ENROLMENT APPLICATION

Dear Family,

Thank you for your application to enrol your child/children at Holy Child Catholic Parish Primary School. An interview will be arranged with the Parish Priest and the Principal, to discuss your child’s enrolment once all applications have been processed. Please note that this form is a request for enrolment only.

The enrolment time-line is as follows:

- February 1st - Enrolments open
- June 1st - Enrolments close
- Early to Mid June - You will receive a response regarding your application
- Mid to Late June - Interview and formal enrolment
- Late October - Information Evening
- November / December - Prep Transition Program

The Parish and the school are committed to the education of the total child. Jesus Christ is our model and example. We see it is important to develop our children in many ways:

- spiritually
- emotionally
- socially
- physically
- intellectually
- psychologically.

Please supply us with the following certificates/cards, when returning your form as we need to sight the originals and make a photocopy of them. We will return the originals to you.

- BIRTH CERTIFICATE
- IMMUNISATION HISTORY STATEMENT
- HEALTH CARE CARD (Parent/Guardian only)
- COURT ORDER (if applicable)
- BAPTISM CERTIFICATE
- VISA -If born overseas for both child & parents
- MEDICARE CARD

An Application Fee is required on acceptance of your child’s enrolment: $50.00 for each child

I look forward to meeting with you.
Yours sincerely,

Alan Smith
(Principal)

ALL DETAILS MUST BE COMPLETED IN FULL FOR YOUR CHILD’S ENROLMENT TO BE CONSIDERED

THANK YOU
ENROLMENT FORM

HOLY CHILD PRIMARY SCHOOL
227 Blair Street, Dallas 3047
Email: office@hcdallas.catholic.edu.au
Tel: 9309 1620 Fax: 9309 7813

<table>
<thead>
<tr>
<th>OFFICE USE ONLY</th>
<th>Application for Enrolment for Year 20___</th>
<th>Date received: ____________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Certificates Required</th>
<th>Enrolment date:</th>
<th>Received by: ______________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Birth: □</th>
<th>Start date: ____________________</th>
<th>English second language: Yes □ No □</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Baptism: □</th>
<th>Student code:</th>
<th>Family code:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Immunisation: □</th>
<th>Medical Alert: Yes □ No □</th>
<th>VSN:</th>
<th>House colour:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>New Arrivals: Yes □ No □</th>
<th>Current Family: Yes □ No □</th>
<th>New Family: Yes □ No □</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Health Card: Yes □ No □</th>
<th>Name on Health Card (Parent/Guardian Card Only): ____________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>CRN No. on Health Card: _____ / _____ / _____ / ___</th>
<th>CSEF Form Completed (attached): Yes □ No □</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>STUDENT DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surname:</td>
</tr>
<tr>
<td>First name/s:</td>
</tr>
<tr>
<td>Preferred first name:</td>
</tr>
<tr>
<td>Religion:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HOME ADDRESS OF STUDENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street number &amp; name:</td>
</tr>
<tr>
<td>Suburb:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EMERGENCY CONTACTS – OTHER THAN PARENT</th>
</tr>
</thead>
</table>

1. Name: | 2. Name: |
| Relationship to child: | Relationship to child: |
| Home phone: | Home phone: |
| Mobile: | Mobile: |

<table>
<thead>
<tr>
<th>PREVIOUS SCHOOL/PRE-SCHOOL PERMISSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of previous school/pre-school:</td>
</tr>
<tr>
<td>Address of previous school/pre-school:</td>
</tr>
</tbody>
</table>

I/We give permission for Holy Child School to contact previous school or pre-school: Yes □ No □ |

Signature: | Signature: |

Office Use: Sacraments’ Info – P. 3 Nationality & Visa Info – P. 3 Medical Info – P. 4 |
Family/Parent Info – P. 5 Enrolment Interview Day: Date: Time: |
### SACRAMENTAL INFORMATION

<table>
<thead>
<tr>
<th>Sacrament</th>
<th>Date</th>
<th>Parish</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baptism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confirmation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reconciliation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Parish</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### NATIONALITY

**GOVERNMENT REQUIREMENT**

<table>
<thead>
<tr>
<th>Nationality</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Australia ☐</td>
</tr>
<tr>
<td>Other – please specify</td>
<td></td>
</tr>
</tbody>
</table>

