Student Application Form

Plymouth Road Croydon Hills Vic 3136 Phone (03) 9724 2000 Fax (03) 9724 2007 email enrolments@luther.vic.edu.au www.luther.vic.edu.au



Full name of Student	:			
(please use block letters)	Surname	First Name	Second Name	
Preferred name				
(leave blank if as above)	First Name Note A copy of the Birth Cert	VSN tificate/Extract for this student must be a	ttached to the Application.	
Residential Address	Note A sopy of the Birth serv	anisato, Extraor ior tino oracione muot so a	identical to the Approximation	
			Postcode	
Postal Address (leave b	olank if as above)			
			Postcode	
Home Phone No				
Date of Birth	Sex	Australian Citizen	Australian Resident Other	
Country of Birth		Language spoken	at home	
Current School		Current Year Level		
Religious Denomination(if applicable)		Congregation (where family is in mem	Congregation (where family is in membership – if applicable)	
Apply for entry to Ye (please circle)	ar 7	8 9 10 1	1 12 In the Year 20	
Father			Dr/Mr/Other	
(please use block letters)	Surname	Given names		
Postal Address (if it vari	es from student)			
			Postcode	
Telephone (H)		Mobile		
Telephone (W)		Email		
Occupation		Employer		
Mother			Dr/Mrs/Ms/Miss/Other	
(please use block letters)	Surname	Given names		
Postal Address (if it vari	es from student)			
			Postcode	
Telephone (H)		Mobile		
Telephone (W)		Email		
Occupation		Employer		

Particular Issues Is there anything about the student applying that you should bring to the School's attention? (For example, particular gifts, disability, medical condition.) **Family Information** If child is currently at Luther Sibling Name/s Date of Birth please list year level and home group Is either parent a past student of Luther College? If so, please provide name (as known at Luther) and years attended (i.e. 1975-1980). Years attended Name Name Years attended How did you learn about Luther College? Reasons for seeking entrance Please tick relevant box(es) Please rate each item on the following scale 3 1 4 5 = very important > 1 = not at all importantWord of Mouth Religious Foundation & Influence Media – advertising Academic Excellence Media - editorial Broad/balanced program Open Day Co-education Letter Box Drop Music/Performing Arts program Prospectus Pastoral Care Social Occasions Parent attended Luther College Website Siblings in School Primary School Friends in School Other Locality Fee Level **Please Note** Siblings, children of Luther College Old Scholars, students of the Good Shepherd Lutheran Primary School and members of the Lutheran Church of Australia are given priority whenever possible. 2. The payment of the application fee to Luther College does not guarantee enrolment. The application fee is non-refundable. I am aware of the character and aims of the College as a Lutheran School and agree that my child and I shall treat these with respect. I agree to abide by and support the rules and regulations of the College and to pay the fees on receipt of the fees account. I am aware that a student bond will be lodged with the school on the acceptance of a place for my child. The Application charge of \$70.00 (includes GST) can be paid by credit card (below) or by cheque payable to 'Luther College'. This confirms the application. Signature of Parents/Guardians **Credit Card Authority** ☐ VISA ☐ Mastercard (VISA and Mastercard ONLY) Cardholder's Name (please print) Credit Card No. L L L L L L L L CVV No. (on rear) L L L Expiry Date L L L L _____ Signature ___

Privacy Collection Notice

Luther College is committed to managing personal information in an open and transparent way. All information collected on this form will be used and stored in accordance with the Luther College Privacy Policy. The policy observes the Australian Privacy Principles contained in the Commonwealth Privacy (Private Sector) Act 1988 and Privacy Amendment (Enhancing Privacy Protection) Act 2012 and contains a Collection Notice. A copy of the policy can be obtained from the College website.