

AIS Application for Enrolment Form (Domestic)

Please write clearly in CAPITAL LETTERS ensuring to (✓) all boxes where appropriate

3 STEPS for Enrolment

STEP 1	Complete this Application for Enrolment Form
STEP 2	Gather the Essential Pieces of Documentation listed below
STEP 3	Forward the completed Application for Enrolment Form and documentation to katlyne.bundal@aeg.edu.au

2 ESSENTIAL Pieces of Documentation

1	Copy of current school ID card
2	Copies of Previous or Current School Reports

School Details

Name of School			
Contact Teacher enrolling the student		Role	
Email address			
Telephone Number		Mobile Number	

Study Selection (please tick (✓) the program and semester including the Year you intend to study)

South Australian Certificate of Education (SACE)						
Stage 1 (Year 11)	Semester 1	<input type="checkbox"/>	Semester 2	<input type="checkbox"/>	Year	<input type="checkbox"/>
Stage 2 (Year 12)	Semester 1	<input type="checkbox"/>	Semester 2	<input type="checkbox"/>	Year	<input type="checkbox"/>

Part-time Enrolment	<input type="checkbox"/>	Subject Requested	
Full time Enrolment	<input type="checkbox"/>		

Student Personal Details

Family Name			Given Name							
Date of Birth		Current Age		Gender	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Other	<input type="checkbox"/>
Nationality			SACE Number							

Address					
Country			Postcode		
Telephone Number			Mobile Number		
Email Address					





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Medical Condition (Optional Disclosure)

Do you have a disability or medical condition that requires special consideration?	Yes		No	
If yes, please explain for AIS to make necessary arrangements and assistance for the student				

Parent / Guardian Details

Father's Family Name		Father's Given Name	
Father's Address			
Country		Postcode	
Telephone Number		Mobile Number	
Email Address			

Mother's Family Name		Mother's Given Name	
Mother's Address			
Country		Postcode	
Telephone Number		Mobile Number	
Email Address			

Guardian's Family Name		Guardian's Given Name	
Guardian's Address			
Country		Postcode	
Telephone Number		Mobile Number	
Email Address			



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Emergency Person Contact Details

Family Name		Given Name	
Address			
What is your relationship with this person?			
Country		Postcode/ZIP	
Telephone Number		Mobile Number	
Email Address			

Authorisation: I _____
(Student Name)

- Authorise *Adelaide International School* to collect, store and use my personal information within the limitations of the Privacy Principle contained in the Privacy Act 1998.
- Authorise *Adelaide International School* to make relevant enquiries, where necessary, and in accordance with legislation, regarding my application for the purpose of undertaking study.
- Understand that my information will only be released to third parties in accordance with legislation.
- Agree for my academic performance and conduct be made available to my parents and agent
- Understand that I may at any time revoke my authorisation for *Adelaide International School* to release my information to third parties by notifying *Adelaide International School* and that implementation cannot be retrospective.

School's Representative Signature

Date

Student Signature

Date

FEES FOR SACE SUBJECTS

	20 SACE Credits	10 SACE Credits
Enrolment Fee	\$180	\$180
Material Fee	\$180	\$105
Tuition Fee	\$1,500	\$750
Total Fee	\$1,860	\$1,035