

Student Name: \_\_\_\_\_

# ENROLMENT APPLICATION



## ENROLMENT APPLICATION Prep – Year 12

### **Vision**

Aims to provide a solid foundation of academic excellence and spiritual growth towards authentic Christian living.

### **Values**

Faith, Family and Integrity

98 Wyndham Street, Kerang  
PO Box 180, Kerang 3579

Phone: (03) 5450 3894  
Email: [admin@kccs.vic.edu.au](mailto:admin@kccs.vic.edu.au)

OFFICE USE: DATE APPLICATION RECEIVED: \_\_\_\_\_

## THE FOLLOWING MUST BE INCLUDED WITH THIS APPLICATION

Please tick the items included (Copies only please)

- ☐ Copies of most recent school reports
- ☐ NAPLAN Reports: Year 3, 5, 7, and 9 (if available/ applicable)
- ☐ Specialist Reports relevant to academic abilities and learning needs
- ☐ Copy of child's Birth Certificate
- ☐ Current visa or naturalisation document (if applicable)
- ☐ Immunisation Certificate
- ☐ Custodial Information (if applicable)
- ☐ Asthma/ASCIA Anaphylaxis Action Plan (if applicable)
- ☐ ASCIA Action Plan for Allergic Reactions (if applicable)

This Application together with any relevant student information can be forwarded to:

Mrs Leanne Pryor  
Enrolment Officer & PA to the Principal  
Kerang Christian College  
PO Box 180  
Kerang, VIC 3579  
admin@kccs.vic.edu.au  
lpryor@kccs.vic.edu.au

# KERANG CHRISTIAN COLLEGE

## Application for Enrolment

### STUDENT DETAILS:

Victorian Student Number:

Title:  
(Miss/Mr)

Surname:

First Given Name:

Second Given Name:

Preferred Name:

Sex: (please tick)

☐ Male

☐ Female

Date of Birth:

### FAMILY DETAILS:

#### Mother/Guardian

Title: (Ms, Miss, Mrs, Dr)

Living with Child:  
(please tick)

☐ Yes

☐ No

Surname:

First Name:

Address:

Email:

Phone:

Business/Work Phone:

Mobile Phone:

Marital Status:  
(please tick)

☐ Married

☐ Divorced

☐ Separated

☐ De facto

☐ Deceased

☐ Single

Occupation:

Employer:

In which Country was  
Mother/Guardian born?

☐ Australia

☐ Other (please specify):

# Does Mother/Guardian  
speak a language other  
than English at home?

☐ No English only

☐ Yes (please specify):

# What is the highest year of primary or secondary  
school Mother/Guardian has completed?  
(please tick)

☐ Year 12 or equivalent ☐ Year 11 or equivalent

☐ Year 10 or equivalent ☐ Year 9 or equivalent/below

# What is the highest qualification level Mother/  
Guardian has completed? (please tick)

☐ Bachelor Degree or Above

☐ Advanced Diploma/Diploma

☐ Certificate 1 to IV (including trade)

☐ No no-school qualification.

# What is the occupation group of Mother/Guardian?

(please enter the number of the appropriate group from the attached list. If a  
person has not been in paid work for the last 12 months, enter N.)

## FAMILY DETAILS

### Father/Guardian

<b>Title:</b> (Mr, Dr etc)	<b>Living with Child:</b> (please tick) <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Surname:</b>	<b>First Name:</b>
<b>Address:</b>	
<b>Email:</b>	<b>Phone:</b>
<b>Business/Work Phone:</b>	<b>Mobile Phone:</b>
<b>Marital Status:</b> (please tick) <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> De facto <input type="checkbox"/> Deceased <input type="checkbox"/> Single	
<b>Occupation:</b>	<b>Employer:</b>
<b>In which Country was Father/Guardian born?</b> <input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify):	
<b># Does Father/Guardian speak a language other than English at home?</b> <input type="checkbox"/> No English only <input type="checkbox"/> Yes (please specify):	
<b># What is the highest year of primary or secondary school Father/Guardian has completed?</b> (please tick) <input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 9 or equivalent/below	
<b># What is the highest qualification level Father/Guardian has completed?</b> (please tick) <input type="checkbox"/> Bachelor Degree or Above <input type="checkbox"/> Advanced Diploma/Diploma <input type="checkbox"/> Certificate 1 to IV (including trade) <input type="checkbox"/> No no-school qualification.	
<b># What is the occupation group of Father/Guardian?</b> (please enter the number of the appropriate group from the attached list. If a person has not been in paid work for the last 12 months, enter N.)	

## PRIMARY FAMILY EMERGENCY CONTACT DETAILS:

NAME	RELATIONSHIP (Neighbour, Relative, Friend)	TELEPHONE CONTACT	MOBILE/OTHER CONTACT NUMBER

## PRIMARY FAMILY DOCTOR DETAILS:

Doctors Name:	
Address:	
Phone Number:	
Does the family have a current Ambulance Subscription: <input type="checkbox"/> Yes <input type="checkbox"/> No	Medicare Number: Expiry Date:
Does the family have private health insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Provider & Health Fund Number: Expiry Date:
Does the family have a health care card? <input type="checkbox"/> Yes <input type="checkbox"/> No	Healthcare Card Number:

## OTHER PRIMARY FAMILY DETAILS:

Relationship of Father/Guardian to Student:	<input type="checkbox"/> Parent <input type="checkbox"/> Step-Parent <input type="checkbox"/> Adoptive Parent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Host Family <input type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Other .....	
Relationship of Mother/Guardian to Student:	<input type="checkbox"/> Parent <input type="checkbox"/> Step-Parent <input type="checkbox"/> Adoptive Parent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Host Family <input type="checkbox"/> Relative <input type="checkbox"/> Friend <input type="checkbox"/> Other .....	
Church Attending:		
<b><u>OTHER CHILDREN:</u></b>		
Christian Name:	Date of Birth:	Year Level:
Christian Name:	Date of Birth:	Year Level:
Christian Name:	Date of Birth:	Year Level:
Main language spoken at home:		

## STUDENT RESTRICTIONS DETAILS:

(Access Restrictions)

Is the student at risk?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there an Access Alert for the student?	<input type="checkbox"/> Yes	<input type="checkbox"/> No (if No, move to next section)
Access Type:	<input type="checkbox"/> Court Order	<input type="checkbox"/> Family Law Order
	<input type="checkbox"/> Restraining Order	<input type="checkbox"/> Other
Describe any Access Restriction:		

## DEMOGRAPHIC DETAILS OF STUDENT:

# In which country was the student born?	<input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify):
Does the student hold a valid Australian passport or visa?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, type of document and subclass: _____
# Does the student speak a language other than English at home:?	<input type="checkbox"/> No English only <input type="checkbox"/> Yes (please specify):
# Does the student speak English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
# Is the student of Aboriginal or Torres Strait Islander origin?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> Yes, Aboriginal & Torres Strait Islander
What is the student's living arrangements?	<input type="checkbox"/> At home with Two Parents/Guardians <input type="checkbox"/> At home with One Parent/Guardian <input type="checkbox"/> Other (please specify):

Usual mode of transport to school:	<input type="checkbox"/> Walking <input type="checkbox"/> Bicycle <input type="checkbox"/> School Bus <input type="checkbox"/> Driven
Bus Name or Number (if known):	
Distance to school in kilometres:	

## SCHOOL DETAILS:

Name of previous school/preschool:
Year Level and Year or which application is intended: Eg. Year 7, 2020
Present Year Level:

# These questions are asked as a requirement of the Commonwealth Government. All schools across Australia will be required to collect the same information. Other Information collected will be covered by the School's privacy policy.

## SCHOOL DETAILS:

Has the student ever been suspended or expelled?	<input type="checkbox"/> No	<input type="checkbox"/> Yes, expelled
	<input type="checkbox"/> Yes, suspended	
Has the student repeated a year at school?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, year level: _____	

## STUDENT EDUCATION SUPPORT HISTORY

Has the student ever received support from a teacher aide, tutor, speech pathologist, occupational therapist, counselor, or psychologist?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, please circle in the question.	
Has the student had any previous assessments by outside agencies?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the student require any extra support other than those already provided for in a general classroom & school environment?	<input type="checkbox"/> Yes If yes, give details	<input type="checkbox"/> No
Has the student had extra help in any of the following areas?	<input type="checkbox"/> Reading <input type="checkbox"/> Language	<input type="checkbox"/> Writing <input type="checkbox"/> Mathematics
Has the student had a hearing test?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the student had their eyes tested?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## CONSENT TO CONTACT

Kerang Christian College may need to contact the current/previous/preschool to clarify the student's education progress. The current/previous school/preschool may require written permission before releasing information.

Do you give permission for a signed copy of this Student Enrolment Application Form be used to provide such authorisation?

☐ Yes

☐ No

Name of current/previous school/preschool

Contact & Position

Contact Phone Number

Parent/Guardian Signature(s):

## STUDENT MEDICAL AND IMMUNISATION DETAILS:

### IMMUNISATION DETAILS OF STUDENT

**What is the student's immunisation status:**  
(please attach immunisation certificate) ☐ Complete ☐ Partial ☐ Not Immunised

**Does the student suffer from any of the following impairments:**

Hearing: ☐ Yes ☐ No ☐ Unsure

Vision: ☐ Yes ☐ No ☐ Unsure

Speech: ☐ Yes ☐ No ☐ Unsure

Mobility: ☐ Yes ☐ No ☐ Unsure

### ANAPHYLAXIS MEDICAL CONDITION DETAILS: (If applicable)

**Does the student suffer from Anaphylaxis?** ☐ Yes ☐ No

If yes, to what?

**Has the student ever suffered from Anaphylaxis?** ☐ Yes ☐ No

**Has an ASCIA Anaphylaxis Action Plan signed by a medical practitioner been provided to the school?** ☐ Yes ☐ No

**Does the student take medication for the above conditions in addition to an Epi Pen? If yes, be specific.** ☐ Yes ☐ No

**Is the medication taken regularly by the student (preventive) or only in response to symptoms?** ☐ Preventive ☐ Response

**Medication is usually administered by:** ☐ Student ☐ Nurse ☐ Teacher ☐ Other

**Medication is stored :** ☐ with Student ☐ Fridge ☐ Other

### ASTHMA MEDICAL CONDITION DETAILS: (If applicable)

**Does the student suffer from Asthma?** ☐ Yes ☐ No

**Has the student ever suffered from Asthma?** ☐ Yes ☐ No

**Please indicate if the student suffers from any of the following symptoms:**

☐ Cough ☐ Difficulty Breathing ☐ Wheeze ☐ Exhibits symptoms after exertion ☐ Tight Chest

**Has an Asthma Action Plan been provided to the school?** ☐ Yes ☐ No

**Does the student take medication for the above conditions?** ☐ Yes ☐ No

**Is the medication taken regularly by the student (preventive) or only in response to symptoms?** ☐ Preventive ☐ Response

**Medication is usually administered by:** ☐ Student ☐ Nurse ☐ Teacher ☐ Other

**Medication is stored :** ☐ with Student ☐ Other



## OTHER MEDICAL CONDITIONS:

Does the student suffer from any of the following medical conditions or have any ongoing illness?

*Tick if Applicable. Please give further details where needed (Food/Insect Bites/Animals/Dust or Pollen/Other)*

Allergies: (Please give details & provide ASCIA Action Plan for Allergic Reactions) ☐

Allergies to medication: ☐

Blood Pressure: ☐

Convulsions: ☐

Diabetes: ☐

Epilepsy: ☐

Food/Drug allergies: ☐

Head Injuries: ☐

Heart problems: ☐

Hearing problems: ☐

HIV, Hepatitis a, b, c etc: ☐

Phobias (ie. Heights): ☐

Physical Disability: ☐

Recent illness: ☐

Recent Operations: ☐

Visual problems: ☐

Medications taken regularly: ☐

Tetanus injection: ☐

Other medical conditions: ☐

If you have ticked yes in the chart above, is this medical condition likely to affect:

The student's learning at the College?

