

Registration Form International Students (Full Fee Overseas Students)



Student Details

	Surname	Given Names	Preferred Name
Name of Student			
Date of Birth		Citizenship	Country of Birth
Year of Entry	20	Day Student	Boarder
Present Level		Entry Level	Alternate Entry Year
Passport Issuing Country		Passport No.	Visa Number
		Visa Expiry	
Under Which type of Visa will you be entering Australia to Study?			
Student ☐ Business ☐ Other: _____			

Parent/s or Guardian/s Details

	Title	Surname	Given Names
Name of Father/Guardian			
Home Address			
Postal Address	Post Code		
Telephone (h)	Telephone (w)	Mobile	
Occupation	Email		
Name of Mother/Guardian		Surname	Given Names
Home Address			
Postal Address	Post Code		
Telephone (h)	Telephone (w)	Mobile	
Occupation	Email		
With whom does the student reside?	Mother	Father	Both
Names of siblings who do/will attend St Hilda's			
Name/s and Maiden Name/s and Relationship of Alumni			
			House B DeG F G
How did you hear about St Hilda's?			
Please tell us the main reason for choosing St Hilda's			

Guardianship

St Hilda's requires each International Student to have a guardian who speaks English, is over the age of 21 and resides in Perth.

English Proficiency (this section must be completed)

Language spoken majority of time at home

Languages spoken majority of the time at Primary School

	for		years
----------------------	-----	----------------------	-------

Languages spoken majority of the time at High School

	for		years
----------------------	-----	----------------------	-------

Date of AEAS Testing

English Test Enclosed

Yes/No

Latest School Report Enclosed

Yes/No

General State of

Health/Wellbeing

Sight

Hearing

Disclosure: Does the student have any special needs or educational requirements? Y N

If 'Yes' please enclose details and supporting documentation with this application.

I/we understand that this application does not guarantee that a place will be offered to the applicant and that places are offered pending availability and a successful interview with the Principal or her representative. I/we declare that all information provided herein is true and correct.

Signature

Father/Guardian

Date

Signature

Mother/Guardian

Date

Please return both copies of this form with an application fee of \$150 (incl GST) to PO Box 34, Mosman Park WA 6912.

A copy of the student's birth certificate MUST accompany this application. For students with overseas birth certificates ALSO provide a copy of passport/citizen/visa information to clarify residency status. This registration will not be processed without this documentation.

Please attach a copy of the student's last two school reports/NAPLAN tests if enrolment is requested for within three years of this application.

Payment options

Registration Fee of \$150 AUD for this enrolment can be made via Credit card or EFT.

For Credit Card payment please enter details below.

Acc Name:

St Hilda's Anglican School for Girls Inc.

BSB:

086 164

Acc Number:

508183194

SWIFT Code:

NATAAU3306P

MasterCard ☐

Visa Card ☐

American Express ☐

Cardholders Name

Card Number

Expiry Date

CCV

Signature