



Gulf Christian College  
Brown Street  
(PO Box 210)  
NORMANTON QLD 4890

## APPLICATION FOR ENROLMENT FORM

### PRIVACY POLICY STATEMENT

1. The College collects personal, including sensitive, information about students, their parents or guardians, potential employees and other connected to the College. The collection of this information is for the primary purpose of the College fulfilling its educational services to the students whose parents seek a Christian education for their students. The College will also exercise its right to access the credit history of parents under law. Information is collected through filling out of application forms, face to face interviews and at times third party reports.  
The College will endeavour to keep personal and credit information accurate/up-to-date and complete. Parents are relied upon to assist the College in keeping information accurate and up to date. Any unsolicited information received by the College will be destroyed unless legal obligations require otherwise.
2. Some of the information the College collects is to enable the College to discharge its duty of care and legislative obligations. Full and frank disclosure of information requested is necessary for the provision of services to students and to establish a binding contractual relationship between the parties.
  - a) If the College does not obtain the information referred to above, the College may not be able to enrol or continue the enrolment of your child.
  - b) Health Information about students is sensitive information within the terms of the Privacy Principles under the Privacy Act. The College needs this information which will include reports from third parties re medical and other treating professionals and Court Orders.
3. The College communicates with the parents through the parent portal regarding consents for student identification, fundraising and marketing purposes.
4. The College from time to time may need to disclose personal, sensitive or credit information to others for administrative, safety and education or credit purposes. This includes to other schools, government departments, state authorities, medical practitioners and people providing services to the College, including specialist visiting teachers, sports coaches and volunteers. The College will take reasonable steps to secure and protect all information held from misuse, interference, loss, unauthorised access, modification or disclosure. Information held by the school will be either de-identified or destroyed when no longer of use to the school.
5. Parents have a right to make a written Complaint to the Principal if they consider these Privacy Principles have been breached. Parents may seek access to personal information collected about them and their student by contacting the College.

### Declaration of Faith

**Please read the following carefully as it describes the College's commitment to provide education within the Christian framework.**

1. Gulf Christian College is founded and based on Biblical principles and teachings.
2. The College upholds basic and fundamental truths and teachings of the Bible.  
These truths and teachings underpin the values taught at the College.
3. The purpose and mission of Gulf Christian College is to nurture and encourage students to live their life of learning and educational experiences, reflecting on the richness of their cultural history and exercising personal growth in the service of God.
4. Cultural heritage is recognized and regarded as intrinsic to the identity of the College enrolment, which reflects this community.
5. In this Christian community, certain attitudes and standards of behaviour are expected, which include:
  - a) Participation in the spiritual programs of the College by all students, with the support of their parents/guardians.
  - b) Christian values, morals and ethics are supported and respected by students, with the support of their parents/guardians.
  - c) The authority of the Principal and staff of Gulf Christian College is respected and submitted to by students and supported by their parents/guardians.
6. The enrolment of my/our child at Gulf Christian College is conditional upon their full participation in the compulsory curriculum and selected activities, including those of a specific Christian nature.

**PLEASE NOTE THAT FULL AND FRANK DISCLOSURE OF ALL INFORMATION REQUESTED MUST BE GIVEN**  
STRICTLY CONFIDENTIAL

Student Surname:	<input type="text"/>		
Given Names:	<input type="text"/>		
Preferred First Name:	<input type="text"/>		
Previous Surname:	<input type="text"/>	Sex:	<input type="checkbox"/> Male
Date of Birth:	<input type="text"/> Day <input type="text"/> Month <input type="text"/> Year		<input type="checkbox"/> Female
Evidence of date of birth is required	<input type="checkbox"/> Birth Certificate attached		
Has any member of this family been enrolled with Gulf Christian College before?	Yes <input type="checkbox"/>	No	<input type="checkbox"/>
If Yes,	Year last enrolled:	<input type="text"/>	
	And Family No. (if known):	<input type="text"/>	
Year level student is applying for?	<input type="text"/>	In Year:	<input type="text" value="20"/>

Was the student born in Australia? Yes <input type="checkbox"/> No <input type="checkbox"/>	Does the student identify as an Aboriginal or Torres Strait Islander?
If NO, in which country was the student born? <input type="text"/>	No <input type="checkbox"/> Aboriginal <input type="checkbox"/> TSI <input type="checkbox"/> Both <input type="checkbox"/>
Date of arrival in Australia : <input type="text"/>	If Aboriginal or TSI, what is the student's tribal background?
Does the student have permanent Australian residency? Yes <input type="checkbox"/> No <input type="checkbox"/>	Gkuthaarn <input type="checkbox"/> Kukatj <input type="checkbox"/> Kurtijar <input type="checkbox"/>
	Other: <input type="checkbox"/> please specify <input type="text"/>
Is the student from a non-English speaking background? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If YES, What is the student's first language?	<input type="text"/>
What language is spoken at home?	<input type="text"/>

<b>Office Use Only</b>	Date Received <input type="text"/>	Date of Admission <input type="text"/>	<b>Processed:</b> <input type="text"/>
Year Level <input type="text"/>	Year of Enrolment <input type="text"/>	Family Number <input type="text"/>	Interview with <input type="text"/>
Enrolment Payment received <input type="checkbox"/>	Welcome Letter <input type="checkbox"/>	Data entered <input type="checkbox"/>	

