

Application for Enrolment

How to Enrol



Meriden offers enrolment places up to eighteen months prior to the year of entry, subject to available places. Where possible, preference is given to siblings of students already attending the School, descendants of Meriden Old Girls and children of current staff members. The School reserves the right to offer enrolment places to students on the waiting list according to the requirements of the School's academic and cocurricular programs.

In order to be enrolled at Meriden, a student must take part in, and be accepted through, the School's interview process.

Entry Levels

The main entry points at Meriden are:

Pre-KindergartenKindergarten (limited places)Year 7

We accept new students in other year levels up to Year 9, when places are available.

Entry in Year 10

Students wishing to undertake their HSC at Meriden must commence at the School by the commencement of Year 10. New enrolments are not accepted after the commencement of Year 10.

A place in Year 10 at Meriden is by invitation only and is at the sole discretion of the School. Factors that are taken into consideration are:

- strong academic performance by the student as evidenced in recent school reports and other relevant documentation
- evidence of a high standard of punctuality, attendance and effort at school
- commitment to joining Year 10 at Meriden at the commencement of the school year.

Please note that availability of a place in Year 10 is limited. Before submitting an application, please contact our Enrolments Department to discuss the selection criteria and availability.

Enrolment Process

The steps in the enrolment process are listed below.

1 Application

Entry in Pre-Kindergarten to Year 9

Complete this form to apply for entry in year levels up to and including Year 9. Please ensure the declaration in Section E is signed by both parents/legal guardians and dated.

Section G of this form contains a checklist of documents that must be submitted with the form together with the non-refundable application fee. Should you have any queries about the application, please contact the Enrolments Department.

Entry in Year 10

Prior to filling out this application form, please contact the Enrolments Department to register your interest in a place in Year 10. At this stage, you will be asked to supply your daughter's school reports and other documents for consideration by an Enrolment Review Panel before progressing to the application stage.

If you are invited to submit an Application for Enrolment, please complete this form, ensuring the declaration in Section E is signed by both parents/legal guardians and dated. Section G of the form contains a checklist of documents that must be submitted with the form together with the non-refundable application fee.

2 Interview

Upon receipt of the Application for Enrolment form and application fee, the student will be placed on the list of applicants for the relevant year of entry. During the eighteen months preceding the commencement date, an interview process will be undertaken with a senior member of staff, subject to available places. Please note that it can take several months to interview all applicants.

3 Letter of Offer

Following the interview process, the Principal will write to notify you of the result of your enrolment application. Enrolment is offered in accordance with Meriden's Policy and Procedures of Enrolment available at www.meriden.nsw.edu.au.

4 Acceptance of Offer

If successful, the student's place is secured upon receipt within fourteen days of a signed Acceptance of Offer form together with the enrolment fee. The enrolment fee is considered a firm commitment and is non-refundable. In the event that an international student is unable to obtain a student visa, the School will provide a partial refund of the enrolment fee, in accordance with Australian government legislation.

All enrolments are subject to acceptance of Meriden's Terms of Enrolment available at www.meriden.nsw.edu.au.

5 Commencement Details

You will be notified of commencement dates, orientation days and any other relevant details in the term prior to commencement.

6 Tuition Fees

Tuition fees are payable in accordance with the date displayed on the fees notice. In the case of international students, fees are payable in accordance with government regulations.

SECTION A: STUDENT INFO	RMATION										
FAMILY NAME			first Name								
ANGLICISED FIRST NAME (IF APPLICABLE)			MIDDLE NAME/S								
DATE OF BIRTH		GENDER	Female								
CITY AND COUNTRY OF BIRTH					NATIONALITY	,					
CITIZENSHIP/RESIDENCY	Australian Citizen A	ustralian Permanent	Resident	Other	Provide detail	S					
RELIGIOUS DENOMINATION			CHURCH ATTENDED								
IS THE STUDENT OF ABORIGINAL C TORRES STRAIT ISLANDER ORIGIN?	R No Yes, Aborigii	nal Yes, Torres	Strait Islander								
PROPOSED CALENDAR YEAR OF ENTRY	PROP	POSED LEVEL OF EN	TRY		K 1 2 7 8 9	3 4 10	5 6				
PRESENT SCHOOL, PRE-SCHOOL O CHILDCARE LEARNING CENTRE (IF					CURRENT YEAR LEVEL						
Please attach a copy of the most child's schooling eg, special need		childcare learning o	centre report	and any o	other informati	on regard	ing your				
STUDENT'S INTERESTS											
PRE-KINDERGARTEN APPLICANTS	ONLY										
DAYS REQUIRED	4 days – Monday, Tue	esday, Thursday, Frid	lay 5 da	ys – Monda	ay to Friday						
ADDITIONAL EMERGENCY CONTA	CT OTHER THAN PARENTS	S/LEGAL GUARDIA	AN .								
PERSON TO CONTACT (OTHER THAN PARENTS)	MRS MS	SURNAME									
SHOULD THE SCHOOL BE MISS UNABLE TO REACH PARENTS	DR REV PROF		RELATIO	NSHIP TO	STUDENT						
TELEPHONE (H)	(W)	(M)	AIL								
TEELTHORE (II)	(**)	(***)	2117								
DOCTOR'S NAME/MEDICAL CENT											
DOCTOR'S NAME	MEDICAL CENTRE			TELEPHO	NE						
HEALTH AND WELLBEING											
Complete record of immunisation equivalent overseas organisation,			DICARE).				REF NO.				
Does your child suffer from aller			Please specify	,							
Does your child require a medic	al action plan?	No Yes Asthma Anaphylaxis									
Is your child on a permanent me	dication?	Other Please specify									
Has your child received or is she	/he currently	No Yes Please specify									
receiving support or treatment f services such as the following?											
Does your child have any social, difficulties or specific medical or		No Yes Please specify									
Is there any other medical inforr of which Meriden should be awa		No Yes	No Yes Please specify								
Please attach copies of any medical action plans and medical, psychological/psychometric and educational testing assessments.											

