

# **Change of School Application**

This application is for students currently enrolled with NSW School of Languages who are changing their home school and wish to continue studying a language with NSL.

Further information

Phone: (02) 9381 4800

Email: enrolments.nswsol@det.nsw.edu.au

Website: www.nswschoollang.schools.nsw.edu.au





# Change of School Application

### enrolments.nswsol@det.nsw.edu.au

	Office use only					
Application category (RDE)	Enrolled by	ERN				
Approval category (NSL)	Date / /	Millennium				
School Information (Please print clearly)						
School						
School street address						
	Postcode					
NSW public schools only: Students must be shared on ERN before application can be accepted.						
Enrolment Registration Number (ERN) Shared						
Student Information (Please print clearly)						
Surname						
Given namesas per birth certificate/passport						
Date of birth / Female Male Other						
Student's mobile						
Is the student of Aboriginal or Torres Strait Islander origin?						
No Aboriginal Torres Strait Islander Both Aboriginal and Torres Strait Islander						
What language/s other than English does the student speak at home?						

Stu	Student Email Information (Please print clearly)																	
The s	stude	ent's	s sch	ool	em	ail a	addr	ess	is <b>m</b>	and	lato	ry.						
NSW	publi	c scl	hools	5														
																		@education.nsw.gov.au
Othe	r edu	catio	onal	prov	vider	S												
																		@

# Residency Status (Mandatory)

Australian citizen Yes 🗌	No 🗌 If 'No', all fields must	be completed.				
Passport number	Country of issue					
Student's residency status:	Permanent	Temporary				
Visa class	Sub class	Visa expiry date / /				
Country of birth / If born overseas, date of arrival in Australia /						

Parent/Carer Details									
Parent/Carer in Australia – This parent/carer will receive all correspondence.									
Parent/Carer - 1 (where student resides)	Surname Relationship to student	Relationship to student							
Title: Mr/Mrs/Ms/Miss/Dr	Given name								
Street address									
Suburb	Postcode								
Home phone	Mobile phone								
Email address <mark>(Mandatory)</mark>									
Parent/Carer - 2	Parent/Carer - 2     Surname     Relationship to student								
Title: Mr/Mrs/Ms/Miss/Dr Given name									
Street address	Street address								
Suburb Postcode									
Home phone									
Email address									

Emergency Contact De	etails	
Student's name		
Emergency contact person N	lame	Phone
R	elationship to student	Mobile

## **Reason for Application**

#### 3.2.1 Study interrupted by transfer

Name of previous school	
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Continuing language with NSL ...... School year .....

If the student is transferring from a NSW public school to another educational provider (which is not a NSW public school), there may be a fee adjustment. Please contact the Business Manager at NSW School of Languages for further details, phone (02) 9381 4800.

## Supervisor Declaration (Conditions for single course provision)

The supervisor must provide appropriate supervision for the student in their learning environment. They must ensure that the student is supported while learning through distance education.

The supervisor must arrange for supervision of the student's assessments and examinations. All formal communication will be addressed to the supervisor.

The supervisor guarantees the following:

- the student will be supervised during schoolwork activities
- work will be completed in all courses on a weekly basis, or as advised by NSL
- the supervisor will be contactable by phone, email or voicemail
- assessments, examinations and assignments will be conducted under strict supervision, ensuring that they are the unaided work of the student
- assessment tasks and examinations and will be worked on the date(s) and at the time(s) specified, in a quiet room, and will be submitted by the due date
- textbooks and teaching materials that have been issued by NSL will be returned, if requested, when the student completes the course or leaves the school.

The supervisor agrees to:

- monitor the completion of set tasks and interact with the student as required in learning activities
- interpret and explain instructions or comments in lesson materials
- provide assistance with locating necessary materials and resources
- develop a timetable that provides for the required number of hours of study each week
- provide suitable work/study area for student, with a computer with internet access, headsets and camera in a quiet place. A phone maybe used for speaking lessons if internet access is unavailable
- ensure that the student satisfactorily participates in oral and practical work as prescribed by the course
- provide advice about illness or absences which have affected the student's ability to complete set activities.
- forward Warning Letters issued by NSL to the student's parent/carer.

**Important**: Not complying with the above conditions may lead to the student not meeting course requirements or a review of the single course provision.

- I have read the information for supervisors and I understand the conditions for single course provision.
- I have discussed the distance education requirements with the student.

#### (Please print clearly)

Supervisor's name	
Faculty	Phone number
Supervisor's email	
Supervisor's signature	Date / /

#### Please advise NSL in writing of any change of supervisor.

#### Principal Declaration (Conditions for single course provision)

For an enrolment to be accepted, the Principal guarantees:

- the student is capable of working independently, but under the supervision of a nominated member of the teaching staff who supervises the study arrangements of the student including assignments, formal examinations and assessment tasks
- time is allocated to the student within the school timetable to study the distance education course
- the student will be provided with the required support resources, e.g. a quiet work room, computer with internet access, headsets and camera during school hours
- the home school agrees to purchase any textbooks required, and to print course materials as necessary.
- all resources such as DVDs and other stimulus material lent to the student will be returned when requested or when the student finishes the course
- examinations and assessment tasks will be supervised at school by a teacher in a quiet room, and will be held on the dates and at the times specified by NSL, or when requested, students in the metropolitan area will attend NSL for examinations and assessment tasks
- procedures will be in place to ensure that parental/carer's permission is obtained for students to attend
  activities arranged by NSL and that the home school will carry out risk assessments related to these
  activities
- students are informed that they are required to return work each week or to meet alternative minimum standards set by NSL the student meets the NESA eligibility criteria, where applicable, for the course
- the student is entered by the home school for the Year 10 or Preliminary course or the Higher School Certificate, indicating that the course is studied "elsewhere" and using NSL's NESA school code 5000
- to provide written notification to NSL in the event of a change of supervisor
- to notify NSL of any special needs, special circumstances, special provisions or learning adjustments made for this student.

I am aware that this application will not proceed until:								
<ul> <li>all pages are completed</li> <li>supervisor and Principal have signed</li> </ul>	<ul> <li>student has been shared on ERN (NSW public schools only)</li> </ul>							
The student's continued provision is dependent on the abo	ve conditions for the duration of the course.							
<ul> <li>Please complete the following: <ul> <li>(a) Does the student have a history of violence?</li> <li>(b) I have ensured the completion of the statement in NSL of any student with any anaphylactic condition</li> <li>(c) I have provided a Learning Support Program or Happropriate.</li> </ul> </li> <li>I agree to the conditions of single-course provision for disting I have nominated the teacher below as the school supervision</li> </ul>	re student's medical condition form and have advised ion. Health Management Plan for this student if tance education as listed above.							
Supervisor's name								
Principal's name								
Principal's signature	Date							
Principal's email								