Is the student of Aboriginal or Torres Strait Islander origin?
(For persons of both Aboriginal and Torres Strait Islander origin mark 'Yes' to both)

<table>
<thead>
<tr>
<th></th>
<th>Yes, Aboriginal</th>
<th>Yes, Torres Strait Islander</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Does the student or their mother-guardian or their father-guardian speak a language other than English at home? (if more than one language, indicate the one that is spoken most often)

<table>
<thead>
<tr>
<th></th>
<th>Student</th>
<th>Mother/guardian</th>
<th>Father/guardian</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Yes</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other – please specify</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### IF NOT BORN IN AUSTRALIA, CITIZENSHIP STATUS REQUIRED – Government requirement

Please tick the relevant category below and record the Visa Subclass number:
(Original documents to be sighted and copies to be retained by the school)

<table>
<thead>
<tr>
<th>Citizenship Status</th>
<th>Australian citizen (Naturalisation Certificate or Australian Passport number/ Document of Travel if Country of Birth is not Australia)</th>
<th>Australian Passport Number: (If applicable)</th>
<th>Naturalisation Certificate Number</th>
<th>Visa Subclass recorded on entry to Australia</th>
<th>Date of Arrival into Australia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australian Citizen not born in Australia</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Australian citizen (Naturalisation Certificate or Australian Passport number/ Document of Travel if Country of Birth is not Australia)</td>
<td>Australian Passport Number: (If applicable)</td>
<td>Naturalisation Certificate Number</td>
<td>Visa Subclass recorded on entry to Australia</td>
<td>Date of Arrival into Australia</td>
</tr>
</tbody>
</table>

Not currently an Australian Citizen please provide further details as appropriate below:

<table>
<thead>
<tr>
<th>Citizenship Status</th>
<th>Visa Subclass No:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanent resident, (if ticked, record the Visa Subclass Number)</td>
<td>Visa Subclass No:</td>
</tr>
<tr>
<td>Temporary resident, (if ticked, record the Visa Subclass Number)</td>
<td>Visa Subclass No:</td>
</tr>
<tr>
<td>Other/Visitor/Overseas Student, (if ticked, record the Visa Subclass Number)</td>
<td>Visa Subclass No:</td>
</tr>
<tr>
<td>Date of Arrival in Australia</td>
<td></td>
</tr>
</tbody>
</table>

*Please attach Visa/document of travel/letter of notification and passport photo page.*
### MEDICAL INFORMATION

<table>
<thead>
<tr>
<th>Doctor's name:</th>
<th>Street number and name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburb:</td>
<td>Post Code:</td>
</tr>
<tr>
<td>Medicare No.:</td>
<td>Ref No:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Expiry:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Private Health:</th>
<th>Yes ☐ No ☐</th>
<th>Fund:</th>
<th>Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance:</td>
<td>Yes ☐ No ☐</td>
<td>Number:</td>
<td></td>
</tr>
</tbody>
</table>

**Medical Condition:**

Please specify any medical conditions the student suffers from eg. asthma, diabetes and/or any prescribed medications taken by the student. A Medication Action Plan will be sent home for you to complete.

<table>
<thead>
<tr>
<th>Allergies:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Please list any known allergies the student has eg. allergy to nuts, penicillin, bee stings including specific details.</td>
</tr>
</tbody>
</table>

Has the student been diagnosed as being at risk of anaphylaxis?   Yes ☐ No ☐

If yes, does the student have an EpiPen or Anapen?   Yes ☐ No ☐

### IMMUNISATION (please indicate if the student has been immunized against the following)

Has Immunisation Certificate been supplied?   Yes ☐ No ☐

**Immunisation Certificate must be supplied for enrolment to be considered**

<table>
<thead>
<tr>
<th></th>
<th>Date</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diptheria/Tetanus/Whooping Cough</td>
<td>Yes ☐ No ☐</td>
<td>Hepatitis B</td>
</tr>
<tr>
<td>Haemophilus Influenza type B (Hib)</td>
<td>Yes ☐ No ☐</td>
<td>Polio</td>
</tr>
<tr>
<td>Measles-Mumps-Rubella</td>
<td>Yes ☐ No ☐</td>
<td>Rotavirus</td>
</tr>
<tr>
<td>Meningococcal C disease</td>
<td>Yes ☐ No ☐</td>
<td>Chicken Pox</td>
</tr>
<tr>
<td>Human Papillomavirus (HPV) (12-18yrs)</td>
<td>Yes ☐ No ☐</td>
<td>Pneumococcal disease</td>
</tr>
</tbody>
</table>

This application gives you the opportunity to provide information that will facilitate the smooth transition of your child into our school. It will assist the school to develop appropriate strategies to meet the particular needs of your child. If the information provided is incomplete or misleading, any decision made as to this enrolment may be revised.

