



APPLICATION FOR ENROLMENT

Welcome to Maranatha Christian College. Please complete the relevant information and forward to the Registrar.
All information supplied will be treated in the strictest confidence.



DETAILS OF STUDENT

Today's Date

Student's Surname Family Name

Given Name (s) Gender Male Female

Address Postcode

Date of Birth - - Place & Country of Birth

Nationality Resident Status Citizen Resident Overseas

If Resident Temporary Permanent Date of Arrival - -

Is the student of Aboriginal or Torres Strait Islander decent? Yes No

Are there any custody or access restrictions? (Please give details)



DETAILS OF ENROLMENT

Current School Current year level

Entry date to Maranatha - - Year level Repeating Year Yes No

Record of school attendance for the past six(6) years, including current school:

Calendar Year	Age	Name of School	Locality	Class/Year	Date of Leaving

Does the student receive Austudy? Yes No

Curriculum Council No. (If Known)

Do you give permission for your child's photo and name to appear in School Newsletters and Promotions? : Yes / No



STUDENT DEVELOPMENT

CHRISTIAN DEVELOPMENT

Student currently attends Church Yes No Church Name

Has the student received the Lord Jesus Christ as Saviour? Yes No Date - -

Regularly attends Worship Services Sunday School Youth Group Church Clubs

List other activities, if any, that the student may be involved with in the Church

PHYSICAL DEVELOPMENT AND HEALTH

Please tick where applicable, and give details where needed.

Does the student suffer from an incapacity that would affect learning in the following?

Sight Muscular or skeletal problems Hearing

Does the student need to wear glasses? While reading All the time

Does the student suffer from any of the following:

Medication Allergy Insect Bite Allergy A.D.D. Diabetes
 Bee Sting Allergy Asthma Rheumatic Fever Heart Disease
 Special Diet Other

If any of the above apply—please specify severity, and medical plan of action to be followed:

EDUCATION DEVELOPMENT

Does the student have difficulty in learning? Yes Brief Details

Has the student been professionally tested for a learning difficulty? Yes Brief Details:

In what subjects does the student have real strengths?

Has the student had serious behaviour problems? Yes Brief Details

Does the student intend to proceed to Year 12? Yes

What does the student plan to do after completing their Secondary studies?

OTHER INFORMATION

Does the student want to come to this College? Yes No Uncertain

What are the student's current interests, hobbies and sport?

Does the student play any musical instrument or sing?

Has the student been in trouble with the police? Yes No

Has the student been the victim of criminal conduct, including assault? Yes No

Has the student ever been suspended or expelled from a school? Yes No



KINDERGARTEN TO YEAR ONE

Please complete the sections that are relevant to your child and leave the sections blank that are not. Alternatively you may want to make an appointment and explain your child's history in person. All information will be kept strictly confidential.

HEALTH

Have you noticed any unusual speech patterns? (Articulation? Late talking?)

No Yes:

How well did your child learn to talk about things, carry out instructions, learn new words and develop clear speech?

No Yes:

Has your child had ear infections? (Particularly between 12 & 36 months? Glue ear? Grommets?)

No Yes:

Did your child experience any delays in gaining developmental milestones? (eg learning to crawl, walk)

No Yes:

Has your child had any visual problems? (A lazy eye? Glasses?)

No Yes:

Have you noticed unusual motor co-ordination patterns? (From crawling to colouring?)

No Yes:

Has your child had serious health problems?

No Yes:

Did your child experience a difficult birth? (Premature etc.?)

No Yes:

Any notable family circumstances in the child's early years?

No Yes:

What language is primarily spoken by your child in the home?

English Other:

Does your child speak any other languages?

No Yes:

Is there a family history of speech and language difficulties or reading and writing difficulties?

No Yes:

Is there any more relevant information that the school should be aware of?

No Yes: