

# 2026 Student enrolment application form

Please complete ALL sections and email the form to SCL.Enrolments@det.nsw.edu.au

Office use only				
Approved: Comments:				
Date:				
Charles to the later the				
Student details				
First given name:				
Other given names:				
Family name:				
Preferred name:				
ERN number: NESA number:				
Student mobile:/ Date of birth:/				
Student school email:				
Alternative email:				
Student gender: Male 🗆 Female 🗆 Other 🗆				
2026 student grade: Year 7 🗆 Year 8 🗆 Year 9 🗀 Year 10 🗀 Year 11 🗀 Year 12 🗀				
School details				
School name:				
School email:				
School SCL coordinator name:				
School SCL coordinator email:				
Student is a boarder: Yes $\square$ No $\square$ If yes, please provide the following information:				
Boarding director name:				
Boarding director email:				

Permission to	o publis	h					
The College would like to publish information, including photos and videos, of the student to share their experience and inform the broader community, in communications including but not limited to the College newsletter and social media accounts. This permission remains effective until the College is advised otherwise.							
I have read the al	bove infor	mation and:					
Yes, I give permiss	sion to pul	olish 🗆 🗀	No, I do NC	OT give permission t	o publish		
Course detail	s						
Language reques	ted:						
If the student is a	pplying fo	or Year 11 or 12 <i>Chii</i>	nese, Japa	ınese or Korean, pl	ease speci	ify which course	:
Refer to the eligib	ility criteri	a for Stage 6 langu	uage cours	es on the NESA we	bsite.		
[Language] Conti	nuers 🗆	[Language] ir	n Context	☐ [Languag	je] and Lite	erature 🗆	
If the student is i	n Year 11 o	r 12, please provid	e the follo	wing information:			
Does this course o	count tow	ards your minimur	n number	of units studied in	2026?	Yes □ N	lo 🗆
Secondary Coll	ege of La	inguages Campi	us				
Please indicate w	hich camp	ous the student wil	l attend. N	ote, each campus c	offers a diff	erent selection c	f language
courses. Students	must stud	dy at the campus v	vhich offer	s the requested cou	urse, close:	st to their home.	
Arthur Phillip		Ashfield Boys		Bankstown Girls		Birrong Girls	
Cabramatta		Chatswood North		Chatswood South		Kogarah	
Liverpool Girls		Merewether		Petersham			
Smith's Hill		Strathfield Girls		The Hills Sports			
Connection t	o langu	age					
Is the requested language spoken at home: Yes $\square$ Sometimes $\square$ No $\square$							
Previous study/ knowledge of the language: Primary School $\Box$ High school $\Box$ Community school $\Box$							
If the language was spoken overseas, which country:							
If the language is not spoken at home, what connection do you have with the language?							

Parent/carer 1 details					
Title:	Mr				
Given names:					
Family name:					
Gender:	Male   Female   Other				
Relation to student:					
Is this person the prim	ary contact: Yes 🗆 No 🗆				
Is this person the eme	rgency contact on Saturday: Yes 🗆 No 🗆				
Street address:					
Suburb:	Postcode				
Does the student resid	de at this address: Yes $\square$ Sometimes $\square$ No $\square$				
Mobile phone: Home phone:					
Email address:					
Parent/carer 2 de	etails				
Parent/carer 2 do	etails  Mr				
Title:					
Title: Given names:					
Title: Given names: Family name:	Mr				
Title: Given names: Family name: Gender:	Mr				
Title: Given names: Family name: Gender: Relation to student: Is this person the prime	Mr				
Title: Given names: Family name: Gender: Relation to student: Is this person the prim	Mr				
Title:  Given names:  Family name:  Gender:  Relation to student:  Is this person the primals this person the eme  Street address:	Mr   Mrs   Ms   Miss   Dr    Male   Female   Other    ary contact: Yes   No    rgency contact on Saturday: Yes   No				
Title: Given names: Family name: Gender: Relation to student: Is this person the prim Is this person the eme Street address:	Mr				
Title:  Given names:  Family name:  Gender:  Relation to student:  Is this person the prime of the student residence of the student	Mr				

	nd student	support					
Allergies and anaphy	<b>/laxis</b> (includi	ng insect s	tings, c	Irugs,	atex, fo	ood or other)	
Student has an allergy:		Yes		No			
If yes, please specify:							
Is this a severe allergy (a	ınaphylaxis):	Yes		No			
Student has been presc	ribed an EpiPe	en: Yes		No			
Student has an ASCIA A	ction Plan:	Yes		No		If yes, please attach a copy.	
Asthma							
Student has asthma		Yes		No			
Student carries an inhal	er	Yes		No			
Student has an ASTHMA	Action Plan:	Yes		No		If yes, please attach a copy.	
<b>Medical conditions o</b> Please tick if the studen				laxis :	and as	sthma	
Autism		Physical dis	sability			Vision/hearing impairment	
Diabetes		Epilepsy				Behaviour disorder	
Difficulties in learning		Acquired b	rain inj	ury		Mental health disorder	
Other (please specify)							
If required, please provid	de further deta	ails of the s	tudent	's med	lical co	ndition:	
	ssessment						

