

APPLICATION FOR ENROLMENT PREP



Nurture for today • Learning for tomorrow • Character for eternity

悉尼
复临学校
奥本

为今天的培育，明天的学习，永恒的品格而打造

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Operated by Seventh-day Adventist Schools (Greater Sydney) Ltd
基督复临安息日会（大悉尼）经营
ABN 63 106 908 767 CRICOS No. 02622J

ENROLMENT CHECKLIST 注册检查清单

- Proof of Identity (birth certificate) 身份证明 (出生证)
- Immunisation Records 免疫记录
- Copy of current school report 目前学校记录副本
- Application Fee received 申请费收到

EMERGENCY CONTACTS (Other than Parent / Guardian) 紧急联络人 (除了家长或监护人)

1	Full Name: 名字:	Relationship to child: 与孩子的关系:	
	Home Phone: 家里电话:	Work Phone: 工作电话:	Mobile Phone: 流动电话:
	Full Name: 名字:	Relationship to child: 与孩子的关系:	
2	Home Phone: 家里电话:	Work Phone: 工作电话:	Mobile Phone: 流动电话:

PERMISSION NOTES 允许事项

- In the event that the school is unable to contact me in an emergency, I grant permission for my child to be given the treatment deemed necessary. 如果在紧急事项学校找不到我，我允许学校给我的孩子恰当和需要的治疗。
- I am willing for my child to have his/her photo in any school publication or for marketing purposes. I will contact the school if I am unhappy with this arrangement. 我允许学校用我孩子的相片来做广告和印刷。我会联系学校如果我不要。
- I give permission for my child to go on any regular school based program by bus or train. 我允许我的孩子参加学校需要坐火车或巴士的活动

AGREEMENT TO SCHOOL POLICIES 协议学校政策

- I/We understand that this is a Christian school and agree to support the school in upholding its standards and ethos. 我/我们明白这是一所基督教的学校和我/我们愿意支持与高抬学校的标准和道德。
- I/We understand that if the application for enrolment is successful, there is the responsibility of fee payments that comes with attending I/We understand failure to pay can result in loss of placement. 我/我们明白如果报名成功的话，我有责任交学费。我/我们明白如果失败交学费，将会失去位子。

SIGNATURES 签名

PARENTS/GUARDIANS (both parents or guardian(s) to sign if possible.) 家长或监护人 (如果可以双方父母或监护人一起签名)

Signature of FATHER/Guardian: 父亲或监护人签名: Date: 日期: Signature of MOTHER/Guardian: 母亲或监护人签名: Date: 日期:

SCHOOL INFORMATION 学校资料

How did you first hear about our school? 您如何听到我们的学校呢?

Why did you choose this school? 您为什么要选这学校呢?

Did any of the following assist you in choosing this school for your child? 请选以下帮助您选择我们学校的事项

- Letterbox flyer 单张
- Newspaper ad/article 报纸
- School Expo or Fair display 学校展览会
- Alphabet Day 字母日
- Open Day 学校开放日
- Preschool visit 探访
- Church promotion 教会推荐
- School bus sign 校巴广告
- School banner 学校旗号
- School website 学校的网页
- Other 其他

Family Name: (请用英文填写)

家姓: _____

Given Name/s: _____

名字: _____

Preferred Name: _____

其他名字: _____

Date of Birth: _____ Gender: _____

出生日期: _____ 性别: _____

To commence Grade _____ In Term _____ Year 20 _____

开始读 (几年级) 学期: 年份: 20

Residential Address: _____

住址 (街名): _____

Suburb/Town: _____ State: _____ Postcode: _____

地区/城市: 州省: 邮政篇码:

Home Telephone Number: _____ Home Facsimile Number: _____

家里电话号码: 家里传真号码:

Home Email Address: _____

电邮址: _____

Nationality: _____ Country of Birth: _____ Cultural Background: _____

国籍: 出生国家: 文化背景:

Nationality other than Australian, please provide Visa Number: _____

如果不是澳大利亚国籍，请填上签证号码: _____

Religious Denomination: _____ Church Attending: _____

宗教: 参加那个教会: _____

PREP APPLICANTS must be 4 years old by July 31 of the year they intend to start. Please tick preferred days - minimum 2 days

幼儿园先修班的小孩必须要在七月31日后满四岁才可以报名。请选喜欢的日子 - 最少一周两天。

- Monday 星期一
- Tuesday 星期二
- Wednesday 星期三
- Thursday 星期四
- Friday 星期五

OFFICE USE ONLY 给办公室用的 (不用填写)

Date Received: _____ FK: _____

Amount: _____ BK: _____

Receipt No: _____ SK: _____

Interviewed: _____

Letter sent: _____



SEVENTH-DAY ADVENTIST SCHOOLS
(GREATER SYDNEY) LIMITED

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NOTE: Any misleading or inaccurate information may render this application null and void.

