



GERALDTON
SENIOR HIGH SCHOOL

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OFFICE USE ONLY

Date received: _____
Date of Commencement: _____
Year Level: 7 8 9 10 11 12
Birth certificate/Passport/Travel document copied (Circle).
Visa Grant Notice copied: YES NO
Family Court Order/s: YES NO
APPLICATION: ACCEPTED / NOT ACCEPTED

STUDENT ENROLMENT FORM 2023

Enrolment Pack – Part B

(For enrolment in a Western Australian Public School)

This form is to be completed for children whose application has been accepted by the school. It is intended for children not enrolled at the school in the previous year. For students in the compulsory years of schooling who were enrolled in the previous year, please inform the school directly if there are changes needed to update the form. Please read the accompanying *Parent information about Enrolment in a Western Australian public school* before lodging the Enrolment Form with the school.

Student Details (Please Print)

Surname: _____ Legal Surname (if different): _____

Previous Surname (if applicable): _____

1st Name: _____ 2nd Name: _____ 3rd Name: _____

Preferred 1st Name: _____

Student Email Address: _____

Date of Birth: ____/____/____ Sex: Male Female

Residential Address: _____

Postcode: _____

Telephone (Home): _____ Student's Mobile (if applicable): _____

Students Car Registration (if applicable): _____

Full Name/s of brothers and sisters of the student attending this school

Year Level _____

Year Level _____

Nationality: Australian Other: _____ Country of Birth: Australia Other: _____

Is the student a Permanent Resident? YES NO

If the student was not born in Australia, please provide copy of passport and visa and complete this section:

Passport Number: _____ Country of Issue: _____

Visa Grant No: _____

Date of Arrival in Australia: _____ Visa Sub-class No: _____ Visa Sub-class _____ Expiry Date: _____

International Fee Paying (if known): YES NO

Religion: _____

Confidential

Are there any Family Court Orders regarding the day to day or long-term care, welfare and development of the student? YES NO

Is the student subject to access restriction? YES NO

If YES, please specify and attach supporting documentation.

Is this student in the care of the Department for Child Protection and Family Support's (CPFS) Director General?

..... YES NO

If YES, please specify the name of the CPFS Case Manager, their CPFS District and their contact phone number.

Previous School: _____

Reason for change of school (optional): _____

If previously enrolled in Home Education, specify the Education Region: _____

Student's First Language: English Other:

Is the student's descent: Aboriginal YES NO

Torres Strait Islander (TSI) YES NO

Both Aboriginal and TSI YES NO

Does the student mainly speak English at home? YES

(If more than one language, indicate the one that is spoken most often.) NO, other - please specify: _____

(Office staff: Please tick LBOTE if other language use is indicated)

Does the student receive any of the following allowances:

Secondary Assistance

Youth Allowance

Assistance for Isolated Children (AIC)

Abstudy

Student lives with:

Both Parents

Other

Parent/Guardian/Carer 1

Name **Relationship to student**

Parent/Guardian/Carer 2

Independent minor

(Reg3. School Education Regulations 2000)

For information on access restriction, see *Confidential* section of this form.

Parent / Guardian Details

Parent/Guardian 1 Details

Title: _____ Name: _____ Surname: _____

Please indicate relationship to the student: _____

Fees and charges billing: YES NO If no, who is responsible: _____

Postal Address (if different from student residential address):

Telephone (Home): _____ **Email Address:** _____

Occupation/Workplace location: _____

Telephone (Work): _____ Mobile No: _____

Do you mainly speak English at home? YES

(If more than one language, indicate the one that is spoken most often.) NO, other - please specify: _____

What is the highest year of primary or secondary school you have completed?

Year 12 or equivalent

Year 11 or equivalent

Year 10 or equivalent

Year 9 or equivalent or below

What is the level of the highest qualification you have completed?

Bachelor degree or above

Advanced diploma/Diploma

Certificate I to IV (including trade certificate)

No non-school qualification

(If you did not attend school, mark 'Year 9 or equivalent or below')

What is your occupation group? _____ (Insert 1, 2, 3 or 4. Please select the appropriate parental occupation group from the list provided in ATTACHMENT 1. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. However, if you have not been in paid work in the last 12 months, enter '8' above).

