



HEWETT PRIMARY SCHOOL WAITING LIST/EXPRESSION OF INTEREST

SA GOVERNMENT SCHOOLS AND CHILD DEVELOPMENT

Please complete the details overleaf to place your child's name on the waiting list at Hewett Primary School.

You will be notified if a place is available prior to your child's anticipated commencement date; you will then be asked to complete a DfE Enrolment Form.

INFORMATION PRIVACY STATEMENT

The Department for Education (DfE) is committed to respecting the confidentiality of information provided by children/students and parents, for example, information requested on child/student enrolment forms.

The information requested in this form is to enable the site and DfE Regional Office to manage projected enrolments.

If organisations are contracted on behalf of DfE to undertake tasks that require access to waiting list data, the contract(s) between DfE and those organisations will include strict confidentiality and disposal provisions.

The information provided on the waiting list form is stored securely in local school/preschool and DfE databases. The disclosure of personal information held by Government is regulated by the information privacy principles (see reference above). Unless required to do so by a law of the State or Commonwealth, as permitted by the Information Privacy Principles or in accordance with the information sharing guidelines (see below), DfE will not otherwise disclose the information to others without your consent.

INFORMATION SHARING STATEMENT

There will be occasions where sharing information with others outside this site will be important to your child's placement. In these circumstances, DfE follows the SA Government's Information Sharing: Guidelines for promoting the safety and wellbeing of children, young people and families (ISG). www.acvp.sa.gov.gu

Under the ISG your consent for the sharing of personal information about your child will be sought and respected in all situations unless: it is unsafe / impossible to gain consent or consent has been refused and without information being shared, a child or children will be at increased risk of serious harm.

PROOF OF RESIDENCE

As a zoned school, the school requires evidence of the child's primary place of residence. At the time of the Expression of Interest/Enrolment one or more of the following needs to be provided.

- A gas or electricity bill stating the residential address (not a business address) and the name
 of the parent/guardian. The utility bill should be recent. Telstra bills and water rates are not
 acceptable
- A copy of the property's Contract of Sale (if the home is the permanent residence), or
- If the parent/guardian is renting then they should provide a rental agreement and bond receipt (from the Residential Tenancies Tribunal) stating where the parent/guardian is currently, or will be, residing over the next 12 months.
- Please note, the provision of a Contract of Sale on its own is not considered to be sufficient documentation. The property may have been purchased by the parent/guardian and rented to other occupants. This is why a copy of a recent utility bill is also required.

Date to commence school://	Students Residential Address Details (Address of Parent/Guardian with whom student lives) (Please provide proof of Residence)
Commencement Year Level:	
Previous school attended:	Mailing Title:
Student Personal Details	Address Line 1
Family Name:	Address Line 2
	Suburb/Town:
Given Names:	Postcode:
Preferred Name:	Phone Number:
Date of Birth://	County
Sex: Male Female	County: (if not Australia)
How far does the student live from school or school bus route? km	Hundred:
Is the student of Aboriginal or Torres Strait Islander origin?	Section:
(For persons of both Aboriginal or Torres Strait Islander origin, circle both 'Yes' .)	OFFICE USE ONLY
No Yes Yes	Is this inside the school zone? Yes No
Australian Aboriginal Torres Strait Island	Confirmed by office staff:
Is this student under the Guardianship of the Minister for Families and Communities (GoM) or in alternative care?	Date:/
No Yes	Enrolment accepted Y N Signature
Biological Parent or Legal Guardian	Brothers and Sisters
Mr/Mrs/Ms/Other:	Full Name/s of siblings currently attending Hewett Primary School:
Family Name:	Year Level
Given Names:	
Relationship to student	Year Level
******	Year Level
Mr/Mrs/Ms/Other:	Does your child have any additional needs and or a
Family Name:	medical condition that may require additional support?
Given Names:	No
Relationship to student	Yes (please provide details)
Parent/Guardian signature. By signing this form you certify that all information given is true and accurate.	