


**COMMUNITY LANGUAGES SCHOOLS PROGRAM**  
**Children Enrolment at "THAI CENTRAL SCHOOL INC."**
**Thai Central School**
**School Address:** Simonds Catholic College, 273 Victoria Street West Melbourne 3003

**Note: it is important that student details are exactly the same as those provided at the time of enrolment at the student's mainstream (Day School) school.**

**Student Details:**

Family name: \_\_\_\_\_ Given name(s): \_\_\_\_\_

 Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: Male  Female 

Home Address: \_\_\_\_\_

**Day School (attended by student name above):**

Day School name: \_\_\_\_\_ Grade / Year Level: \_\_\_\_\_

Day School Address: \_\_\_\_\_

 Is your child currently enrolled at another community language school to learn the same or Another Language? YES  No 

 If  yes, which school? \_\_\_\_\_

**Parent/ Guardian**

Name of Parent/Guardian: \_\_\_\_\_ (Please print)

Relationship to student: \_\_\_\_\_

Contact telephone/mobile: \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency contact Name:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

 Are you willing to have you/your child photographed to appear in the Thai Central School Website or News and notice boards Yes  No 

 Does your child have any allergies or suffer from any medical condition? (e.g. asthma, epilepsy, allergies etc.)? Yes  No 

 (If  yes, please give brief details): \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Privacy Collection Notice - Protecting your privacy and sharing information**

The information about your child and family collected through this enrolment form will only be shared with school staff who need to know to enable the community language school and Department of Education and Training (Department) to educate or support your child, or to fulfil legal obligations including duty of care, anti-discrimination law and occupational health and safety law. The information collected will not be disclosed beyond the Department without your consent, unless such disclosure is lawful. For more about information-sharing and privacy, see the Department's privacy policy at: <http://www.education.vic.gov.au/Pages/privacy.aspx>

**Parent/Guardian Privacy Consent and Declaration**

I confirm that the information provided on this enrolment form is true and correct and I acknowledge and agree to the terms and conditions of enrolment accompanying this enrolment form. I consent to:

- the collection of my child's health and personal information by the community language school;
- the community language school disclosing my child's personal information contained in this enrolment form to the Department of Education and Training for data verification and funding purpose as the Principal or staff member may consider to be reasonably necessary including disclosing personal and health information to professional third parties in the event of a medical emergency.