

2025-2026

BrisbaneSDE will use the school email address for all communication

# Application form: Years 11–12 students State school based — Units 1–4

## Instructions

This form is to be completed by the student's base school (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.

#### Section 1: Base school details

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

| Section 2: School-based supervisor contact/s |                  |           |               |        | ;  | Brisba         | aneSDE 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> anageme | nt delega | te (if applio | cable) |    | Name           |  |
|  |                  |           |               |        |    | Email address  |  |

## Section 3: Student information (refer to OneSchool information)

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

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at <u>https://ppr.ged.gld.gov.au/pp/distance-education-enrolment-and-fees-procedure</u> to ensure you have the most current version of this document.

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# **Brisbane School of Distance Education**

| Section 3: Student information (refer to OneSchool information)                       |                             |   |           |        |  |  |  |  |
|---|-----------------------------|---|-----------|--------|--|--|--|--|
| What is the student's intended start date?  |                             | Current year level at base school   |           |        |  |  |  |  |
| Does the student have any known medical conditions which would impact on their study? | Yes, provide details No     |   |           |        |  |  |  |  |
|   | Brief details of medical of | condition:  |           |        |  |  |  |  |
|   |                             |   |           |        |  |  |  |  |
|   |                             |   |           |        |  |  |  |  |
|   |                             |   |           |        |  |  |  |  |
| 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: 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<br>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 5: Course/Subject selection* |               |                                   |          |                                       |  |  |  |  |
|--------------------------------------|---------------|-----------------------------------|----------|---------------------------------------|--|--|--|--|
| Course/Subject Name                  | Year level    | Class preferer<br>(if applicable) | nce 1    | Class preference 2<br>(if applicable) | Prerequisite per handbook/subject guide and year completed (if applicable) |  |  |  |
|                                      |               |                                   |          |                                       |  |  |  |  |
|                                      |               |                                   |          |                                       |  |  |  |  |
|                                      |               |                                   |          |                                       |  |  |  |  |
| Evidence of prerequisite complete    | tion attached | to application                    | School ı | report                                | Foreign Language diagnostic task   |  |  |  |
|                                      |               |                                   | Other, P | Please specify                        |  |  |  |  |

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## **Brisbane School of Distance Education**

| Section 6: Cohort information   | ation                            |   |                                 |                               |  |  |  |  |
|---|----------------------------------|---|---------------------------------|-------------------------------|--|--|--|--|
| Why is the student enrolling at   | Course/Su                        | bject not offered by base   | e school                        |                               |  |  |  |  |
| BrisbaneSDE?*   |                                  | Course/Subject offered by base school but student unable to access due to timetable<br>clash or other special circumstances |                                 |                               |  |  |  |  |
| Section 7: Principal's Dec<br>Note: For state schools this is   |                                  | • • •   | the base school)                |                               |  |  |  |  |
| The details in this form are cor  | rect.                            |   |                                 |                               |  |  |  |  |
| All supporting documentation (  | i.e. evidence of completion of p | prerequisite courses/subje  | ects and school reports) is     | included in this application. |  |  |  |  |
| My school:  |                                  |   |                                 |                               |  |  |  |  |
| <ul> <li>acknowledges that participation in scheduled BrisbaneSDE lessons may be mandatory and will support the student to meet this requirement</li> </ul> |                                  |   |                                 |                               |  |  |  |  |
| • will co-operate fully with the  | ne BrisbaneSDE in all matters    | relating to the assessmen   | nt/progress of enrolled stud    | lents                         |  |  |  |  |
| • will provide a suitable lear  | rning environment, including ap  | propriate technology  |                                 |                               |  |  |  |  |
| • will co-operate with the Bi   | risbaneSDE in matters regardir   | ng the student's education  | nal program                     |                               |  |  |  |  |
| will provide appropriate su   | upport and supervision           |   |                                 |                               |  |  |  |  |
| • will be liable for any repla  | cement cost for damaged or ur    | returned learning materia   | als                             |                               |  |  |  |  |
| • is responsible for forward  | ing applicable fees to the Brisb | aneSDE  |                                 |                               |  |  |  |  |
| • agrees to participate in th   | e flexible arrangement for the a | agreed period of the curre  | ent school year                 |                               |  |  |  |  |
| • will communicate with par   | ents/carers of students, includi | ng informing them about   | this arrangement for their      | child's learning.             |  |  |  |  |
| Principal's name  |                                  |   |                                 |                               |  |  |  |  |
| Principal's signature   |                                  |   | Da                              | ate                           |  |  |  |  |
| Section 8: Submit Applica   | ation                            |   |                                 |                               |  |  |  |  |
| Ensure the form is complete   | eted, including signatures.      |   |                                 |                               |  |  |  |  |
|   | vebsite, Submit application pa   |   |                                 |                               |  |  |  |  |
| <ul> <li>Select the appropriate for</li> <li>Follow the steps to upload</li> </ul>  | m category you wish to upload    | (this will take you to the I  | Enquiry Tracker site whe        | re the form can be uploaded). |  |  |  |  |
|   | u.                               |   |                                 |                               |  |  |  |  |
| Section 9: BrisbaneSDE  | Office use only                  |   |                                 |                               |  |  |  |  |
| Enrolment decision  | -                                |   |                                 |                               |  |  |  |  |
| Has the prospective student been a  | accepted for                     |   |                                 |                               |  |  |  |  |
| enrolment?  | Yes                              | Yes No (applicant advised in writing)   |                                 |                               |  |  |  |  |
|   | If no, indic                     | If no, indicate reason:   |                                 |                               |  |  |  |  |
|   | Brisba                           | neSDE does not offer year le  | evel the prospective student is | seeking to be enrolled in     |  |  |  |  |
|   | The c                            | ourse(s)/subject(s) are not of  | ffered by the BrisbaneSDE       |                               |  |  |  |  |
| Date enrolment processed  | Year level                       | Roll (  | Class                           |                               |  |  |  |  |
| Invoice date  | Course/Su                        | ıbject Class(es)  |                                 |                               |  |  |  |  |
| FTE allocation for  | Pick-list                        | Time  |                                 |                               |  |  |  |  |

