

Western Australian College of Agriculture Senior secondary application for enrolment

Thank you for your interest in applying to enrol your child at the Western Australian College of Agriculture. You must complete a separate enrolment application for each child.

Submitting an application for enrolment does not guarantee you will receive a place at the college. The college will notify you in writing of the outcome of your application.

If you are unable to complete this application form, please contact the college for help.

College details							
College name							
Enrolment type	Day student		Residential st	Residential student			
The student's details	(please co	mplete all	details below)				
Student surname							
Legal surname (if different)							
Given names							
Date of birth (dd/mm/yy)	1	1	Gender	Male	Female	Other	
Parent surname							
Parent first name			Title	Mr	Mrs	Ms	Other
Residential address (must be completed)							
(max 20 completes)						Postcode	
Postal address (if different from residential)							
, , , , , , , , , , , , , , , , , , , ,						Postcode	
Telephone (Home)	Telephone (Work, if convenient)						
Mobile phone number							
Email							
Level of entry (eg. Year 10)			Year	of entry (eg	J. 2022)		
If no, indicate start date	1	1					
If applicable, year level the s	student is curre	ently enrolled i	n (e.g. Year 10)				
If applicable, name of schoo	l at which the s	student is curr	ently or was last enro	lled			



The student's details (continued)							
Is the student a temporary resident	? Ye	es	No				
If yes, please complete							
Date entered Australia if born oversea	ıs.	1	1				
Visa Sub Class Number				Visa expiry date	1	1	
Does the student have health or med	dical con	dition, d	lisability o	r additional needs?	Yes	No	
This information will assist the prince Please provide details:	cipal in pla	anning to	provide th	ne best educational pro	gram for the	student.	
Declaration							
The information and statements pro	ovided in	this ap	plication f	or enrolment are true	and correc	t in relation t	o:
Name of person enrolling student							
Title	Mr	Mrs	Ms	Other			
Relationship to student							
(Independent minors and those aged	18 years	or older i	may apply	on their own behalf)			
Telephone (Home)				Telephone (Work	()		
Mobile phone number							
Signature					Date	1	1
If you are completing this form	anline er	nd are um	abla ta c	an this form places	hock this b	ov to confirm	the above

If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct.

Note: An offer is made on the understanding that the information provided is accurate and complete. The offer may be withdrawn if the information in your application is false or misleading.

Documents to be provided

The college will advise you of any additional documentation required.

Checklist: Please indicate the document you can provide to support this application.

Birth Certificate or extract or other identity documents

Proof of address

Copy of latest academic report in the year before expected enrolment, including Special Education Needs report and Individual Education Programs report (if applicable)

Information relating to health or medical condition, disability or additional needs (if applicable)

If your child is not a permanent resident of Australia, you must provide evidence of current Visa Sub Class and previous Visa Sub Class Number (if applicable, such as if current Visa is a Bridging Visa)

Please provide any other relevant information.

Office use only								
Documents provided:								
Birth Certificate or extract or other identity documents								
2. Proof of address								
3. Copy of latest academic report in the year before expected enrolment								
4. Information relating to health or medical condition, disability or additional needs (if applicable)								
 If your child is not a permanent resident of Australia, you must provide evidence of Visa Sub Class and previous Visa Sub Class (if applicable, such as if current visa is a Bridging Visa) 								
Date application received / / Year level								
Principal's approval Application for enrolment approved	Yes	No						
Name								
Signature of Date / principal/delegate	1							