### ADDITIONAL NEEDS

Does your child have:

- autism ☐
- intellectual disability ☐
- ADD/ADHD ☐
- giftedness ☐
- other (please specify) ☐

Has your child ever seen a:

- behavioural optometrist ☐
- educational psychologist ☐
- psychologist ☐
- audiologist ☐
- paediatrician ☐
- other specialist ☐
- speech pathologist ☐
- occupational therapist ☐

If your child does have a special need, please can you assist us by providing the following information:

Details of additional learning needs/additional needs provided (please provide all relevant information)   Yes ☐ No ☐

Medical/allied health professional reports attached (please provide all relevant information)   Yes ☐ No ☐
**FAMILY DETAILS**

Who will be responsible for the payment of the school fees and levies? Please tick a box

- [ ] Both Parents
- [ ] Mother Only
- [ ] Father Only
- [ ] Guardian
- [ ] Other:

**MOTHER/GUARDIAN**

Surname: [Blank]
Title: (eg. Mrs/Ms) [Blank]
First Name: [Blank]

Address: [Blank]
Home Phone: [Blank]
Work Phone: [Blank]
Mobile: [Blank]

Would you like to receive SMS Messaging: (for emergency & reminder purposes) Yes [ ] No [ ]

Email: [Blank]

<table>
<thead>
<tr>
<th>Government Requirement</th>
<th>Occupation:</th>
<th>What is the occupation group? (select from list of parental occupation groups in the School Family)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religion:</td>
<td>Nationality:</td>
<td></td>
</tr>
<tr>
<td>Country of Birth:</td>
<td>Australia</td>
<td>Other (please specify):</td>
</tr>
</tbody>
</table>

What is the highest year of primary or secondary school the mother/guardian has completed:
(Persons who have never attended secondary school, mark “Year 9 or below”)

- [ ] Year 9 or below
- [ ] Year 10 or equivalent
- [ ] Year 11 or equivalent
- [ ] Year 12 or equivalent

What is the level of the highest qualification the mother/guardian has completed:

- [ ] No post school qualification
- [ ] Certificate I to IV (including trade certificate)
- [ ] Advanced diploma/Diploma
- [ ] Bachelor degree or above

**FATHER/GUARDIAN**

Surname: [Blank]
Title: [Blank]
First Name: [Blank]

Address: [Blank]
Home Phone: [Blank]
Work Phone: [Blank]
Mobile: [Blank]

SMS Messaging: (for emergency & reminder purposes) Yes [ ] No [ ]

Email: [Blank]

<table>
<thead>
<tr>
<th>Government Requirement</th>
<th>Occupation:</th>
<th>What is the occupation group? (select from list of parental occupation groups in the School Family)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religion:</td>
<td>Nationality:</td>
<td></td>
</tr>
<tr>
<td>Country of Birth:</td>
<td>Australia</td>
<td>Other (please specify):</td>
</tr>
</tbody>
</table>

What is the highest year of primary or secondary school the father/guardian has completed:
(Persons who have never attended secondary school, mark “Year 9 or below”)

- [ ] Year 9 or below
- [ ] Year 10 or equivalent
- [ ] Year 11 or equivalent
- [ ] Year 12 or equivalent

What is the level of the highest qualification the father/guardian has completed:

- [ ] No post school qualification
- [ ] Certificate I to IV (including trade certificate)
- [ ] Advanced diploma/Diploma
- [ ] Bachelor degree or above

**SIBLINGS ATTENDING A SCHOOL / PRE-SCHOOL**
List all children in your family attending school or preschool (oldest to youngest) – include applicant