Parent/Guardian 2 Details

Title: _____ Name: _____ Surname: _____

Please indicate relationship to the student: _____

Fees and charges billing: YES NO If no, who is responsible: _____

Postal Address (if different from student residential address):

Telephone (Home): _____ Email Address: _____

Occupation/Workplace location: _____

Telephone (Work): _____ Mobile No: _____

Do you mainly speak English at home? YES

(If more than one language, indicate the one that is spoken most often.) NO, other - please specify: _____

What is the highest year of primary or secondary school you have completed?

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

What is the level of the highest qualification you have completed?

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

(If you did not attend school, mark 'Year 9 or equivalent or below')

What is your occupation group? _____ (Insert 1, 2, 3 or 4. Please select the appropriate parental occupation group from the list provided in ATTACHMENT 1. If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. However, if you have not been in paid work in the last 12 months, enter '8' above).

Emergency Contacts (Indicate contacts in order of preference):

Place a number in the box for the order in which the following people should be contacted in an emergency.

Parent/Guardian/Carer 1 Parent/Guardian/Carer 2 Other Contacts

Other Contact(s) Details 1

Title: _____ Name: _____ Surname: _____

Please indicate relationship to the student: _____

Postal Address (if different from student residential address):

Telephone (Home): _____ Email Address: _____

Telephone (Work): _____ Mobile No: _____

Other Contact(s) Details 2

Title: _____ Name: _____ Surname: _____

Please indicate relationship to the student: _____

Postal Address (if different from student residential address):

Telephone (Home): _____ Email Address: _____

Telephone (Work): _____ Mobile No: _____

Please advise the school if there are any other contacts you would like recorded.

Consent Form

At Geraldton Senior High School we aim to offer your child the widest range of learning opportunities and celebrate learning whenever possible. This may often require some form of parental consent. This form asks you to consent (or otherwise) to your child's participation / use / access to several aspects of the school program. At all times we make the very best efforts to exercise exemplary standards in respect of duty of care.

MEDIA CONSENT

Children's images and/or their work are often published to recognise excellence or effort and may appear in newspapers, on the internet, in newsletters (print and online), magazines, yearbooks, school promotional brochures or on film or video. Their names may also be included but no contact details are provided. Work/images captured by the school will be kept for no longer than is necessary for the purposes outlined above and will be stored and disposed of securely.

- Yes, I give consent to my child to have his/her image and/or work published as described above.
- No, I do not give consent.

STUDENT SURVEY CONSENT

Children may be asked to participate in a written or oral survey conducted by external agencies. These requests require approval from the Principal prior to being conducted in the school.

- Yes, I consent to my child participating in written or oral surveys as noted above.
- No, I do not give consent.

REGULAR IN-CLASS EXCURSION INFORMATION

Your child is undertaking Physical Education classes during the year's course of study. The content of the course may involve excursions to the Aquarena and safe beaches for survival swimming sessions. Throughout the course students may also utilise local football and soccer fields as well as other playing fields, netball, basketball and hockey centres.

Depending on the distance to the venue the excursion will involve walking or travel on a school bus or a charter bus.

The excursion may involve aquatic activities as mentioned in the above outline.

INSURANCE

Parents should be aware that they are responsible for insuring their children for personal accidents and loss or damage to personal property while at school or during an excursion. Department of Education and Training Public Liability Insurance covers only those injuries that can be proven to be as a result of teacher negligence.

This form is designed to allow you to give permission for your child to participate in these excursions for the duration of the course rather than separate notification for each excursion.

WATER BASED OR SWIMMING ACTIVITIES

Please indicate your child's swimming ability: I am unsure - please assess my child:

Department of Education swimming stage achieved: _____ Date achieved: _____

Swimming ability:

Stage 1 Beginner	Stage 5 Water Sense	Stage 9 Senior
Stage 2 Water Discovery	Stage 6 Junior	Stage 10 Junior Swim and Survive*
Stage 3 Preliminary	Stage 7 Intermediate	Stage 11 Swim and Survive*
Stage 4 Water Awareness	Stage 8 Water Wise	Stage 12 Senior Swim and Survive*

*Stages 10 to 12 are Royal Life Saving Society of Australia awards. Stage 10 focuses on safety and survival abilities including clothed survival and personal fitness for survival and extends the student's range of swimming skills. Stages 11 and 12 involve further development of survival and swimming skills and endurance. Stage 12 provides a foundation for rescue awards.