DISCLOSURE STATEMENT The disclosure of all medical, psychological/pyschometric and educational testing information relating to a student seeking enrolment is a fundamental condition to the acceptance of that student for enrolment at Meriden. Such information is important in assessing the appropriateness of an enrolment at Meriden for the purposes of duty of care and educationally, to support fully the student's academic needs and progress. Failure to provide a full and accurate disclosure of the required information may lead to the termination of enrolment by the School.

SECTION B: PARENTS/LEGAL GUARDIAN INFORMATION

FATHER/PARENT 1/LEGAL GUARDIAN 1						MOTHER/PARENT 2/LEGAL GUARDIAN 2											
TITLE	MR MF	RS I	MS I	MISS	DR DR	REV P	PROF	TITLE	MR	MRS	MS	MISS	DR	REV	PROF		
SURNAME								SURNAME									
GIVEN NAME								GIVEN NAME									
MIDDLE NAME								MIDDLE NAM	E								
COUNTRY OF BIRTH								COUNTRY OF BIRTH									
	Australian Citizen									Australian	Citizen						
	Australian Permanent Resident								Australian Permanent Resident								
		(provid	de Visa d		•					Other (provide Visa details)							
Visa Type Visa Expiry Date						Visa Type Visa Expiry Date Visa Sub-class No.											
DECIDENTIAL	Visa Sub-class No.							DECIDENITIAL	Visa	Sub-class	No.						
RESIDENTIAL ADDRESS								RESIDENTIAL ADDRESS									
		POSTCODE									POSTCO	DE					
	COUNTRY	,				<i></i>			COL	JNTRY			103100	<i>D</i> L			
TEL (HOME)	COOTTINI							TEL (HOME)									
` ′								TEL (BUS)									
TEL (BUS)								` ′									
MOBILE								MOBILE									
EMAIL								EMAIL									
POSTAL ADDRESS								POSTAL ADDRESS									
	POSTCODE											POSTCO	DE				
OCCUPATION								OCCUPATION									
EMPLOYER	EMPLOYER							EMPLOYER									
RELATIONSHIP E BIOLOGICAL PAI		Ma Otl	rried ner		De Facto ease specify	Separ	ated	Divorced	Mother Deceased Father Deceased								
STUDENT LIVES WITH	Both parer	nts	Moth	er	Father	Lega	al Guardi	an Grandp	parent/s	Oth	er	Please :	specify				
FULL NAME OF STEP-MOTHER (МО	BILE							
PARENTING AND CUSTODY ARRANGEMENTS Where the parents are not living together, or where both of the parents named above are not the biological parents of the child, please provide details of parenting, custody or guardianship arrangements as applicable. If Family Court Orders or Parenting Orders exist, a copy of the Order must be provided with this application.																	
LANGUAGE SPO	KEN AT HO	ME O	THER TI	HAN	ENGLISH												
NAME AGE CURRENT SCHOOL									HOOL								
NAMES AND AGES OF STUDENT'S SIBLINGS			1						Male Female								
		2							Male	Fema	ale						
		3							Male	Fema	ale						
4									Male	Fema	ale						
DETAILS OF FAM MEMBERS OR RE		FULL	NAME				SURNAI	ME WHILE AT		RELATIONSHIP YEAR OF HOU TO STUDENT GRADUATION			HOU	SE*			
WHO HAVE ATTI	ENDED						IVILKIDE	-I V									
ATTENDING ME																	

