



வென்றவேத்தில் தமிழ்க் கல்வி நிலையம்  
**WENTWORTHVILLE TAMIL STUDY CENTRE**  
(Girraween Public School, 9 Bando Road Girraween NSW 2145)

PO Box 557  
Wentworthville NSW 2145

Email: [info@wtsc.org.au](mailto:info@wtsc.org.au)

Web: [www.wtsc.org.au](http://www.wtsc.org.au)

[www.facebook.com/tamilstudy/](http://www.facebook.com/tamilstudy/)

**Age Limit for Admission in 2018: Kids born on or before 31/07/2015**

The names given should be the same as the student is known as in mainstream school.

மாணவரின் பெயர் பிரதான பாடசாலையில் மாணவரின் பெயரை ஒத்ததாக இருத்தல் அவசியமானதாகும்

## APPLICATION FOR ENROLMENT – 2018

(1) Please read privacy note in Part G

(2) Please complete this form in English, unless requested otherwise.

### PART A: STUDENT DETAILS

Surname in English			
தமிழில் குடும்பப்பெயர்			
First Name in English			
தமிழில் முதற்பெயர்			
Date of Birth		Gender	F / M
Residential Address			
Suburb		Postcode	
Date of Tamil School Entry			
Name of the Mainstream School		Class at Mainstream School	

### PART B: PARENTS' / GUARDIANS' DETAILS

Father / Guardian Surname		Preferred Title	Dr / Mr / Rev
First Name			
Home Telephone		Work Telephone	
Mobile		Email	
Mother / Guardian Surname		Preferred Title	Dr / Mrs / Ms
First Name			
Home Telephone		Work Telephone	
Mobile		Email	

**PART C: EMERGENCY CONTACT**

Please provide two emergency contacts.

Name 1		Relationship	
Home Telephone		Mobile	
Name 2		Relationship	
Home Telephone		Mobile	

**PART D: DETAILS OF SIBLINGS<sup>†</sup>**

Please provide details of your all other children currently studying at Wentworthville Tamil Study Centre

First Name (1)			
தமிழில் முதற்பெயர்			
Relationship to Applicant		Year joined at Tamil School	
Date of Birth		Gender	F / M
Mainstream School		Class at Mainstream School	
First Name (2)			
தமிழில் முதற்பெயர்			
Relationship to Applicant		Year joined at Tamil School	
Date of Birth		Gender	F / M
Mainstream School		Class at Mainstream School	
First Name (3)			
தமிழில் முதற்பெயர்			
Relationship to Applicant		Year joined at Tamil School	
Date of Birth		Gender	F / M
Mainstream School		Class at Mainstream School	
First Name (4)			
தமிழில் முதற்பெயர்			
Relationship to Applicant		Year joined at Tamil School	
Date of Birth		Gender	F / M
Mainstream School		Class at Mainstream School	

† Please use separate sheet if necessary

## PART E: STUDENT MEDICAL DETAILS

Please provide details if the child suffer from any of the below,

Does your child suffer from Asthma?	Yes / No
	If yes, provide details with medication to be given / taken during asthma attack.
Major Illness or disability	
Allergies	
Medication	
Allergies to any medication	
Does the student identified as ' <b>Children with special learning needs</b> ' at the mainstream school?  If YES, please provide detail of the special need requirement: (Please use separate sheet along with any other necessary attachments).	YES / NO

## CONDITIONS OF ENROLMENT

### 1. GENERAL

The completion and signing of this Application for Enrolment signifies your acceptance and agreement with the conditions relating to the payment of fees and charges and to any other condition or rule which may be implemented by the executive committee or its representatives to ensure the orderly conduct of the School.

### 2. CLASS ROOM ALLOCATION

The new enrolment will be randomly allocated to different division of the same class OR will be allocated to the division which has less number of students, if the class has more than one division. The class allocation will also depend on the student's fluency in Tamil language.

### 3. ATTENDANCE AND ABSENCE

A student is expected to attend throughout the school year, which is divided into four terms. Absence to the classes may affect the outcome of competitions conducted by the School and participation of School's cultural festival (கலை விழா).

### 4. DISCIPLINE

Enrolment signifies agreement with the rules and regulations of the School (as published from time-to-time) and intention to abide thereby.

## **PART F: APPLICATION and DECLARATION**

- I/We apply to have my/our child admitted to the Tamil School as stated in the personal details.
- I/We certify that all personal details supplied with this application are true and correct.
- I/We acknowledge and accept the rules and regulations as set out in the Information booklet, a copy of which I/we have received and read.
- I/We have read and understood Tamil School's Duty of Care Policy.
- I/We give permission to use my child's details for the purpose of applying for and monitoring funding under the Community Language program (CLP). It will be used by the Department of Education and Training (DET) for assessment of eligibility and monitoring of program implementation.
- I/We give permission to use my child's photo/work in Tamil School's publication, including internet publication as many times as it requires.
- In the event of Acceptance by the School, I/we agree to be responsible for the payment of all fees and charges and to be bound by the regulations that may from time to time be made for the conduct of the School and the Conditions of Enrolment as stated at the above of this page (page 3) of this Application for Enrolment.

### **MEDICAL DECLARATION GENERAL**

- In the event of illness or injury to my child while at school or an excursion, or travelling to or from school, I authorise the principal or a senior staff member, if/where it is impossible to contact me, to consent to emergency medical treatment as is necessary by a qualified medical practitioner.

### **SIGNATURE OF APPLICANTS**

<b>Signature (Father/Mother/Guardian)</b>		<b>Date</b>	
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## **PART G: PRIVACY OF INFORMATION**

The information requested in this form is required for the purpose of the enrolment of a student by the School. Wentworthville Tamil Study Centre has a policy that covers the security, confidentiality and privacy of information obtained.

### **OFFICE USE ONLY**

Date of application received	
Application accepted	Yes / No
Tamil School Class	
Student number	
Family Number	
<b>Signature of Principal</b>	