PARENT/GUARDIAN/CAREGIVER CONSENT

I have read and understood the regular in class Excursion information relating to Physical Education and give permission for my child (as stated in attached enrolment form) to participate in the excursions for this course of study.

If it is not practical to communicate with me, I authorize the teacher in charge of the excursion to consent to my child receiving such medical attention as may be considered necessary. I am aware that the Department of Education and Training insurance does not cover accidents through misadventure or damage of personal belongings.

I give permission for my son/daughter to participate in the water based or swimming activities.

Signed: _____ Date: _____
Parent/Guardian/Caregiver

Signature: _____ Date: _____
Parent/Guardian/Caregiver

ACCEPTABLE USE AGREEMENT FOR COMPUTERS AND INTERNET

The student's computer network at Geraldton Senior High School is made available for students to enhance their learning. All students have the right to use the computer facilities. However, students have a responsibility to use the computers in an appropriate manner.

This contract establishes rules for computer use and secures a commitment for best use practices for the time that the student is enrolled at Geraldton Senior High School. If you use the online services of the Department of Education you must agree to the following rules:

- I will only use online services for purposes which support my learning and educational research.
- I understand that I am responsible for all activity in my online services account.
- I will check with the teacher before sharing images or giving information about myself or anyone else when using online services.
- I will keep my password private and not share with other students.
- I will not let other people logon and/or use my online account.
- I will tell the teacher if I think someone is using my online account.
- I understand the school and the Department of Education can monitor my use of online services.
- If I find any information that is inappropriate or makes me feel uncomfortable I will tell a teacher about it. Examples of inappropriate content include violent, racist, sexist, or pornographic material, or content that is offensive, intimidating or encourages dangerous or illegal activity.
- I will not use the Department's online services for personal gain or illegal activity (e.g. music file sharing), to bully, offend or intimidate others or access or send inappropriate materials including software that may damage computers, data or networks.
- I will acknowledge the creator or author of any material used in my research for school work by using appropriate referencing.
- I will get permission from the copyright owner of any material used in my school work before I reuse it in a portfolio for employment, in a competition or any other uses other than for my private research and study.
- I will use appropriate language in all internet communications.
- I will not try to access internet sites that have been blocked by the school or the Department of Education.
- I will not damage or disable the computers, computer systems or computer networks of the school, the Department of Education or any other organisation.

I agree to abide by the Acceptable Usage Agreement for school students.

I understand that:

- I will be held responsible for my actions while using online services and for any breaches caused by allowing any other person to use my online services account;
- the misuse of online services may result in disciplinary action, determined by the principal in accordance with the Department's Behaviour Management in Schools policy; and
- I may be held liable for offences committed using online services.

I Student's Signature: _____ Date _____

THIRD PARTY SERVICE PROVIDERS OF ONLINE APPLICATIONS

Our school uses online educational resources and cloud-based storage to improve student learning or school administration.

These providers may require personal information to be disclosed to them relating to both students and parents, such as student name, gender, student ID, age/date of birth, year group. School/teacher. Photos, parent details, address and student email. This information may be stored outside of Australia.

I have viewed the list of third-party service providers on the Parent Information tab of the Geraldton Senior High School web site at www.geraldtonshs.wa.edu.au.

I have read the terms of use and privacy policy of each of the services listed at www.geraldtonshs.wa.edu.au.

I **give consent** for my child to access all of these providers which require sharing some personal information about my child as detailed at www.geraldtonshs.wa.edu.au.

- Stile
- Career Tools
- Education Perfect
- G Suite Core Services (Gmail, Calendar, Classroom, Jamboard, Contacts, Drive, Docs, Forms, Groups, Sheets, Sites, Slides and Vault) and Additional Services (Google Maps, Blogger).
- Padlet
- Tinkercad
- Labster Simulations
- OLN WA
- GeoGuessr
- Canva

I have read the terms of use and privacy policy for each of the websites listed. I understand that my child's personal information, as described above, will be provided to these third-party service providers for the purpose of my child's education and that this information may be stored outside of Australia.

Parent/Guardian Name:	Student Name:
Date:	Student Year Level:
Parent/Guardian Signed:	

Student Details – Medical / Health

Note: For students identified as having health conditions requiring support at school, additional form/s will be provided by the school.