^{*} Cumberland, Durham, Kent, Oxford, Sussex, Warwick

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			TUDENTS ON d if the student		Austra	ılian citizer	n or p	permanent re	siden [.]	t in Australi	ia	
PASSPORT NUM OF STUDENT	1BER					COUNTRY OF ISSUE	'			EXPIRY DA	ΤE	
IS THE STUDEN	T CURRENT	LY IN AUSTRA	ALIA ON A VISA?	Yes	No							
VISA TYPE			VISA NUM	IBER						EXPIRY DA	ΙΈ	
NAME OF OVER STUDENT HEAL COVER PROVID	TH		MEM NO.	BERSHIP						EXPIRY DA	Œ	
LANGUAGES SP	POKEN											
STUDENT'S EM ADDRESS	AIL					STUDENT'						
WITH WHOM V	VILL THE ST	JDENT RESID	E WHILE IN AUSTI	RALIA		Parent	Арр	pointed Guardia	an			
 over twenty-f a suitable rela of good chara able to comm willing and al the first point * Written approtogether with 	the parent rive (25) yeative* acter nunicate effole to look to of contact oval of a not a a copy of person who he School.	teles of the appars of age fectively with after the study with the Somminated suithe Family (o) is: a grand	h the School in Edent at home dichool and, when itable relative to Census (translate parent, brother,	English uring a p requirec act as th d to Eng	eriod o d, able t e stude llish) wi	of ill health to commu ent's appoi hich show:	nicat nted s the	te with the pa guardian mu family relatio	st be nship	provided b	y the p	parent/s a 'suitable
711 011 (12) 00	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	22 (1101 (31))	10 31002111									
	MRS MS REV PROI		SURNAME					GIVEN NAME	E/S			
RESIDENTIAL AI	DDRESS									PO:	STCODI	E
POSTAL ADDRE	SS									PO:	STCODI	E
TELEPHONE (H)			(W)				(M)				
EMAIL												
OCCUPATION					EM	1PLOYER						

Note: Prior to confirmation of enrolment, the appinted guardian is required to visit the School to sign a Guardian Agreement in the presence of the School Principal or the Principal's nominee.

SECTION D: PAYE	MENT DETAILS								
PAYMENT OPTIONS	Cheque or money order,	made out to Meriden Scho	ol Cash	,	√isa* Ma:	stercard*	Amex*		
AMOUNT	\$275.00								
CARD NUMBER			EXPIRY						
NAME ON CARD									
CARDHOLDER'S SIGNATURE			DATE		2 (*A charge applies to credit card payments		
SECTION E: DECL	ARATION								
We understand thatShould the student kWe accept that each	pe accepted for enrolment parent whose signature apparent	Meriden. tion form by the School doe at Meriden, we undertake t ppears on this form is jointly doctor and previous school	o conform to the and severally lia	e Scho able fo	ol's regulations r payment of scl	and Terms hool fees.			
SIGNATURE OF FATHER/PARENT 1/ LEGAL GUARDIAN 1			DATE		2 (
SIGNATURE OF MOTHER/PARENT 2/ LEGAL GUARDIAN 2			DATE		2 (
		he child's parents/legal gua n this case further supportin							
SECTION F: AGEN	ICY ASSISTANCE								
		mpleted if a registered ag	ent of Meriden	is assi	sting with this	enrolmer	nt application.		
AGENCY NAME			AGENT'S FULL NAME						
ADDRESS									
TEL	1	FAX			EMAIL				
SECTION G: CHEC	KLIST								
Please ensure that all requirements with this completed app		application fee are forward	ed together		GENERAL INFO	ORMATIO	N		
Enrolment Applicat Certified copy of st The photocopy mu true copy of the ori	ion Fee (non-refundable) udent's birth certificate. ist be authorised as a iginal birth certificate authorised to certify tice of the Peace. ion history edicare Australia eas organisation	Copies of any medical a medical, psychological/ educational testing asse Copy of Parent's Citize Residency Certificate (born in Australia) Copy of Parent's Visa Ca applicable). A Visa Gra to parent/s who are no but are currently residi	psychometric and essments (if applice enship or Permanif parent/s were Grant Notice (if nt Notice only applet Australian citize)	nent not	HOW DID YOU FIND OUT ABOUT MERIDEN?	Refer Merio Adve	den website/internet search rtisements ol guides and listings it		
Copy of student's s child care learning	chool/pre-school/	Certified copy of stude (International students	ent's passport		PRIVACY STAT				
NAPLAN report (if a	AN report (if applicable) Copy of language school reports of Family Court Orders or ing Orders (if applicable) Copy of Family Census (translated to English) showing relationship of student's guardian (International students only) The information supplied on this form is requiputed by Meriden to manage the enrolment application. No personal information will be disclosed out: School without your express consent, except or required by law. A copy of Meriden's Privacy Pri						e enrolment application. vill be disclosed outside the ess consent, except where Meriden's Privacy Policy		
RETURN TO:				OFFIC	E USE ONLY				
The Registrar, M 3 Margaret Stree	eriden et, Strathfield NSW 2	2135 Australia		Date	received				
For further information contact The Registrar at Meriden on (61 2) 9752 9444 or enrolments@meriden.nsw.edu.au					Receipt Number				