<table>
<thead>
<tr>
<th>Name</th>
<th>School/Pre-school</th>
<th>Year/Grade</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PLEASE INDICATE THE HOME CARE ARRANGEMENTS FOR THIS STUDENT:**

- [ ] Living with Mother & Father
- [ ] Single parent: Mother / Father (please circle)
- [ ] Living in a step family
- [ ] Shared parenting eg. One week with mother, next with father
  - FTE with Mother: _________
  - FTE with Father: _________
- [ ] Guardian
- [ ] Out-Of-Home Care

**COURT ORDERS (IF APPLICABLE)**

Are there any current court orders relating to the student?  Yes [ ]  No [ ]

*If yes, copies of these court orders e.g. AVOs, Family Court/Federal Magistrates Court orders or other relevant court orders must be provided.*

Is there any other information you wish the school to be aware of?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

**PERMISSION FOR SUNSCREEN APPLICATION & HEAD LICE INSPECTION**

- [ ] I give permission for my child's hair to be checked for head lice in the event of an outbreak or when required.
- [ ] I understand that this permission is valid for the period of my child's primary school years at the school and will only need to be renewed if the school's policy changes.

**MOTHER’S / GUARDIAN’S SIGNATURE:**

**FATHER’S / GUARDIAN’S SIGNATURE:**
CSEF Application Form

(For Health Card Holders)

School REF ID - 21653

Parent/legal guardian details
Surname
First name
Address
Town/suburb State Postcode
Contact number

Centrelink pensioner concession OR Health care card number (CRN)

OR

Foster parent* OR Veterans affairs pensioner

*Foster Parents must provide a copy of the temporary care order letter from the Department of Health and Human Services (DHHS).

Student details

<table>
<thead>
<tr>
<th>Child’s surname</th>
<th>Child’s first name</th>
<th>Student ID</th>
<th>Date of birth (dd/mm/yyyy)</th>
<th>Year level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I authorise the Department of Education and Training (DET) to use Centrelink Confirmation eServices to perform an enquiry of my Centrelink customer details and concession card status in order to enable the business to determine if I qualify for a concession, rebate or service. I also authorise the Australian Government Department of Human Services (the department) to provide the results of that enquiry to DET.

I understand that:

• the department will use information I have provided to the DET to confirm my eligibility for the Camps, Sports and Excursions Fund and will disclose to the DET personal information including my name, address, payment and concession card type and status.
• this consent, once signed, remains valid unless I withdraw it by contacting the school or the department.
• I can obtain proof of my circumstances/details from the department and provide it to DET so that my eligibility for the Camps, Sports and Excursions Fund can be determined.
• if I withdraw my consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the Camps, Sports and Excursions Fund provided by DET.
• Some personal information may be disclosed to the Victorian Department of Health and Human Services, for the purpose of evaluation and monitoring of concession card services.

You are able to request access to the personal information that we hold about you, and to request that any errors be corrected, by contacting your child’s school.

Signature of applicant ___________________________ Date ___ / ___ /
HOLY CHILD PRIMARY SCHOOL
ANNUAL PHOTOGRAPH/VIDEO PERMISSION FORM

Dear Parent/Guardian

At certain times throughout the year, our students may have the opportunity to be photographed or filmed for our school publications, such as the school’s newsletter or website and social media, or to promote the school in newspapers and other media.

The Catholic Education Office Melbourne (CEOM) and the Catholic Education Commission of Victoria Ltd (CECV) may also wish to use student photographs/videos in print and online promotional, marketing, media and educational materials.

We would like your permission to use your child’s photograph/video for the above purposes. Please complete the permission form below and return to the school as soon as possible.

Thank you for your continued support.

__________________________________________________________________________________________

STUDENT’S FULL NAME: _____________________________________________ YEAR LEVEL: ____________

- I give permission for my child’s photograph/video and name to be published in:
  - the school website
  - social media
  - promotional materials
  - newspapers and other media.

- I authorise the CEOM/CECV to use the photograph/video in material available free of charge to schools and education departments around Australia for the CEOM/CECV’s promotional, marketing, media and educational purposes.

- I give permission for a photograph/video of my child to be used by the CEOM/CECV in the agreed publications without acknowledgment, remuneration or compensation.

- I understand and agree that if I do not wish to consent to my child’s photograph/video appearing in any or all of the publications above, or if I wish to withdraw this authorisation and consent, it is my responsibility to notify the school.

LICENSED UNDER NEALS: The photograph/video may appear in material which will be available to schools and education departments around Australia under the National Educational Access Licence for Schools (NEALS), which is a licence between education departments of the various states and territories, allowing schools to use licensed material wholly and freely for educational purposes.

Name of Parent / Guardian
(please circle )

Signed: Parent/Guardian ____________________________ Date: ____________

If Student is aged 15+, student may also sign:
Signed: Student ____________________________ Date: ____________

Any personal information will be stored, used and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth).

OFFICE USE
Date of Photograph/Video: (month & year)
Family General Permission Form
(Release of Contact Details / Local Excursions)
Whilst attending Holy Child School from Years Prep – to Year 6 inclusive

Please read, complete and sign this form.

Child’s Name: ___________________________ Year Commenced at Holy Child: ____________

1. I give permission for Holy Child School to release contact details for my family within the school only to such groups and individuals as members of Parents and Friends, Class Mothers, for personal contact only, and for the purpose of compiling class helper lists, i.e. rosters, etc.

2. I give permission for my child/children to attend **local excursions** (local shops, parks and recreation spaces)

3. In case of an emergency, I give permission for my child/children to be taken to hospital casualty.

Parent/Guardian Name: ___________________________ / ___________________________

Signed: ___________________________ / ___________________________ Date: ____________

4. Do you have a ‘Working with Children Check’? Yes - ☐ No - ☐

   Name on Card: ___________________________ No.: ___________________________ Expiry Date: ___________________________
SCHOOL FAMILY OCCUPATION INDEX
PARENT OCCUPATION GROUPS

Please select the appropriate group from the following list.

GROUP N: Unemployed for more than 12 months

If you are not currently in paid work but have had a job in the last 12 months, or have retired in the last 12 months, please use your last occupation to select from the list. If you have not been in paid work for the last 12 months, enter 'N' into the ‘occupation code’ field on the enrolment form.

OCCUPATION GROUP A
SENIOR MANAGEMENT IN LARGE BUSINESS ORGANISATIONS, GOVERNMENT ADMINISTRATION AND DEFENCE AND QUALIFIED PROFESSIONALS

Senior management in large business organisations
Senior Executive / Manager / Department Head in industry, commerce, media or other large organisation

- Business [e.g. chief executive, managing director, company secretary, finance director, chief accountant, personnel/industrial relations manager, research and development manager]
- Media [e.g. newspaper editor, film/television/radio/stage producer/director/manager]

Government administration
- Public Service Manager (Section head or above) [e.g. regional director, hospital/health services/nurse administrator, school principal, faculty head/dean, library/museum/gallery director, research/facility manager, police/fire services administrator]
- Defence Forces Commissioned officer

Qualified Professionals – generally have a degree or higher qualifications and experience in applying this knowledge to:
-design, develop or operate complex systems, identify, treat and advise on problems, teach others


- Health [e.g. GP or specialist, registered nurse, dentist, pharmacist, optometrist, physiotherapist, chiropractor, veterinarian, psychologist, therapy professional, radiographer, podiatrist, dietician]
- Education [e.g. school teacher, university lecturer, VET/special education/ESL/private teacher, education officer]
- Law [e.g. judge, magistrate, barrister, coroner, solicitor, lawyer]
- Social Welfare [e.g. social/welfare/community worker, counsellor, minister of religion, economist, urban/regional planner, sociologist, librarian, records manager, archivist, interpreter/translator]
- Engineering [e.g. architect, surveyor, chemical/civil/electrical/mechanical/mining/other engineer]
- Science [e.g. scientist, geologist, meteorologist, metallurgist]
- Computing [e.g. IT services manager, computer systems designer/administrator, software engineer, systems/applications programmer]
- Business [e.g. management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]
- Air/sea transport [e.g. aircraft pilot, flight officer, flying instructor, air traffic controller, ship’s captain/officer/pilot]