Siblings: (Please include details of all other siblings in the family, even if not living in same house)				
Full Name	Year of Birth	Sex	School Level	Living with Family
		Male <input type="checkbox"/> Female <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Male <input type="checkbox"/> Female <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Male <input type="checkbox"/> Female <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Male <input type="checkbox"/> Female <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**Parent/Guardian Details:**

**(Please supply details of natural parents/guardian figure who actually lives with the student)**

Father's Surname:  Natural Parent  Father Figure

First Name:  Cultural background:

Employer:  Country of birth:

Occupation:  Language spoken at home:

Phone (work):  Mobile:  Highest level of education:

Email (work):  Highest tertiary qualification:

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Mother's Surname:  Natural Parent  Mother Figure

First Name:  Cultural background:

Employer:  Country of birth:

Occupation:  Language spoken at home:

Phone (work):  Mobile:  Highest level of education:

Email (work):  Highest tertiary qualification:

**Previous Schooling:** (Please attach transfer and recent school reports)

Name of school:  Date left:  Year level:

Last school attended:  Queensland  Interstate  Overseas State:

Has any other year level been repeated? Yes  No  If yes, which level:

Any learning support (remedial/guidance) in previous school? Yes  No  If yes, give details:

Does a guidance/assessment file exist for this student? Yes  No

**Student Personal Details:**

**Emergency Contacts:** (This section **MUST** be completed)

Please supply details of two (2) emergency contact persons if parents/guardians are not available.  
Please inform the school if these addresses change

**CONTACT No. 1:**

Full Name:	<input type="text"/>	Phone (home):	<input type="text"/>
Address:	<input type="text"/>	Phone (work):	<input type="text"/>
Relationship to student:	<input type="text"/>	Mobile:	<input type="text"/>

**CONTACT No. 2:**

Full Name:	<input type="text"/>	Phone (home):	<input type="text"/>
Address:	<input type="text"/>	Phone (work):	<input type="text"/>
Relationship to student:	<input type="text"/>	Mobile:	<input type="text"/>

**Medical Details:**

Doctor:	<input type="text"/>	Phone:	<input type="text"/>
Address:	<input type="text"/>		

Any health concerns or medical details we should know about the student? (please attach letter if insufficient space)

Please list any medication being taken by student:

(a) With whom does the child live most of the time?

(b) Is the child's legal guardianship of the State? Yes  No

(c) Are there any Domestic Violence Orders in place? Yes  No  If yes, please attach details

(d) Does the child live with a Foster Carer/Kinship Carer? Yes  No

If Yes,  
Name and Address details are:

(e) Custody / Contact Details (If a court order exists pertaining to this student, please attach a copy)

Are there any court orders or parent agreements in force relating to where the child lives and who the child has contact with? Yes  No  If yes, give details

Is there any court order preventing either natural parent to access details relating to this student's educational development (eg Report Cards)? Yes  No

Is the Department of Communities involved with the student or the Family? Yes  No  If yes, give details:

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**Family Details:**

**Contact details:** Can these family contact details be released to the school community?    Yes     No

Usual Residential Address:     Postal Address:   
   

Family Phone:     Silent?     Family Fax:

Family email address:

Please inform the school if these details change in any way.

Student Surname:

Student's Given & Middle names:

**Excursion/Activity Permission:**

I/We give permission for the above named student to participate in all College excursions, camps, and activities as per their grade level, organised by Gulf Christian College during their enrolment at the College.

I/We authorise the staff of Gulf Christian College to obtain any medical assistance or hospitalisation as deemed necessary, in the event of an accident or illness, where contact with family is difficult or unavailable.

I/We have indicated to the best of my/our knowledge any current medical condition/s my/our child suffers from in the appropriate section of this Enrolment Application.

I/We have read and understand the policies and procedures: Excursions and Camps Policy and Procedures, and Emergency Contact Policy and Procedures.

Mother/Guardian 1 Signature:

Father/Guardian 2 Signature:

**Permission to use Images / Photographs / Name of Student:**

I/We consent that on occasions, staff, parents, and professional photographers will take photographs at Gulf Christian College as a record of College events and as a way of commending students who are doing well.

Yes  No

I/We consent that these photos may be used in College-based publications for the College community, including internet, brochures, newspapers and chronicle advertisements

Yes  No

For Advertising and Marketing Purposes to the wider community (eg Cairns, Townsville, Brisbane), a separate consent will be sought from parents.

Mother/Guardian 1 Signature:

Father/Guardian 2 Signature:

**Permission to Apply Sunscreen and Aerogard:**

Sunscreen may from time to time be applied by staff at the College, especially for sporting events or when children need to walk to another town venue for an activity etc.

During the wet season, mosquitoes can be around the College at break times and before and after school. The College keeps aerogard in stock to spray on each of the students so that they are not bitten and to aid against the spread of mosquito borne diseases.

Is your child allergic to sunscreen? Yes  No  Is your child allergic to aerogard? Yes  No

I/We give permission for the staff of Gulf Christian College to apply aerogard and sunscreen on my child, dependent on any allergies listed above.

Mother/Guardian 1 Signature:

Father/Guardian 2 Signature:

**Transport Information**

I give my permission for the students to travel on the school bus. Yes  No

Mother/Guardian 1 Signature:

Father/Guardian 2 Signature: