

Feedback

How did you hear about OLMC? (select where appropriate)

- | | |
|--|--|
| <input type="checkbox"/> Sister attends or attended OLMC | <input type="checkbox"/> School Guide Publications |
| <input type="checkbox"/> Friends have a daughter at OLMC | <input type="checkbox"/> Recommendation from past students |
| <input type="checkbox"/> Website | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Mother attended OLMC | _____ |
| | _____ |

College Tour

Have you attended a College Tour? Yes No Date/Year of Tour (if known) _____

For Office Use Only

Receipt No: _____

Received _____

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