This information will be used in accordance with the Adventist Schools Australia Privacy Policy, a copy of which is available upon request.
注意: 一切不正确或误导的资料将会导致这申请被拒绝。一切的资料将会被保密符合澳大利亚复临学校隐私政策。如需要这政策，可要求一份。

STUDENT PROFILE 学生资料

If your child is already attending school, please complete the following. 如果您的孩子已经上学了, 请填上以下的资料:

School presently attending: 学校名字: _____ Grade: 班级: _____

How is your child achieving at school? 您的孩子在学校的成绩:

Academically: 学业: V. Good 很好 Good 好 Average 中等 Poorly 差劲 V. Poorly 非常差劲
Socially: 社交: V. Good 很好 Good 好 Average 中等 Poorly 差劲 V. Poorly 非常差劲

What are your child's special interests and achievements (cultural/sporting)?

您的孩子有什么特别的爱好或成就 (文化/运动)?

Is your child in need of/currently receiving any of the following forms of Support?

您的孩子需要或正在接受以下的的支持?

- English as a second language 英语作为第二语言 Language 语言 Mathematics 数学
 Individual teacher aide time 个别教师助理的时间 Visual or hearing impairment assistance 视听残废支持
 Speech therapy 说话治疗 Occupational therapy 职业治疗

Details of special circumstances: 特殊情况的详情: _____

Siblings: 弟兄姐妹:

The applicant has: 申请人有: sisters and 姐妹 brothers. 兄弟。Please circle the applicant's place among siblings: 请圈申请人在家中排第几位:

Oldest 最大 Youngest 最小
1 **2** **3** **4** **5** **6**

INFORMATION FOR GOVERNMENT CENSUS 政府人口普查资料

Is English your child's second language? 英语是您孩子的第二个语言吗? YES 是 NO 不是

If yes, what language does he/she speak? 如果是的话, 那么他/她在家里说什么语言呢?

Is the applicant of Aboriginal/Torres Strait islander descent? 申请人是澳大利亚土著民族吗? YES 是 NO 不是

APPLICANT'S GENERAL HEALTH STATUS 健康状况 (Please supply detailed information on the HEALTH RECORD) (请提供详细的资料在健康记录上)

Does your child have: 您的孩子是否有:

- Any chronic illness? eg. Asthma 严重的病症? 比如气喘 Specify: 详情: _____
- Any allergies? 有没有任何过敏症 Specify: 详情: _____
- Any special learning or behavioural diagnoses 任何学习或性格上缺陷 Specify: 详情: _____

Applicant's Medicare Number: 政府医疗保险卡号码: _____ Child's number on card: 孩子在卡上的号码: _____

Health Insurance Provider (if you are not a Medicare card holder): 私人医疗保险提供者 (如果您没有澳大利亚政府医疗保险卡): _____

TRANSPORT TO SCHOOL 上学输送

Please select your child's method of travel to and from school (you may select more than one) 请选一项您孩子上学的方法 (您可以选多过一个)

- Car 车子 School Bus 校巴 Public Bus 巴士
 Walk 走路 Train 火车 Other 其他 _____

PARENT/GUARDIAN DETAILS 父母或监护人的资料

	Mother 母亲	Father 父亲	Guardian 监护人
Title 称呼			
First Name 首名			
Middle Name 中名			
Preferred Name 称名			
Last Name 家姓			
Date of Birth 生日			
Nationality 国籍			
Cultural Background 文化背景			
Street Address 街名			
Suburb 区名			
Postcode 邮政篇码			
Home Phone 家里电话			
Work Phone 工作电话			
Mobile Phone 手机			
Email Address 电邮			
Marital Status 婚姻状况			
Occupation 工作			
Employer 老板			
Religion 宗教			
If Seventh-day Adventist 基督复临安息日会 Church Membership 的会员	<input type="checkbox"/> Baptised 洗礼了	<input type="checkbox"/> Baptised 洗礼了	<input type="checkbox"/> Baptised 洗礼了
Church Attending 出席教会			
Correspondence 联系方法	Newsletters: <input type="checkbox"/> emailed <input type="checkbox"/> With Student 学校通讯: <input type="checkbox"/> 电邮 <input type="checkbox"/> 给学生 <input type="checkbox"/> Reports <input type="checkbox"/> Fee Statements <input type="checkbox"/> 成绩单 <input type="checkbox"/> 学费单子	Newsletters: <input type="checkbox"/> emailed <input type="checkbox"/> With Student 学校通讯: <input type="checkbox"/> 电邮 <input type="checkbox"/> 给学生 <input type="checkbox"/> Reports <input type="checkbox"/> Fee Statements <input type="checkbox"/> 成绩单 <input type="checkbox"/> 学费单子	Newsletters: <input type="checkbox"/> emailed <input type="checkbox"/> With Student 学校通讯: <input type="checkbox"/> 电邮 <input type="checkbox"/> 给学生 <input type="checkbox"/> Reports <input type="checkbox"/> Fee Statements <input type="checkbox"/> 成绩单 <input type="checkbox"/> 学费单子

Note: As family structures can differ widely, please supply any details related to the particular circumstances of your family. Detail any legal arrangements of which the school should be aware. Where necessary, please supply a copy of relevant documentation. 注意: 因为每个家庭的构造和背景都不同, 所以请告诉学校您的家庭特殊情况。如有任何法律上的安排, 请事先告诉学校。请提供适合的文件来支持。