OCCUPATION GROUP B
OTHER BUSINESS OWNERS/MANAGERS, ARTS/MEDIA/SPORTSPERSONS AND ASSOCIATE PROFESSIONALS

Business Owner / Manager
- Farm/business owner/manager [e.g. crop and/or livestock farmer/farm manager, stock and station agent, building/construction, manufacturing, mining, wholesale, import/export, transport business manager, real estate business]
- Specialist manager [e.g. works manager, engineering manager, sales/marketing manager, purchasing manager, supply/transport manager, customer service manager, property manager, personnel, industrial relations]
- Financial services manager [e.g. bank branch manager, finance/investment/insurance broker, credit/loans officer]
- Retail sales/services manager [e.g. 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]

Arts / media / sportspersons
- Artist/Writer [e.g. editor, journalist, author, media presenter, photographer, designer, illustrator, musician, actor, dancer, painter, potter, sculptor]
- Sports [e.g. sportsman/woman, coach, trainer, sports official]

Associate professionals – generally have diploma/technical qualifications and provide support to managers and professionals

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

○ Health/social welfare [e.g. enrolled nurse,
community health worker, paramedic/ambulance officer, massage
therapist, welfare/parole officer, youth worker,
dental hygienist/technician]

○ Law [e.g. police officer, government inspector,
examiner or assessor, occupational/environmental
health officer, security advisor, private, law clerk,
court officer, bailiff]

○ Business/administration [e.g. recruitment/employment/industrial
relations/training officer, marketing/ advertising
specialist, market research analyst, technical
sales representative, retail buyer, office/business
manager, project manager/administrator, other
managing supervisors]

○ Defence Forces [e.g. senior non-commissioned
officer]

○ Other [e.g. library technician, museum/gallery
technician, research assistant, proof reader]

OCCUPATION GROUP C
TRADESMEN/WOMEN, CLERKS AND SKILLED OFFICE,
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.

Tradesmen/women

○ Trades [e.g. Electrician, plumber, welder, cabinet
maker, carpenter, joiner, plasterer, tiler, stonemason,
painter decorator, butcher, pastry cook, panel beater,
fitter, toolmaker, aircraft engineer]

Clerks, Skilled office, sales and service staff

○ Clerk [e.g. bookkeeper, bank clerk, PO clerk,
statistical/actuarial clerk, accounts/claims/audit/
payroll clerk, personnel records clerk,
registry/filing clerk, betting clerk, production
recording clerk, stores/inventory clerk,
purchasing/order clerk, freight/transport/shipping
clerk/despatcher, bond clerk, customs
agent/clerk, customer inquiry/complaints/service
clerk, hospital admissions clerk]

○ Office [e.g. secretary, personal assistant, desktop
publishing operator, switchboard operator]

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

○ Carer [e.g. aged/disabled/refuge care worker, child
care assistant, nanny]

○ Service [e.g. meter reader, parking inspector,
postal delivery worker, travel agent, tour guide,
flight attendant, fitness instructor, casino
dealer/gaming table supervisor]

OCCUPATION GROUP D
MACHINE OPERATORS, HOSPITALITY STAFF, OFFICE
ASSISTANTS, LABOURERS AND RELATED WORKERS

Drivers, mobile plant, production/processing machinery
and other machinery operators

○ Driver or mobile plant operator [e.g. car, taxi,
truck, bus, tram or train driver, courier/ deliverer,
forklift driver, street Sweeper driver, garbage
collector, bulldozer/loader/grader/excavator operator,
farm/horticulture/forestry machinery operator]

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

○ Machinery operator [e.g. photographic
developer/printer, industrial spray painter,
boiler/air-conditioning/ refrigeration plant, railway
signals/points, crane/hoist/lift, bulk materials
handling machinery]

Hospitality, office staff

○ Sales staff [e.g. 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 [e.g. typist, word processing/data
entry/business machine operator, receptionist]

○ Hospitality staff [e.g. hotel service supervisor,
receptionist, waiter, bar attendant, kitchenhand,
fast food cook, usher, porter, housekeeper]

○ Assistant/aide [e.g. trades’ assistant,
school/teacher’s aide, dental assistant,
veterinary nurse, nursing assistant,
museum/gallery attendant, home helper,
salon assistant, animal attendant]

Labourers and related workers

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

○ Agriculture, horticulture, forestry, fishing, mining
worker [e.g. farm overseer, shearer, wool/hide
classer, farm hand, horse trainer, nurseryman,
greenkeeper, gardener, tree surgeon, forestry/logging
worker, miner, seafarer/fishing hand]

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