☐ Yes

☐ No

The student's involvement in physical education or sport?

☐ Yes

☐ No

Does this student have any known learning difficulties?

☐ Yes

☐ No

☐ Suspected

☐ ADD

☐ ADHD

☐ Dyslexia

☐ Asperger's

☐ Autism

☐ Other

Is your child anxious?

☐ Yes

☐ No

Does your child display anger?

☐ Yes

☐ No

Does your child currently or have they in the past had or suffered from any of the following:

Depression

☐ Yes

☐ No

Social Issues

☐ Yes

☐ No

Behavioural Issues

☐ Yes

☐ No

## RESPONSIBILITY FOR PAYING FEES

Both parents/guardians ☐ Father Only ☐ Mother Only ☐ Third Party ☐

In signing this form, I/we agree to pay all fees and levies as determined by the College although I understand special consideration may be given in certain circumstances.

I/we elect to pay my account for fees and levies as follows:

When the account is due ☐ By equal fortnightly payments ☐  
By equal weekly payments ☐ By equal monthly payments ☐

Fees can be paid by any of the following means:

- Direct deposit into the College account
- Cheque
- Cash
- EFTPOS
- Centrepay

We the undersigned accept these terms:

Father/Guardian

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother/Guardian

Signature \_\_\_\_\_ Date \_\_\_\_\_

## COLLEGE NEWSLETTER

Our College Newsletter, The Harvest, is printed and distributed to students during the fourth week of each month. A weekly bulletin is distributed to students each Wednesday. Please provide your email address if you would like an electronic copy.

☐ Email .....

## AUTHORISATIONS

I consent to staff members and/or other appropriately trained personnel administering first aid to my child as considered reasonably necessary in the event of injury or illness. Where staff members are unable to contact me, or it is otherwise impractical to do so, I authorise the school and/or individual staff members to consent to my child receiving such medical or surgical treatment as deemed necessary by a doctor nurse paramedic or other medical practitioner. I agree to meet the costs related to such treatment.

☐ Yes ☐ No

As part of the regular program of the school, the students are required to leave the school grounds and travel to such activities as sports, specific educational presentations, practice for school functions etc. Parents will be informed, through the weekly newsletter, or a specific note. If a separate cost for an excursion is required an appropriate permission form will need to be signed. Do you understand that additional costs for incursions may occur and that separate permission may be necessary?

☐ Yes ☐ No

Signature of Parent/Guardian: ..... Date: .....

Signature of Parent/Guardian: ..... Date: .....

## MEDIA CONSENT

I/We give permission to Kerang Christian College to publish an image or photograph of my child in print publications produced by KCC (ie. Newsletters, prospectus, handbooks)

☐ Yes

☐ No

I/We give permission to Kerang Christian College to publish information about my child in external advertising or print mediums (ie. Newspaper, periodicals)

An image or photograph:

☐ Yes

☐ No

With student's name:

☐ Yes

☐ No

I/We give permission to Kerang Christian College to publish information about my child online:

**KCC's Internet Website (kccs.vic.edu.au) managed by KCC:**

An image or photograph:

☐ Yes

☐ No

With student's name:

☐ Yes

☐ No

**Newsletter on KCC's Website managed by KCC:**

An image or photograph:

☐ Yes

☐ No

With student's name:

☐ Yes

☐ No

**KCC Facebook Page managed by KCC:**

An image or photograph:

☐ Yes

☐ No

With student's name:

☐ Yes

☐ No

Signature of Parent/Guardian: ..... Date: .....

Signature of Parent/Guardian: ..... Date: .....

