

60 Morley Drive East, Morley WA 6062 P 6235 7100 E hampton.shs@education.wa.edu.au W www.hampton.wa.edu.au

ASPIRE | INNOVATE | ACHIEVE

Dear Parents and Family Carers,

Thank you for your interest in applying to enrol your child at Hampton Senior High School.

The following information is required to be submitted when applying to enrol:

Birth certificate or passport

Two forms of current proof of address e.g., telephone bill, utility bill

Immunisation details

School reports – last two

NAPLAN and OLNA results (if applicable)

Guardianship details (if applicable)

Visa status (if your child is not a permanent resident of Australia, you must provide evidence of current visa subclass and previous visa subclass (if applicable, such as bridging visa details).

Documentation for diagnosed condition or disability.

Please return this application to enrol form together with any other information you believe may be relevant to Administration Services.

Once the above information has been assessed, the school will advise you if any additional information is required and will contact you to complete the enrolment documentation process.

Thank you,

Tracy Griffiths Principal

Application to Enrol – PART 1

Please complete a separate application for each child.

This application can be submitted in person or online here. If you require any help to complete the application form, please contact the Hampton Senior High School Administration staff for assistance.

Please note that submitting an application to enrol your child does not guarantee you will receive a place; we will notify you in writing of the outcome of your application.

School Name		
School Name	Hampton Senior High School	
Personal Details (Plea	ase complete all details below)	
Child's Surname		
Legal Surname (if different)		
Given Names		
Date of Birth (dd/mm/yy)	Gender O Male O Female O Indeterminate/Intersex	
Parent Surname		
Parent First Name	Title O Mr O Mrs O Ms Other	
Residential Address (must be completed)		
	Post Code	
Postal Address (if different from residential)		
	Post Code	
Telephone (Home)	Telephone (Work)	
Mobile Phone No.	Email	
Please state your relationship to this student		

Personal Details (continued)			
Year Level enrolling in Start date: Beginning of school year 2025 OYES ONO			
If no, indicate start date / / Year level your child is currently enrolled in			
Name of school at which your child is currently or was last enrolled			
Is your child of Aboriginal or Torres Strait Islander origin?			
Are there any Family Court Orders regarding the day to day or long-term care, welfare and development of your child? YES ONO			
Does your child have an Australian Immunisation Register (AIR) Immunisation History Statement?			
If your application is accepted, you will be asked to provide an Australian Immunisation Register (AIR) Immunisation History Statement that is not more than two months old.			
Are you applying to enrol your child in a specialist or enrichment program? O YES $ ightarrow$ NO			
Name of program			
Will there be any siblings attending this school/ currently attend? O YES $ ightarrow$ NO			
Name/s and year levels			
Is your child currently under suspension from a school? O YES \odot NO			
If yes, name of school			
Is your child a temporary resident? O YES O NO			
Date entered Australia if born overseas			
Visa Sub Class No. Visa expiry date / /			
Does your child have a health or medical condition, disability or additional needs? OYES ONO			
Does your child have a health or medical condition, disability or additional needs? O YES O NO This information will assist the principal in planning to provide the best educational program for your child. Please provide details:			

Declaration			
The information and statements provided in this application for enrolment are true and accurate.			
Name of person enrolling this child			
Signature Date / /			
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: In the event that the statements made in this application later prove to be false or misleading, this application may be declined. Information supplied may need to be checked by the school.			
OFFICE USE ONLY			
Date application received			
Out of intake area O YES O NO			
Application to enrol approved by Principal \bigcirc YES \bigcirc NO			
Principal or delegates name			
Principal or delegates signature			
Date / /			
Documentation provided:			
Birth certificate or passport Proof of address Immunisation details School report			
NAPLAN/OLNA Guardianship details Visa Medical documentation			
NOTES:			