

APPLICATION TO REGISTER



METHODIST
LADIES'
COLLEGE

STUDENT ENROLMENT DETAILS

Entry year level PK K 5 7 10 Entry year 20 Day Student Boarder

Please contact admissions to discuss entry in other year levels

Australian Citizen Visa Holder Subclass (eg 457) _____ Applying for a Visa
 Local Fee Paying Full Fee Paying

STUDENT'S DETAILS

Surname _____ First Name _____

Second Name _____ Preferred Name _____

Current Year Level _____ Curriculum Council Number (if known) _____

Current School _____ Years of Attendance _____

Previous School _____ Years of Attendance _____

Date of Birth ____ / ____ / ____ Country of Birth _____ Nationality _____

Language at Home English Other _____ Aboriginal No Yes

CONTACT DETAILS

Home Address _____

_____ Home Phone _____

Postal Address (if different) _____

FATHER'S DETAILS

Title _____ Surname _____ First Name _____

Occupation _____ Company _____

Mobile _____ Work Phone _____

Home Email _____ Date of Birth ____ / ____ / ____

Work Email _____ Preferred Email Work Home

MOTHER'S DETAILS

Collegian Yes Maiden Name _____ No

Title _____ Surname _____ First Name _____

Occupation _____ Company _____

Mobile _____ Work Phone _____

Home Email _____ Date of Birth ____ / ____ / ____

Work Email _____ Preferred Email Work Home

FAMILY DETAILS

SIBLINGS

Name	Age	Current School (if applicable)	Year Level	House (if MLC)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

FAMILY MEMBERS EDUCATED AT MLC (other than siblings)

Name at MLC	Date of Birth	Relationship to the Applying Student	House
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CUSTODY / GUARDIANSHIP

Parent/Guardian with whom your daughter lives _____

Both Parents Mother Father Other _____

Is a Parenting or Restraint Order applicable No Yes (please attach copy)

Please provide any other conditions enforced by law.

Please list below any family circumstances of which the College needs to be aware in order to ensure your daughter’s welfare needs are met (eg parent/s deceased, divorced etc). Please provide copies of documents, including court orders, if relevant.

CHURCH

Religious Denomination _____

EDUCATIONAL AND MEDICAL INFORMATION

EDUCATIONAL INFORMATION

Has your daughter ever encountered learning difficulties? If so, please describe the circumstances.

Is there any further information about your daughter's needs or aptitudes which we should know?

MEDICAL INFORMATION

Does your daughter suffer from any of the following?

Asthma Hearing impairment Diabetes

Allergy Sight impairment Epilepsy

Any condition to prevent your daughter from participation in any activity. Please provide details below:

Does your daughter take regular medication? If so, please provide details.

ADDITIONAL INFORMATION

How did you first hear about Methodist Ladies' College?

(Reputation, relatives, field days, newspapers, advertising, website, other)

What is the main reason you chose to enrol your child at Methodist Ladies' College?

Did you find the information you required on our website?

DECLARATION

I/We declare that the information provided on this form is true.

I/We have read the Terms of Enrolment (published on the College Website www.mlc.wa.edu.au) and agree to be bound by these and any other regulations which may be in force at the College at any time.

I/We have read and understood the Methodist Ladies' College Privacy Policy (published on the College Website www.mlc.wa.edu.au) in relation to the collection of student and parent information.

Should your daughter's educational or health circumstances change between date of application and entry to the College, I/we will inform the College.

I/We have completed this form and am/are returning it to Methodist Ladies' College with the following items attached:

CHECKLIST

- A copy of our daughter's Birth Certificate
- A copy of our daughter's two most recent school reports (if attended school previously)
- NAPLAN Results (if applicable)
- A copy of residency/visa/citizenship papers/Australian passport when both parents were born overseas

Father's Signature _____ Date ____ / ____ / ____

Mother's Signature _____ Date ____ / ____ / ____

Must be signed by both parents

METHOD OF PAYMENT

- Cash Cheque (made payable to Methodist Ladies' College)
- Credit Card **surcharge will apply* MasterCard Visa

Card Number

Expiry date /

Name of Card Holder _____

Signature _____

Amount \$150

OFFICE USE ONLY

Student Number _____

Registration Fee _____ Date Received _____