



Seek the way of Life

Principal : Nadene Harvey

WHITEBRIDGE HIGH SCHOOL

*A caring community committed to excellence, diversity and fostering individual talents
A member of Whitebridge Community of Schools...Working Together*

Lonus Avenue, Whitebridge. NSW 2290
Phone: (02) 4943 3966 ❖ Fax: (02) 4942 2568

20 May 2021

Dear Parent/Caregiver

Thank you for your expression of interest to enrol your child at Whitebridge High School. In your enrolment application you have provided an address which is situated in our local intake area.

Most secondary schools have a designated local enrolment area. Students residing within that area are entitled to be enrolled at the government school that is designated for that intake area (*Enrolment of Students in Government Schools, A Summary and Consolidation of Policy, August 1997*).

To process your application, we require documentation to verify your residential address.

Parent/carers who have a student already attending Whitebridge High School will still be required to provide documentation as per the guidelines.

Please complete the sheet on the back of this letter and return to Whitebridge High School with the relevant documents by 3pm Monday 7 June 2021.

Yours sincerely

Nadene Harvey
Principal

Appendix 1 (proof of address)

Student Information

Family name

First given name

Under the Education Act 1990, principals may require proof of address to their satisfaction in order to establish a child's entitlement to enrol in the school. However, any requests for proof of address must be reasonable in the circumstances. Schools that are at or nearing their local enrolment buffer as calculated in accordance with sections 9.1 and 9.2 will use the following 100-point residential address check to determine the student's entitlement to enrol at the school. Personal references are not considered

DOCUMENT SHOWING THE FULL NAME OF THE CHILD'S PARENT POINTS

- | | |
|--|------|
| 1. Only one of (i.e. no additional point for additional documents) | 40 |
| 1.1. Council rates notice | |
| 1.2. Lease agreement through a registered real estate agent for a period of at least 6 months or rental board bond receipt | |
| 1.3. Exchanged contract of sale with settlement to occur within the acceptable school year | |
| 2. Any of the following | 20 |
| 2.1. Private rental agreement for a period of at least 6 months | each |
| 2.2. Centrelink payment statement showing home address | |
| 2.3. Electoral roll statement | |
| 3. Any of the following documents | 15 |
| 3.1. Electricity or gas bill showing the service address* | each |
| 3.2. Water bill showing the service address* | |
| 3.3. Telephone or internet bill showing the service address* | |
| 3.4. Drivers licence or government issued ID showing home address* | |
| 3.5. Home building or home contents insurance showing the service address | |
| 3.6. Motor vehicle registration or compulsory third party insurance policy showing home address | |
| 3.7. Statutory declaration stating the child's residential address, how long they have lived there, and any supporting information or documentation of this. | |
- *issued within the last 3 months

DECLARATION

I wish to apply for a local placement at Whitebridge High School for this student.

I CONFIRM THAT THE ADDRESS SHOWN ABOVE IS THE PERMANENT ADDRESS OF THE PARENT/CARER AND THE STUDENT BEING ENROLLED. I agree to notify the school immediately in writing if there is any change in this student's residential address.

I UNDERSTAND ANY FALSIFICATION OF DOCUMENTS OR INFORMATION WILL JEOPARDISE THE PROPOSED ENROLMENT.

"IF A PERSON PROVIDES MATERIALLY FALSE OR MISLEADING INFORMATION TO A SCHOOL WHEN MAKING AN APPLICATION FOR ENROLMENT, THIS IS AN OFFENCE WHICH HAS A PENALTY OF UP TO 2 YEARS IMPRISONMENT, \$22,000 FINE OR BOTH" (Section 307B of the Crimes Act 1900).

"IF A PERSON PROVIDES A STATUTORY DECLARATION HE OR SHE KNOWS TO BE FALSE, FOR THE PURPOSE OF GAINING ENTRY TO A SCHOOL, HE OR SHE COMMITS AN OFFENCE WHICH HAS A MAXIMUM PENALTY OF 7 YEARS IMPRISONMENT" (Section 25A of the Oaths Act 1900)

Signature of parent/carer

Print name

Date

| | | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|-------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | | | day | | month | | | | year |