

## Student Vocationally Talented Arts / Sport - 2.7

Student/s	
Parent / Carer	

Forms required to be lodged with this enrolment application (please ensure Statutory Declaration is completed and notarised):

- A statutory declaration is a written statement which a person swears, affirms or declares to be true in the presence of an authorised witness usually a Justice of the Peace, a lawyer or a notary public.
- Department of Education Application to Enrol form which must include copies of:
  - Birth certificate
  - Immunisation certificate
  - Proof of current NSW residential address -100 points (one type from group 1 or 2 required)

I have included the following documentation to support the application:

Document	Provided by (organisation)	Dated

It is anticipated that the student may transition in the future to the following mainstream school.

Name of school	Town	Phone number

### For Parents / Carers / Supervisors

#### Please acknowledge your understanding

- I confirm that the home learning environment is suitable for effective distance education provision.
- I declare that I recognise the role and responsibilities in my student's education.
- I will undertake to provide and maintain an agreed mode of communication between myself and the distance education School for the duration of the enrolment.

• I accept the role of supervisor during the period of enrolment and carry out the supervisor responsibilities listed below. Working with Children legislation requires all people working or volunteering with children under 18 years to have a Working with Children Check. Parents or carers who engage tutors for support should ask the tutor to provide a Working with Children Check clearance number, then verify that number online. Parents/carers can verify the status of a Working with Children Check number by using the online tool available from the Office of the Children's Guardian.

#### Supervisor responsibilities

- liaising with the school about the program of learning that will be provided for the student and the scheduling of the student's and supervisor's time for engaging in schoolwork and the completion of set tasks
- supervising the student during school or learning activities
- supporting and encouraging the student through assistance with locating materials and resources needed for lessons, development of a timetable for work, provision of a suitable workplace and basic equipment
- ensuring that the student follows the course developed by the school and addresses, with diligence and sustained effort, the set tasks and experiences provided by the school
- interacting with the student as required by the learning materials
- interpreting and explaining to the student the spirit and intention of instructions or comments included in lesson materials or in messages from the distance education teacher
- providing feedback to the distance education teacher on the student's responses to the lesson activities and on the student's performance and interest, including advice about illnesses or absences that have affected the student's ability to complete activities
- monitoring the student's participation in satellite, computer-based or teleconference lessons and field services as appropriate
- supervising examinations and assessment tasks, as required by the school.

Costs:	Payable on invoice \$40 Levy per student per year or \$60 per family per year \$50 Material Bond – per student (refundable)
Name of sup	ervisor:
Relationship	to student:
Signature of	Parent/Guardian: Date:

#### **OFFICE USE ONLY**

Student's Surname				
Male/Female Date of Birth SRN				
Grade				
CATEGORY				
<ul> <li>Isolated Home Student NSW (2.2)</li> <li>Traveller (2.3)</li> <li>Extraordinary Circumstances (2.10)</li> <li>Approved</li> </ul>	<ul> <li>Medical (2.5)</li> <li>Overseas (2.4)</li> <li>Vocation Talentee</li> </ul>	0	cant Support ALAS (2.8) SST (2.9)	
Principal's Signature Date				
Enrolment Date Receipt No				

# Statutory Declaration OATHS ACT 1900, NSW, NINTH SCHEDULE

I,	, of	
[name of d	eclarant]	[residence]
do hereby solemni	y declare and affirm that	
[the facts to be st	ated according to the declara	nt's knowledge, belief, or information, severally]
And I make this so	plemn declaration, as to	the matter (or matters) aforesaid, according
to the law in this b	ehalf made – and subje	ct to the punishment by law provided for any
wilfully false staten	nent in any such declara	tion.
Declared at:		on
	[place]	[date]
		[signature of declarant]
in the presence of a	n authorised witness, who	
		, a,
-	Ithorised witness]	[qualification of authorised witness]
	5	aking of this statutory declaration by the person
	e cross out any text that does	
		t see the face of the person because the person
•		tisfied that the person had a special justification <sup>1</sup>
	g the covering, and	
		ns OR *I have confirmed the person's identity using an
identification docu	ument and the document I reli	ed on was
		[describe identification document relied on]
[signature	of authorised witness]	[date]
<sup>1</sup> The only "special just	tification" for not removing a f	ace covering is a legitimate medical reason (at