

2025

Application form: Years 7–10 students Non-state school based

Instructions

This form is to be completed by the student's base school (non-state school).

Completion and submission of this application form to the school does not confirm enrolment. The school will notify you of the outcome of the application as soon as practicable.

Please ensure all sections of the form are fully completed to avoid enrolment delays. Sections of the form not marked (*) are optional. Incomplete forms will be returned to the base school for completion.

Privacy Statement

The Department of Education (DoE) is collecting the information on this form for the purposes outlined in the *Education (General Provisions) Act* 2006 (Qld) (EGPA 2006), and in particular for:

- i. assessing whether the application for enrolment should be approved
- ii. administering and planning for providing appropriate education, training and support services to students

iii. assisting departmental staff to maintain the good order and management of schools, and to fulfil their duty of care to all students and staff iv. communicating with students and parents.

Personal information collected on this form may also be disclosed to third parties where authorised or required by law. The information will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact the school of distance education in the first instance. If you have a concern or complaint about the way personal information has been collected, used, stored or disclosed, please also contact the school of distance.

BrisbaneSDE will use the school email address for all communication

Section 1: Base school details

| School name* | | | | | |
|-----------------------|-------------------------------|-------------------|------|--|--|
| School postal address | Street number & Street name o | r Post Office Box | | | |
| | | City/Town | | | |
| | Postcode | | | | |
| School phone number | | School email addr | ress | | |

| Section 2: Sc | ection 2: School-based supervisor contact/s Brisba | | | | | neSDE will use the school email address for all communication | |
|----------------|--|-----------|---------------|--------|----|---|--|
| Title | Mr | Mrs | Miss | Ms | Dr | Position* | |
| Family name* | | | | | | Given names* | |
| Phone* | | | | | | Email address* | |
| QCAA Student M | <i>l</i> lanageme | nt delega | te (if applio | cable) | | Name | |
| | | | | | | Email address | |

Section 3: Student information (refer to OneSchool information)

| Legal family name* (as per birth certificate) | | | | | | |
|--|------|--------|------------------|---------------|--|--|
| Legal given names* (as per birth certificate) | | | | | | |
| Preferred family name* | | | Preferred given | names | | |
| Residential address* | | | | | | |
| Gender* | Male | Female | Date of birth* | | | |
| EQ ID Number (if available) | | | Student's school | email address | | |

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Application form: Years 7–10 students — Non-state school based y7-10-application-non-state-sb; 29 August 2024 Page 1 of 4





Brisbane School of Distance Education

| Section 3: Student information (refer to OneSchool information) | | | | | | | | | |
|--|--|-------------------------------------|---|---|-----------------------|---------------------|--------------|-----------------|--|
| What is the student's intended start d | ate? | | | Current year level at | base scł | าดดไ | | | |
| Does the student have any known me conditions which would impact on the | | Yes, provide details No | | | | | | | |
| | | Brief details of med | ical co | ondition: | | | | | |
| | | | | | | | | | |
| Is the student enrolled at your school as a study abroad student? | | Yes No | If yes, provide arrival and departure dates | | Arrival | | | | |
| | | | | | | Departure | | | |
| | | | | If yes, was the student studying the requested subject in their home country? | | Yes | No | | |
| Section 4: Additional student in | nformati | on | | | | | | | |
| Is the student of Aboriginal or Torres Strait Islander origin? (if known) | No | Aboriginal | Т | orres Strait Islander | Both | n Aboriginal a | and Torres S | Strait Islander | |
| Does the student speak a language other than English at home? | No, I | English only | С | Other (please specify) | | | | | |
| In which country was the student born? | Australia | | | | | | | | |
| | | r (please ify country) | Date of arrival in Australia | | | | | | |
| Is the student an Australian citizen? | Yes | No (if No, ev | ridenc | e of student's immigra | tion statu | is to be comp | pleted below | v) | |
| Evidence of student's immigration status (to be completed for students | Permanent resident | | | | | | | | |
| who are not Australian citizens) | Student visa holder Date of arrival | | | | | | | | |
| | Temporary visa holder – Complete passport and visa details section below. Temporary visa holders must obtain an 'Approval to enrol in a state school' from EQI | | | | | | | | |
| | Other (Please specify) | | | | | | | | |
| Passport and visa information Passport and visa details (to be | Passport number | | | | Passpo date | rt expiry | | | |
| completed for a student who is NOT an Australian citizen). | Visa number | | | | Visa ex (if applie | piry date cable) | | | |
| | Visa sub class | | | | | | | | |
| QCAA Student Management information | Learner Unique Identification (LUI) number | | | | | | | | |
| Note: Only applicable to students in Years 11 and 12 | Student details | | | n name | | | | | |
| | Please ensure student information is exactly the same as recorded in the QCAA Student Management | | Midd | le name | | | | | |
| | applicatio | n to ensure results ed correctly | Surn | ame | | | | | |
| | | | Date of birth | | | | | | |
| | | | Geno | Gender Male Female | | | | | |