Does the student have a learning difficulty? YES NO

Dyslexia Dysgraphia Dyscalculia Other - please specify: _____

Does the student have a disability? YES NO If no, continue to Part B on the next page.

If YES, please specify: _____

Please indicate where you have documentation about your child's disability in any of the following areas.

Copies of this documentation will be required for school records

- | | |
|--|--|
| <input type="checkbox"/> Autism Spectrum Disorder | <input type="checkbox"/> Severe Mental Disorder |
| <input type="checkbox"/> Deaf or Hard of Hearing | <input type="checkbox"/> Global Developmental Delay (prior to age 6) |
| <input type="checkbox"/> Specific Speech Language Impairment | <input type="checkbox"/> Vision Impairment |
| <input type="checkbox"/> Intellectual Disability | <input type="checkbox"/> Physical Disability |
| <input type="checkbox"/> Severe Medical/Health Condition | |

** Office staff: Use date of SIS entry for latest disability rating

Student Details – Medical / Health – Part B

Does the student have a medical condition or intensive health care need? YES NO

In the following table, please indicate your child's condition(s) which require the support of school staff
(In response to the information below, you will be given further forms for specific health conditions to complete)

If YES, please specify:

Is specific training required to support child at school?

<input type="checkbox"/> Severe Allergy – Anaphylaxis	YES/NO
<input type="checkbox"/> Mild to Moderate Allergy	YES/NO
<input type="checkbox"/> Allergy – Other _____	YES/NO
<input type="checkbox"/> Asthma	YES/NO
<input type="checkbox"/> Diabetes	YES/NO
<input type="checkbox"/> Diagnosed migraine/headaches	YES/NO
<input type="checkbox"/> Seizure Disorder (eg epilepsy)	YES/NO
<input type="checkbox"/> Activities of Daily Living	YES/NO
<input type="checkbox"/> Medic Alert Condition: _____	YES/NO
<input type="checkbox"/> Hearing condition (eg otitis media)	YES/NO
<input type="checkbox"/> Mental health or behavioural (eg depression ADD/ADHD)	YES/NO
<input type="checkbox"/> Intensive Health Care Need (eg tube feeding)	YES/NO
<input type="checkbox"/> Other: _____	

Doctor/Practice Name : _____ Telephone: _____

Dentist/Practice Name: _____ Telephone: _____

Medicare No: _____ Valid to: ____ / _____

Health Care Card (if applicable): YES NO. If Yes, please provide no. _____

Expiry Date: _____

Do you have ambulance cover? YES NO Insurance Provider: _____
(If there is a medical emergency parents or guardians are expected to meet the cost of an ambulance)

Is the student fully immunised? YES NO - Copy of Australian Immunisation Register (AIR)
Immunisation History Statement is required

Medic Alert Information

Does your child have a Medic Alert bracelet or pendant? YES NO

If yes, provide details: _____

List your child's health condition(s): _____

Parent/Carer Signature: _____ Date: _____

Parent/Carer Name: _____

Administration of Medication

Written authorisation must be provided for staff to administer any form of medication at school.

Long term medication – Complete the *Medication* section of the relevant health care plan – see below.

Short term medication – Request an *Administration of Medication* form to complete and return to the principal or class teacher. **Note: All medication required must be supplied by parents/carers**

Informed Consent

Your child's health care information will be shared with staff on a "need to know" basis unless otherwise stated. Do you give permission for the school to share your child's health care information? YES NO

Note: If your child is enrolled in a TAFE, PEAC or an alternative education program, this includes the transfer of their health care information to the principal or manager of that program.

If no, and the information is to be restricted, who can be informed of your child's health care information?

Does your child have one or more health condition(s) that will *require support* from school staff?

NO - sign below and continue to Signature section below. If your child's requirements change, please notify the school.

Signature: _____ Date: _____

YES - complete the remainder of this section. You will be given additional forms to complete at a later date. If you have ticked "Yes" for specific staff training, please discuss the type of training needed with the Principal.

Consent for Photo Identification on your child's Health Care Plan

If your child has a condition where an emergency may occur, please indicate whether you give consent for staff to place your child's medical details and photo on view to provide immediate identification.

I give permission for my child's "medical details and photo" to be on view for staff. YES NO
If yes, please attach photo to the relevant health care plan(s).

Signature

Name of person enrolling student:

Title: _____ Name: _____ Surname: _____

Relationship to the student: _____

Signature: _____ Date: _____

(Independent minors and those aged 18 years or older may sign on their own behalf)

Principal's Approval

Principal/Deputy Signature

Date: _____

Approved / Not approved

DOCUMENTS TO BE PROVIDED

Checklist:

Please place an 'X' in the box to indicate each document attached (or sighted) to this application form.

- 1. **Birth Certificate** (original or certified copy) or extract or other identity documents
Principals will refer to guidance 3.5.1 of the Enrolment Procedures where evidence is not provided.
- 2. **Australian Immunisation Register (AIR)** Immunisation History Statement: or
AIR Immunisation History Form; or Immunisation Certificate issued by the Chief Health Officer.....
- 3. **Copies of Family Court or any other court orders** (if applicable).....
- 4. **Proof of address** (see Requested documentation in the attached Parent information)
- 5. **Medicare Card**.....
- 6. **Information relating to suspensions or exclusions** (if applicable)
- 7. **Information relating to disability**.....
- 8. **Copy of most recent school report**.....

If your child was not born in Australia, you must provide evidence of: (a copy of the Visa Grant Notice is preferred)

- Date of entry into Australia..... Passport or travel documents
- Current visa subclass and previous visa subclass (if applicable).....

If your child is a temporary visa holder, you must also provide:

- Confirmation of enrolment or evidence of any permission to transfer
- provided by Education and Training International (ETI) (if holding an *International full fee student visa, sub class 571*); or
- Evidence of the visa for which the student has applied if the student holds a bridging visa

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Student's official documentation all sighted (Date): _____ YES NO

Birth certificate Passport Travel document/s

Student's Residency status: Local Permanent Resident

Overseas Student: If yes, International fee paying: YES NO

Entry Date: _____

Previous School: _____ Records received: YES NO

Consent Form completed: YES NO

Contributions and Charges Billing: PG1: ____% PG2: ____% Other: ____%

Official documentation: PG1: ____ PG2: ____ Other: _____ (including reports, to be sent to)

Immunisation records provided: YES NO

Form/Class: _____ House Faction: _____

Approved by Principal: NO YES on (Date): _____

Entered on School Information system by: _____ on (Date): _____

Student leaves school: (Date) _____ Date Transfer Note Sent: _____

Destination: _____

Records received from transferring school: NO YES on (Date): _____

RETENTION AND TRANSFER OF STUDENT ENROLMENT RECORDS:

- 1. *Enrolment Applications (successful) – The School to retain for 5 years after last action and then destroy.*
- 2. *Enrolment Applications (unsuccessful) –The School to retain for 2 years after last action and then destroy.*
- 3. *Enrolment Register (Register of Admissions/Enrolment Cards used prior to the School Information System) – The School to retain for 7 years after last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.*
- 4. *Enrolment Records (managed in the School Information System) – The School must print out annually for all school leavers, the School must retain for 7 years after the last action and then archive and transfer to State Records Office only when advised by Corporate Information Services.*
- 5. *Student files – The School must negotiate with the previous school at the local level the transfer within 5 school days.*

Enrolment Pack Part B - ENROLMENT FORM (Information)

This form is intended for children not enrolled at the school in the previous year. For students in the compulsory years of schooling who were enrolled in the previous year please inform the school directly if there are changes needed to update the form.

Parent information about Enrolment in a Western Australian public school (below) provides important information to read before lodging the Enrolment Form with the school.

The form is to be completed in English. If you need help including translation and interpreting services, please ask the school staff about assistance available through the Statewide Services Resource and Information Centre English as an Additional Language or Dialect (EAL/D) Program. Website: <http://det.wa.edu.au/curriculumsupport/eald/detcms/portal/>

Parent information about Enrolment in a Western Australian public school

Information to be provided

The information you provide enables the Department to communicate with you about important matters, to care for your child in emergencies, to plan for special needs and to meet State and National reporting requirements.

Documentary evidence may be required to support any information supplied. Principals may need to consult with the Education Regional Office where evidence has not been supplied. All official records must be in the child's legal name. The use of a preferred name may be possible for informal communication.