## VOLUNTEERS

It is in Kerang Christian College's mission to develop "Enhanced partnerships between parents, students and staff, strengthening the teaching and learning process." The development of volunteer relationships that can serve to enrich the school program and advance the School's mission is welcomed and encouraged. If you are able to assist the College in any of the following ways, please specify below.

*Please circle preferred day*

Monday   Tuesday   Wednesday   Thursday   Friday

☐ Reading

☐ Gardening

☐ Small Maintenance

☐ School Excursions

☐ Other Skills ..... (please specify)

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Working With Children No:** \_\_\_\_\_

*Please provide a photocopy of your card to the College. Please add Kerang Christian College to your Working with Children's Card. <https://www.workingwithchildren.vic.gov.au/>*

A copy of the College 'Volunteer Policy' is available upon request.

# INFORMATION RELEASE: PRIVACY NOTICE

## (Parent/Guardian)

### Standard Collection Notice

1. Kerang Christian College ("the College") collects personal information, including sensitive information about students and parents or guardians before and during the course of a student's enrolment at the College. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the College to provide schooling to the student and to enable them to take part in all the activities of the College.
  2. Some of the information we collect is to satisfy the College's legal obligations, particularly to enable the College to discharge its duty of care.
  3. Laws governing or relating to the operation of a school require certain information to be collected and disclosed. These include relevant Education Acts, and Public Health laws.
  4. Health information about students is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act 1988. We may ask you to provide medical reports about students from time to time.
  5. The College from time to time discloses personal and sensitive information to others for administrative and educational purposes, including to facilitate the transfer of a student to another school. This includes to other schools, government departments, medical practitioners, and people providing services to the College, including specialist visiting teachers, sports coaches, volunteers, and counsellors.
  6. Personal information collected from students is regularly disclosed to their parents or guardians.
  7. The College may store personal information in the 'cloud' which may mean that it resides on servers which are situated outside Australia.
  8. The College's Privacy Policy sets out how parents or students may seek access to personal information collected about them. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the College's duty of care to the student, or where students have provided information in confidence.
  9. The College Grievance Policy sets out how you may complain about a breach of privacy and how the College will deal with such a complaint.
  10. Information received from you may be used to make an appeal to you. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
  11. On occasions, information such as academic and sporting achievements, student activities and similar news is published in the College Newsletter and on our website. Photographs of student activities such as sporting events, school camps and school excursions may be taken for publication in College newsletters and on our website. The College will obtain separate permissions from the students' parent or guardian prior to publication.
  12. The College may include students' and students' parents' contact details in a class list to enable us to provide the services offered. If you do not agree to this, you must advise the College now.
- If you provide the College with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the College and why, that they can access that information if they wish, and that the College does not usually disclose this information to third parties.

Please note that a full copy of the College's Privacy Policy is available on request.

# INFORMATION RELEASE: PRIVACY NOTICE SIGNATURE FORM (Parent/Guardian)

## Acknowledgement and Consent

By signing, I accept this Acknowledgement and Consent and I am agreeing to the collection and storage of personal information by the College, as described on page 12.

I, \_\_\_\_\_, consent to health, schooling and other clinically relevant information, including detailed assessment and reporting information about:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

to be provided to:

**Attention:** Kerang Christian College  
Mr Wayne Barker  
PO Box 180  
Kerang VIC 3579

Parent 1 / Guardian 1 Name: .....

Parent 1 / Guardian 1 Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Witness Name: .....

Witness Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Relationship to referred child(ren) —Circle One

Parent      Guardian with legal responsibility

Person responsible as defined in Section 37 of the Guardianship and Administration Act 1986

Parent 2 / Guardian 2 Name: .....

Parent 2 / Guardian 2 Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Witness Name: .....

