



Student details

Surname _____

Given names _____ Preferred name _____

Residential address _____

Suburb _____ Postcode _____

Date of birth _____ Country of birth _____ Religion _____

Please attach a copy of your son's birth certificate / citizenship document

Proposed entry year (e.g. 2027) _____ Proposed year level Reception 1 2 3 4 5 6 7 8 9 10 11 12

Current school / ELC _____ Current year level _____

Please attach a copy of your son's most recent school report and NAPLAN results (if relevant)

Cultural background

1. Is your son of Aboriginal or Torres Strait Islander origin? Neither Aboriginal Torres Strait Islander

2. Is your son an Australian citizen? Yes No *If yes, go to question 4.*

3a. Is your son a resident of Australia? Yes No

3b. Does your son have Australian residency status? Permanent Temporary

*Please attach proof of Permanent or Temporary residency status as well as a copy of your son's passport.
For any student holding a 571 Student Visa they must contact the Registrar for an International Student Application Form.*

4. What is the main language spoken at home? _____

Custody information

Are there any custody arrangements, orders, parenting orders or parenting plans in relation to your son? Yes No

If yes, please provide relevant details and/or documentation.

Personal needs and considerations

Does your son have any health or learning needs or considerations which may impact his ability to take full advantage of the programs offered at Blackfriars? *If yes, please provide any relevant reports and/or documentation.* Yes No

Parent / Caregiver details

Parent / Carer 1 Mr Mrs Ms Dr Other

Relationship to student _____

Surname _____

Given name(s) _____

Email _____

Address *(if different to above)* _____

Suburb _____ Postcode _____

Home telephone _____

Mobile telephone _____

Language spoken *(if other than English)* _____

Postal address *(if different to residential)* _____

Occupation _____

Employer _____

Business telephone _____

Parent / Carer 2 Mr Mrs Ms Dr Other

Relationship to student _____

Surname _____

Given name(s) _____

Email _____

Address *(if different to above)* _____

Suburb _____ Postcode _____

Home telephone _____

Mobile telephone _____

Language spoken *(if other than English)* _____

Postal address *(if different to residential)* _____

Occupation _____

Employer _____

Business telephone _____



Family details

Siblings currently attending or enrolled to attend Blackfriars or the Blackfriars ELC

Full name Male Female Date of birth
 Already attending Current Year Level or Enrolled / Applied Year to commence (e.g. 2027)

Full name Male Female Date of birth
 Already attending Current Year Level or Enrolled / Applied Year to commence (e.g. 2027)

Other children in the family *Please only include children yet to commence or complete school*

Full name Male Female Date of birth
School attending (if applicable) Current year level

Full name Male Female Date of birth
School attending (if applicable) Current year level

Old scholars *Please provide details if the student's father, grandfather or other close relative attended Blackfriars*

Name Relationship to student
Years attended (if known) House(s) (if known)

Name Relationship to student
Years attended (if known) House(s) (if known)

Application checklist

These documents where applicable:

- | | |
|--|--|
| <input type="checkbox"/> Completed Application for Enrolment and Application Fee | <input type="checkbox"/> Proof of residency status and/or Visa and/or Passport |
| <input type="checkbox"/> Copy of child's birth certificate (or citizenship document) | <input type="checkbox"/> Any court orders regarding custody or contact with your child |
| <input type="checkbox"/> Copy of child's most recent school report / NAPLAN results | <input type="checkbox"/> Reports / documentation regarding personal needs |

Agreement

I / We understand that this is an application form only, not an assurance of enrolment, and that the Application Fee is non-refundable.
I / We understand that all information provided on and with this application is subject to the *Blackfriars Privacy Policy* available at our website.

Signed
Parent / Carer 1

Signed
Parent / Carer 2

Date

Date

Both parent / caregiver signatures are required to proceed except where a court has ordered sole parental responsibility.

Lodging this application

Please return this completed form and \$100 (non-refundable) Application Fee to the Blackfriars Registrar in person, by post or email.

In person
Blackfriars Priory School
17 Prospect Road
Prospect

By post
Registrar
Blackfriars Priory School
PO Box 86
Prospect SA 5082

Email
registrar@bps.sa.edu.au

OFFICE USE ONLY

Date Received: / /

Received by:

Payment of application fee

Credit Card payments

Please debit my: VISA Mastercard

Card #:

Expiry Date:

Amount: \$

Cardholder's
Signature:

Cardholder's Name:

EFT payments

Bank: NAB

Branch: Richmond (Victoria), 3121

BSB: 083 347

Account #: 15 477 5714

Reference: Please include BPS and your surname
(e.g. BPS Smith)

OFFICE USE ONLY

Paid in person on lodgment