Medical details and student sup	port (c	ontinue	ed)		
Student support plans					
Please indicate whether the student has ar	ny of the f	ollowing i	n place at t	heir school:	
Learning Support Plan:	Yes 🗆	No			
Behaviour Support Plan:	Yes □	No			
Individual Health Care Plan:	Yes 🗆	No			
Disability provisions:	Yes 🗆	No			
If yes to any of the above, please attach a copy of their plan to this application. Applications will NOT be accepted without relevant plans attached.					
Special circumstances					
If there are any special circumstances about made aware of, please provide details:	If there are any special circumstances about the student that the Secondary College of Languages should be made aware of, please provide details:			be	
<b>5</b> . 11					
Residency status					
Residency status: Australian citizen	□ Pe	rmanent	resident l	□ Temporary visa holder □	
If the student is a permanent or temporal	If the student is a permanent or temporary visa holder, please provide the following information:				
Current visa sub-class:		Visa	expiry date	e://	
Fee-paying international student: Yes [	□ No	□ Abo	riginal or T	orres Strait Islander: Yes 🗆	No 🗆
If the student was born overseas, please provide the following information:					
Country of birth: Year arrived in Australia:					
Attach documents: Passport □ Visa □ ImmiCard □					
Applications will NOT be accepted for permanent residents or temporary visa holders without at least TWO of the above documents attached.					
A					
Appendices					
If applying late (after 27 February 2026 ) ple	ease attac	h:		Appendix 1 – Late Enrolment	
If applying for Chinese, Japanese or Korear	n Continue	ers, please	attach:	Appendix 2 - Continuers	
If applying for Chinese, Japanese or Korean in Context, please attach: Appendix $3$ – In Context					
If applying for a Year 12 course, please attac	ch:			Appendix 4 – RPL	
If applying for Acceleration, please attach:  Appendix 5 - Acceleration					

### Student declaration

#### **Conditions of enrolment**

- The student must attend classes on time each Saturday, complete all homework tasks and actively engage in the course to meet NESA requirements.
- The student must complete relevant assessment tasks in line with NESA requirements and the assessment policies of the Secondary College of Languages.
- The student may be required to purchase learning materials, such as a bilingual dictionary.
- The student may be required to use online learning technology to engage in their language study.
- The student and parent/carer's emails will be used by the Secondary College of Languages to send information or work that is directly related to the College and the student's language studies.
- Parents/carers must follow the Parent/Carer and Visitor Code of Conduct which can be found on the College website.

#### I understand and accept the above conditions of enrolment.

Student name:	 Signature:	
Parent/carer name:	 Signature:	

After signing and completing all the above sections of this form, please hand the application to the student's weekday school, along with any appendices and supporting documentation. The school is responsible for completing the remaining information and submitting the form to the Secondary College of Languages.

### School declaration

The language requested is the student's background community language.
This language will not be taught at the weekday school in 2026 in the year group and course requested.
The weekday school accepts responsibility for entering the student with NESA as a candidate for the 100
hours or 200 hours course, Preliminary or Higher School Certificates course, using the online entry codes
for the Campus where the student is enrolled.
The weekday school will notify the Secondary College of Languages of any student history, or any arising
circumstances known to them which may pose a risk of any type to the student, other students, or staff at
the College, including any severe allergies, medical conditions, behavioural conditions, history of violence,
or wellbeing concerns.
The week day call and will previde a CCL Coordinator who will

- The weekday school will provide a SCL Coordinator who will:
  - be contactable during the week via email
  - respond to enquiries and provide advice regarding the student
  - regularly follow up with students on the school's LMS 'Millennium'
  - follow up on any concerns raised by the student's Secondary College of Languages Campus
     Executive
- The weekday school guarantees that, to the best of their knowledge, the information contained in this application is accurate, and any changes will be communicated to the Secondary College of Languages.

SCL Coordinator and Principal must sign and stamp the declaration on page 7.

Scho	ool declaration (continued)			
I understand and accept the declaration and conditions of enrolment on page 6.				
SCL C	oordinator signature:			
Princi	pal name:			
Princi	pal signature:			
Schoo	ol stamp:			
Date s	signed:			
Che	cklist for submitting this enro	lment form		
Atter	ntion: SCL Coordinator			
The S	CL Coordinator at the student's weekday	y school is responsible for ensuring that the following has been		
		that are incomplete, illegible, or incorrectly completed will be		
		es, the student's enrolment will not progress until an amended form		
has be	een received by the Secondary College c	of Languages.		
	ALL sections of this form have been cor	npleted correctly and legibly, including signatures.		
	The student has supplied correct details for at least one emergency contact (page 3).			
	Residential status documents (including Passport and Visa and/or ImmiCard) for permanent/temporary residents have been attached.			
	Required appendices/supporting docu	mentation (page 5) have been completed and attached.		
		5) have been attached where necessary.		
		nd stamped the school declaration (page 7).		

## Submitting this enrolment form

The student's weekday school is responsible for emailing this form, and any required appendices and supporting documentation, to the Secondary College of Languages. The form should be sent as a single PDF with the student's full name as the file title. Only PDF documents sent from a school or teacher email address will be processed. If sending a form directly from a scanner, please include an email subject with the student's full name.

Email forms to: SCL.Enrolments@det.nsw.edu.au