

Pedia Greek School

Campus:
Westall Secondary College
88 Rosebank Avenue, Clayton South VIC 3169

Po Box 681, Patterson Lakes VIC 3197
Ph: 9028 2088 or 0456 114 829
enrolments@pediagreekschool.org.au
<https://pediagreekschool.org.au>



Enrolment Form 2021

Preferred day for student to attend: (Please tick boxes where applicable)

Monday <input type="checkbox"/>	Saturday <input type="checkbox"/>
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Student Details

Surname:	
Given Name:	
Full Name in Greek:	
Sex (tick): <input type="checkbox"/> Male <input type="checkbox"/> Female	Date Of Birth: ____/____/____
Nationality:	Religion:
Language spoken at home:	
Year Level in Mainstream School:	
Mainstream School Name and Suburb:	
Year Level at Greek School:	
Is your child currently enrolled at another community language school to learn the same language? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, which school? _____	
Has your child ever been enrolled at another community language school to learn the same language <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, which school? _____	
Student Lives With: <input type="checkbox"/> Primary family <input type="checkbox"/> Always <input type="checkbox"/> Mostly <input type="checkbox"/> Balanced	
Custody Order : <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes please attach court order document/s)	

Is your child:

An Australian citizen/Permanent resident YES NO

A full-fee paying international student YES NO

Other If other, please specify: _____

Emergency Contact Details

	Name	Relationship	Telephone Contact
1			
2			
3			

Medical History

Does the student have a medical condition?

Yes No

If yes, please specify:

Does the student suffer from Allergies or Asthma/Anaphylaxis?

(If YES Action Plan must be attached)

Yes No

List Symptoms:

If your child displays any of the symptoms listed above, please tick what action/s should be undertaken:

- Administer Medication
- Inform Emergency Contact
- Other Medical Action (If yes please specify)
- Call Ambulance

Does the student take medication? Yes No

If yes name of medication:

Is the medications taken regularly as a preventative or in response to symptoms?

Preventative Response

Medication is administered by Student Teacher Parent

Indicate the dosage of medication:

Indicate how frequent the medication is to be taken:

Medication is stored: with student with teacher Fridge

Dosage time/s:

Does the student suffer from any of the following impairments?

Hearing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Speech:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vision:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mobility	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other	<input type="checkbox"/> Yes	If other, please specify:
Student Medicare Number:		Position on card:
Ambulance Member: <input type="checkbox"/> Yes <input type="checkbox"/> No		

Primary Family Details

Adult A Details (Primary Carer)

Legal Surname:	
Legal First Name:	
Relationship to student:	
Address:	
Home Number:	Mobile Number:
Email Address:	

Adult B Details

Legal Surname:	
Legal First Name:	
Relationship to student:	
Address:	
Home Number:	Mobile Number:
Email Address:	

TUITION FEES

Primary School	\$640	Per Term	\$160.00
Secondary School	\$660	Per Term	\$165.00
VCE	\$700	Per Term	\$175.00

3rd child pays on \$370 per year
4th Child is free

Tuition fees can be paid by direct deposit, monthly debit, EFTPOS

Direct Deposit bank details are:

BSB: 063 121

Acct: 1089 1193

Acct Name: Pedia Greek School

Reference: Your family Surname (so we know who the funds belong to)

- A \$50 deposit is required to secure a position for your child. All deposit amounts will be deducted from Term 1 Tuition Fees.
- A \$50.00 discount off the total yearly fee is given to each student if the Tuition Fees are paid in full by Monday 8th February 2021.
- If the Tuition Fees are paid by term installments, the fees are due by the first week of each term. All late payments will incur a \$20 late fee.
- Tuition Fees are non refundable.
- Tuition fees are fixed regardless of how many weeks students attend school, 4 terms of fees are due regardless of commencement or completion date.
- Report certificates/cards will not be distributed unless fees are paid in full.
- The parent/guardian who signs The Enrolment Form is responsible for the Tuition Fees.

In the event of illness or injury to my child whilst at school, I authorise the teacher in charge of my child if I am unable to be contacted or if it is impracticable to contact me:

- I consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner.
- I consent to my child receiving first aid if deemed necessary.

Signature: _____

Permission for Publication of Photos and Recordings

From time to time, we may take pictures and/or conduct video recordings during school projects/events. We would like your permission to use these pictures and video on our school website, in promotional material, or in emails to parents.

Photos and videos are only used for the purpose of Pedia Greek School.

YES, I grant you permission to use photos and video recordings of my child for Pedia Greek School.

NO, Please do NOT take or use any photos/video recordings of my child.

Emergency Contacts

These are people that Pedia Greek School may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Pedia Greek School.

Privacy Collection Notice – Protecting your privacy and sharing information

Thank you for taking the time to complete this Student Enrolment Form. We understand that the information you have provided is confidential and will be treated as such. The details are required so staff are able to properly enroll your child at our school.

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 and Department of Education and Training (Department) to educate or support your child, or to fulfill legal obligations including duty of care, anti-discrimination law and occupational health and safety law. The information collected will not be disclosed beyond the Department without your consent, unless such disclosure is lawful, For more about information-sharing and privacy, see the Department’s privacy policy at:
<http://www.education.vic.gov.au/Pages/privacy.aspx>

Student Collection Policy

Pedia Greek School has the following procedures in place for the safe collection of students from school, both during and after normal school hours:

- Parent: A Parent may collect their child from school or authorise a relative or friend to collect their child.
- School: Pedia Greek School must only allow students to be collected by their parents (subject to any specific court orders or by a person who has been authorised by the parents to pick up their child. If the authorised person collecting the student is not known to the school, verification or identity using suitable photo identification (such as a driver’s licence) must be sighted by Pedia Greek school personnel.
- School: Pedia Greek School must record the details of when a student has been collected early from school including the date and time, reason for collection and signature.

I certify that the information completed in this form is correct:

Print Name : _____

Signature: _____ Date: _____