



WESTERN REGION BANGLA SCHOOL

ABN 67 209 290 566

REGISTRATION ID: A0062242R

ENROLMENT FORM

Student Details: **Enrolment Year:**

Student Surname:

Student First Name:

Student Middle Name(s):

Student Date of Birth: Gender: Male Female

Student Mainstream School Name:

Mainstream School Year Level:

Name of previous Community Language School:

Residential Address:

Suburb: Postcode:

Student Australian residency status:

Australian Citizen/Permanent resident

Fee-paying international student

Other If Other, please specify:

Parent Details:

Father

Full Name:

Home Phone:

Mobile Phone:

E-mail:

Mother

Full Name:

Home Phone:

Mobile Phone:

E-mail:

Emergency Contact Details:

(Only If different from parent)

Emergency Contact Name:

Relation to student:

Emergency Contact Phone:

Student Medical Information:

Does your child have any learning difficulty and/or medical condition (E.g. asthma, epilepsy, allergies etc.)?

Yes No

If yes, please specify and provide a detail medical care plan.

Photographing, Filming and Recording Students at WRBS Annual Consent Form and Collection Notice:

During the school year, there are many occasions and events where staff may photograph, film, or record students participating in school activities and events. We do this for many reasons including to celebrate student participation and achievement or to communicate with our parents and school community.

This notice applies to photographs, videos, or recordings of students that are collected, used, and disclosed by the school. We ask that any parents/carers or other members of our school community photographing, filming, or recording students at school events (e.g. concerts, sports events, etc) do so respectfully and safely and that any photos, video, or recordings ("images") of students are not publicly posted (e.g. to a social media account) without the permission of the relevant parent/carer.

If you do not understand any aspect of this notice, or you would like to talk about any concerns you have, please contact the community language school.

I consent to my child being photographed or audio/visually recorded participating in class or school activities for the use and purposes of sharing

- with other families in the school that will only be sent to school families in my child's class.
- in the school newsletter.
- on the school website, in CLS marketing, or on CLS social media sites.

Please select one of the two options:

I agree to the community language school using photos, videos, or recordings of my child as described above.

I do not agree to the community language school using photos, videos, or recordings of my child as described above.

You may withdraw your consent at any time however please note that it may not be possible for the school to amend past publications or to withdraw images that are already in the public domain.

Fees: Enrollment fee of \$10 is mandatory.

(Please Submit/Upload the payment receipt if the payment made through Bank Transfer)

Bank Details:

Account Name: Western Region

Bangla School

BSB: 033 695

Account no.: 533 380

Bank Transfer

Online

Cash

Privacy Collection Notice - Protecting your privacy and sharing information

The information about your child and family collected through this enrolment form will only be shared with school staff who need to know to enable the community language school to educate or support your child, or to fulfil legal obligations including duty of care, anti-discrimination law, and occupational health and safety law. This includes using the contact information provided if there are any emergencies or medical issues. Residency status is checked to ensure that your child is eligible for funding. Your child's name, date of birth, and mainstream school name/s will be shared with the Department of Education (the Department) to confirm funding eligibility. The information collected will not be disclosed beyond the community language school or the Department without your consent unless such disclosure is lawful. For more about information-sharing and privacy, see the Department's privacy policy at Department of Education privacy policy | vic.gov.au

If you have any queries about the handling of your information by the WRBS or to correct and update your information please contact the school.

Parent/Guardian Privacy Consent and Declaration

I confirm that the information provided on this enrolment form is true and correct and I acknowledge and agree to the terms and conditions of enrolment accompanying this enrolment form. I consent to:

- the collection of my child's health and personal information by the community language school for the purposes mentioned in this form;
- the community language school disclosing my child's personal information contained in this enrolment form (name, date of birth, and mainstream school name), to the Department of Education for data verification and funding purposes

I understand that the Principal or teacher (where the Principal or teacher in charge is unable to contact me) is allowed to disclose personal and health information to professional third parties in the event of a medical emergency, in accordance with Victorian privacy law.

Name of Parent/Guardian:

Parents/Guardian's signature:

Father Mother Guardian

Date:

WRBS follows the Vic Governments Child safety policies