Witness Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Relationship to referred child(ren) —Circle One

Parent      Guardian with legal responsibility

Person responsible as defined in Section 37 of the Guardianship and Administration Act 1986

# TERMS CONDITIONS OF ENROLMENT & PARENT CODE OF CONDUCT

Parents/guardians establish a legally-binding contract with Kerang Christian College in accordance with the Enrolment Terms & Conditions and the Parent Code of Conduct. By signing below, you acknowledge the following in addition to the information outlined in the Terms & Conditions and the Parent Code of Conduct:

1. Any enrolment received at the school will be initially received on a trial basis. At the conclusion of the trial period, which will be for a minimum of one term, the enrolment may be reviewed and a decision made as to whether it will be a permanent ongoing enrolment, a further review period determined or the enrolment terminated.
2. That the parents/guardians will provide the child with any personal items that may be required. i.e. Booklist requirements.
3. That the parents/guardians will give at least one term's notice of termination of enrolment (unless a prior arrangement has been made with the Board) and failure to do so may render them liable for one term's fees.
4. That the School may suspend or terminate enrolment at its discretion for failure to comply with these conditions or other serious breaches of the school's rules and regulations.
5. The Principal or his / her delegate at their discretion may terminate the enrolment of a student under the following circumstances:
  - Failure to comply with the College Fee payment Policy. (See School Fee Policy)
  - Failure to comply with the College attendance requirements.
  - In the event, family members publicly or otherwise actively undermine the reputation or Christian ethos of the College.
  - In the event, a student fails to comply with or respect the reasonable and ongoing College administrative arrangements, learning environment and discipline. (See Behaviour Management Policy)
  - At the time of a transition review. (Primary School to Secondary School and/or Middle School to Senior School).
  - In the event of an established criminal activity on the part of any immediate family member.
  - In the event, an application for enrolment is at any time found to contain false information.
8. The school reserves the right to immediately terminate the enrolment of any student if it is evident that the student's behaviour is having a detrimental effect on other students, the teacher or both.
9. That I understand the educational services provided as outlined in the College Prospectus and on the College Website.

I/We accept the conditions of enrolment as set out above and hereby apply to have

..... enrolled in the school.

Parent 1 / Guardian 1 Name: .....

Parent 1 / Guardian 1 Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Witness Name: .....

Witness Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Relationship to referred child(ren) —Circle One

Parent      Guardian with legal responsibility

Person responsible as defined in Section 37 of the Guardianship and Administration Act 1986

Parent 2 / Guardian 2 Name: .....

Parent 2 / Guardian 2 Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Witness Name: .....

Witness Signature: ..... Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Relationship to referred child(ren) —Circle One

Parent      Guardian with legal responsibility

Person responsible as defined in Section 37 of the Guardianship and Administration Act 1986

# PARENT OCCUPATION GROUP CODES

## Group 1: Elected officials, senior executives/managers and professionals

**Elected officials** [parliamentarian, mayor, alderman/woman, trade union secretary, board member]

**Senior executives/managers** head large organisations or departments within them.

**Business** [chief executive, managing director, company secretary, finance director, chief accountant, personnel/industrial relations manager, research and development manager]

**Media** [newspaper editor, film/television/radio/stage producer/director/manager]

**Public sector** [public service manager (Section head or above), regional manager, hospital/health services/nurse administrator, school principal, faculty head/dean, library/museum/gallery manager, research laboratory/facility manager, police/fire services Commissioner]

**Defence Forces** [Commissioned Officer]

**Professionals** generally have degree or higher qualifications and professional experience in government, private industry or own business.

**Health** [GP or specialist, registered nurse, dentist, pharmacist, optometrist, physiotherapist, chiropractor, veterinarian, psychologist, therapy professional, radiographer, podiatrist, dietitian]

**Education** [school teacher, university lecturer, VET/special education/ESL/private teacher, education officer]

**Law** [judge, magistrate, barrister, coroner, solicitor, lawyer, legal officer]

**Engineering** [architect, surveyor, chemical/civil/electrical/mechanical/mining/other engineer]

**Science** [scientist, geologist, meteorologist, metallurgist]

**Computing** [IT services manager, computer systems designer/administrator, software engineer, systems/applications programmer]

**Business** [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]

**Social** [social/welfare/community worker, counsellor, minister of religion, economist, urban/regional planner, sociologist, librarian, records manager, archivist, interpreter/translator]