Family details should include details of the parent residing at the same address as the student. Details relating to parents not residing with the student may also be included in the **Parent/Guardian Details** section of the form.

The school needs to be advised of any court orders or any changes in relation to the child's name, usual place of residence and/or name and usual place of residence of parent/s.

Transport

In most cases, transporting your child to school is the parents' responsibility. Enquiries regarding school bus services should be directed either to the school where the application for enrolment is being submitted, or to the Public Transport Authority email enquire@pta.wa.gov.au or telephone 136 213. Some special programs include transfer arrangements.

Confidentiality

All information provided on this form will be treated confidentially (s 242 of the *School Education Act 1999*).

Information about your occupation and education

The National Goals for Schooling in the 21st Century state that 'the learning outcomes of educationally disadvantaged students '... should...' improve and, over time, match those of other students'.

All parents across Australia, no matter which school their child attends, are being asked to provide information about their family background to promote an education system which is fair for all Australian students regardless of their background.

Consent forms

The following forms are included for parents to consider and sign if in agreement:

Media Consent:	Publication of images of the student and their work.
Student Survey:	Participation in any written or oral survey conducted by external agencies, approved by the Principal.
Local Excursions:	Agreement to minor excursions, not including excursions which require individual agreement.
Internet Access:	Appropriate use of internet services by students.

Student Health Care

The Department's *Student Health Care* policy clarifies the actions to be undertaken by public schools to manage student health care needs. All students require an up to date Student Health Care Summary which is incorporated into this form. For students identified as having health conditions requiring support at school, additional form/s will be provided by the school.

ATTACHMENT 1

Parent Occupation Groups

Relates to questions in Parent 1 and Parent 2 sections of the Student Enrolment form

GROUP 1	GROUP 2	GROUP 3	GROUP 4
<p>Senior management in large business organisation government administration & defence, and qualified professionals</p>	<p>Other business managers, arts/media/sportspersons and associate professionals</p>	<p>Tradesmen/women, clerks and skilled office, sales and service staff</p>	<p>Machine operators, hospitality staff, assistants, labourers and related workers</p>
<p><i>Senior executive/ manager/ department head in industry, commerce, media or other large organisation.</i></p> <p>Public service manager (section head or above), regional director, health/education/police/ fire services administrator.</p> <p>Other administrator [school Principal, faculty head/dean, library/museum/gallery director, research facility director].</p> <p>Defence Forces Commissioned Officer.</p> <p>Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; identify, treat and advise on problems; and teach others.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing professional.</p> <p>Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer].</p> <p>Air/sea transport [aircraft/ships captain/officer/pilot, flight officer, flying instructor, air traffic controller].</p>	<p>Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business.</p> <p>Specialist manager [finance/engineering/productio n/ personnel/ industrial relations/ sales/marketing].</p> <p>Financial services manager [bank branch manager, finance/ investment/insurance broker, credit/loans officer].</p> <p>Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency].</p> <p>Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author].</p> <p><i>Media presenter, photographer, designer, illustrator, proof reader, sportsman/ woman, coach, trainer, sports official].</i></p> <p>Associate professionals generally have diploma/technical qualifications and support managers and professionals.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional.</p> <p>Business/administration [recruitment/employment/indus trial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager].</p> <p>Defence Forces senior Non-Commissioned Officer.</p>	<p>Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group.</p> <p>Clerks [bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/ inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent/customer services clerk, admissions clerk].</p> <p>Skilled office, sales and service staff</p> <p>Office [secretary, personal assistant, desktop publishing operator, switchboard operator].</p> <p>Sales [company sales representative, auctioneer, insurance agent/ assessor/loss adjuster, market researcher].</p> <p>Service [aged/disabled/refugee/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor].</p>	<p>Drivers, mobile plant, production/ processing machinery and other machinery operators Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper].</p> <p>Office assistants, sales assistants and other assistants</p> <p>Office [typist, word processing/data entry/business machine operator, receptionist, office assistant].</p> <p>Sales [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, shelf stacker].</p> <p>Assistant/aide [trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant].</p> <p>Labourers and related workers</p> <p>Defence Forces ranks below senior NCO not included in other groups.</p> <p>Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand].</p> <p>Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor].</p>

These categories have been determined nationally and are designed as broad occupational groupings. All Australian states and territories use the same categories.

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