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Application form: Years 7–10 students — Non-state school based y7-10-application-non-state-sb; 29 August 2024 Page 2 of 4





Brisbane School of Distance Education

| Section 5: Family details (refer to OneSchool information) | | | | | | |
|--|-------------------|-------------------|--|--|--|--|
| Parents/carers | Parent/carer 1* | Parent/carer 2 | | | | |
| Family name* | | | | | | |
| Given names* | | | | | | |
| Title | Mr Mrs Miss Ms Dr | Mr Mrs Miss Ms Dr | | | | |
| Gender | Male Female | Male Female | | | | |
| Relationship to prospective student* | | | | | | |
| Is the parent/carer an emergency contact?* | Yes No | Yes No | | | | |
| 1st Phone contact number* | Work Home Mobile | Work Home Mobile | | | | |
| 2nd Phone contact number* | Work Home Mobile | Work Home Mobile | | | | |
| 3rd Phone contact number | Work Home Mobile | Work Home Mobile | | | | |
| Email address | | | | | | |
| Country of birth | | | | | | |
| Main language spoken at home | | | | | | |

| Section 6: Course/Subject | selection* | | | | | | |
|---|------------|---|----------------|---------------------------------------|--|--|--|
| Course/Subject Name | Year level | · · · | | Class preference 2 (if applicable) | Prerequisite per handbook/subject guide and year completed (if applicable) | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Evidence of prerequisite completion attached to application | | | School | report | Foreign Language diagnostic task | | |
| | | | Other, F | Please specify | | | |
| Section 7: Cohort informati | on | · · · · · | | | | | |
| | | | | | | | |
| Why is the student enrolling at BrisbaneSDE?* | | Course/Su | bject not offe | ered by base school | | | |
| | | Course/Subject offered by base school but student unable to access due to timetable clash or other special circumstances | | | | | |

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Section 8: Principal's Declaration* (to be completed by the principal of the base school)

The details in this form are correct.

All supporting documentation (i.e. evidence of completion of prerequisite courses/subjects and school reports) is included in this application. My school:

- acknowledges that participation in scheduled BrisbaneSDE lessons may be mandatory and will support the student to meet this
 requirement
- will co-operate fully with the BrisbaneSDE in all matters relating to the assessment/progress of enrolled students
- will provide a suitable learning environment, including appropriate technology
- will co-operate with the BrisbaneSDE in matters regarding the student's educational program
- will provide appropriate support and supervision
- will be liable for any replacement cost for damaged or unreturned learning materials
- · is responsible for forwarding applicable fees to the BrisbaneSDE
- agrees to participate in the flexible arrangement for the agreed period of the current school year
- will communicate with parents/carers of students, including informing them about this arrangement for their child's learning.

| Principal's name | | |
|-----------------------|------|--|
| Principal's signature | Date | |

Section 9: Submit Application

- Ensure the form is completed, including signatures.
- Go to the BrisbaneSDE website, Submit application page: <u>https://brisbanesde.eq.edu.au/enrolments/school-based/3-submit-application</u>
- Select the appropriate form category you wish to upload (this will take you to the Enquiry Tracker site where the form can be uploaded).
- Follow the steps to upload

| Section 10: BrisbaneSDE Office use only | | | | | |
|--|---|--|--|--|--|
| Enrolment decision | | | | | |
| Has the prospective student been accepted for enrolment? | Yes No (applicant advised in writing) If no, indicate reason: BrisbaneSDE does not offer year level the prospective student is seeking to be enrolled in The course(s)/subject(s) are not offered by BrisbaneSDE | | | | |
| Date enrolment processed | Year level Roll Class | | | | |
| Invoice date | Course/Subject Class(es) | | | | |
| FTE allocation for BrisbaneSDE (0.2 per subject) | Pick-list Timetable | | | | |

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