**Air/sea transport** [aircraft pilot, flight officer, flying instructor, air traffic controller, ship's captain/officer/pilot]

## Group 2: Other business managers/professionals and associate professionals

**Other business managers.**

**Farm/business owner/general manager** [crop and/or livestock farmer/farm manager, stock and station agent, building/construction, manufacturing, mining, wholesale, import/export, transport business manager]

**Specialist manager** [works manager, engineering manager, sales/marketing manager, purchasing manager, supply/shipping manager, customer service manager, property manager]

**Financial services manager** [bank branch manager, finance/investment/insurance broker, credit/loans officer]

**Retail sales/services manager** [shop, post office, restaurant, real estate agency, travel agency, betting agency, petrol station, hotel/motel/caravan park, sports centre, theatre/cinema, gallery, car rental, car fleet, railway station]

**Other professionals.**

**Artist/Writer** [editor, journalist, author, media presenter, photographer, designer, illustrator, musician, actor, dancer, painter, potter, sculptor]

**Sportsperson** [sportsman/woman, coach, trainer, sports official]

**Associate professionals** generally have diploma/technical qualifications and support professionals.

**Medical, science, building, engineering, computer** technician/associate professional

**Health/welfare** [enrolled nurse, community health worker, paramedic/ambulance officer, massage therapist, welfare/parole officer, youth worker, dental hygienist/technician]

**Legal** [police officer, prison officer, government inspector, examiner or assessor, occupational/environmental health officer, security advisor, private investigator, debt collector, law clerk, court officer, bailiff]

**Business/administration** [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office manager, project manager/administrator, mail supervisor, other managing supervisors]

**Defence Forces** [senior non-commissioned officer]

**Other** [library assistant, museum/gallery technician, research assistant, proof reader]

### Group 3: Trades and advanced/intermediate clerical, sales and service staff

**Tradesmen/women** generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.

#### **Advanced/intermediate clerical, sales and service staff.**

**Recording clerk** [bookkeeper, bank clerk, PO clerk, statistical/actuarial clerk, investment accounting clerk, accounts/claims/audit clerk, payroll clerk, personnel records clerk, registry/filing clerk, betting clerk, production recording clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk/despacher, bond clerk, customs agent/clerk]

**Inquiry/admissions clerk** [customer inquiry/complaints/service clerk, hospital admissions clerk]

**Office assistant** [secretary, personal assistant, desktop publishing operator, switchboard operator]

**Sales representative** [company sales representative (goods and services), auctioneer, insurance agent/assessor/loss adjuster, market researcher]

**Carer** [aged/disabled/refuge care worker, child care assistant, nanny]

**Service staff** [meter reader, parking inspector, postal delivery worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/gaming table supervisor]

### Group 4: Other occupations

#### **Other clerical, sales and service staff.**

**Sales staff** [sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, sales demonstrator, shelf stacker]

**Office staff** [typist, word processing/data entry/business machine operator, receptionist]

**Hospitality staff** [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, fast food cook, usher, porter, housekeeper]

**Assistant/aide** [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, home helper, salon assistant, animal attendant]

#### **Machinery operators.**

**Driver or mobile plant operator** [car, taxi, truck, bus, tram or train driver, driving instructor, courier/deliverer, forklift driver, streetsweeper driver, garbage collector, bulldozer/loader/grader/excavator operator, farm/horticulture/forestry machinery operator]

**Production/processing machine operator** [engineering, chemical, petroleum, gas, water, sewerage, cement, plastics, rubber, textile, footwear, wood/paper, glass, clay, stone, concrete, etc production/processing machine operator]

**Other machinery operator** [photographic developer/printer, industrial spray painter, boiler/airconditioning/refrigeration plant, railway signals/points, crane/hoist/lift, bulk materials handling machinery]

#### **Other occupations.**

**Defence Forces** [other ranks (below senior NCO) without trade qualification not included above]

**Other agriculture, horticulture, forestry, fishing, mining worker** [farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]

**Other worker** [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]