



ST JOSEPH'S COLLEGE

PEACE THROUGH JUSTICE

Doyle Drive / PO Box 246, Banora Point 2486
Phone: 07 5524 9002 / Fax: 07 5524 9272
Web: www.sjctweed.org
Email: sjcbanora@lism.catholic.edu.au

ENROLMENT APPLICATION

Please attach photo here

Student's Name:	
Commencement Year (eg 2015):	Entry Year (eg Year 7):

APPLICATION PROCESS - All sections should be completed and returned to the College together with:

- \$55.00 enrolment application fee
- Photocopy of Birth Certificate
- Photocopies of all of the following certificates (if applicable): Baptism, Confirmation and Eucharist
- Photocopies of the two most recent school reports
- Photocopy of the most recent NAPLAN results

FAMILY INFORMATION

Family Surname:	Mail to (eg Mr & Mrs A Smith):
Residential Address:	
Suburb:	Postcode:
Postal Address (if different to residential):	
Suburb:	Postcode:
Phone (home):	
RESIDENTIAL STRUCTURE:	
Married <input type="checkbox"/> Defacto <input type="checkbox"/> Divorced <input type="checkbox"/> Partner <input type="checkbox"/> Separated <input type="checkbox"/> Single Parent <input type="checkbox"/> Widow <input type="checkbox"/> Widower <input type="checkbox"/>	
Health Fund:	Fund Number:
Medicare Number:	Expiry Date:
Language Spoken at Home:	

STUDENT DETAILS

First Name/s:	Surname:
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth:
Current School:	Current School Year Level (eg Year 6):
Previous Schools (include years of attendance):	

I/We give permission for the school to contact the current/previous schools: Yes No

RELIGION AND SACRAMENTAL INFORMATION (If applicable)

Religion:	Parish (eg St Joseph's Parish):
Baptism:/...../.....	Parish: Confirmation:/...../..... Parish:
Reconciliation:/...../.....	Parish: Communion:/...../..... Parish:

NATIONALITY

Government Requirement	Country of Birth: Australia <input type="checkbox"/> Other, please specify:
	Nationality:

RESIDENTIAL STATUS (original documents to be sighted and copies to be retained by school)

Australian citizen (Naturalisation Certificate or Australian passport if country of birth is not Australia)	<input type="checkbox"/>
Permanent resident (Passport if country of birth if not Australia) <input type="checkbox"/> Temporary resident (passport and visa)	<input type="checkbox"/>
Government Requirement	Does the student speak a language other than English at home? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, please specify (if more than one language, indicate the one that is spoken most often)
Government Requirement	Is the student of Aboriginal or Torres Strait Islander origin? Yes <input type="checkbox"/> No <input type="checkbox"/> Aboriginal but not Torres Strait Islander origin <input type="checkbox"/> Torres Strait Islander but not Aboriginal origin <input type="checkbox"/> Both Aboriginal and Torres Strait Islander <input type="checkbox"/>

SPECIAL NEEDS

Does your child have:

Autism	<input type="checkbox"/>	Behaviour disorders	<input type="checkbox"/>	A hearing impairment	<input type="checkbox"/>
An intellectual disability	<input type="checkbox"/>	A language disorder	<input type="checkbox"/>	Mental health issues	<input type="checkbox"/>
A physical disability	<input type="checkbox"/>	A vision impairment	<input type="checkbox"/>	ADD/ADHD	<input type="checkbox"/>
Giftedness	<input type="checkbox"/>	Difficulties in the basic areas of learning	<input type="checkbox"/>		
Acquired brain injury	<input type="checkbox"/>	Other (please specify):			
None of the above	<input type="checkbox"/>				

What accommodations and/or learning adjustments, if any, were provided for your child in his/her previous school?

Alternative teaching and learning strategies	<input type="checkbox"/>	Signing	<input type="checkbox"/>
A reader or scribe	<input type="checkbox"/>	Access to technology	<input type="checkbox"/>
Modifications to equipment, furniture and learning spaces	<input type="checkbox"/>	Personal carer support	<input type="checkbox"/>
Other (please specify):			

HEALTH AND SAFETYTo your knowledge, is there anything in your child's history or circumstances (including medical history) which might pose a risk of any type to him or her, other students, or staff at this school? Yes No

If yes, please provide a brief description:

Please provide names and contact details of health professionals or other relevant agencies that have knowledge of these issues:

.....

Does your child have any history of violent behaviour? Yes No Does your child have any history of behavioural problems (including verbal bullying)? Yes No Has your child ever been suspended or expelled from any previous school? Yes No If yes, was this for: Actual violence to any person? Yes No Possession of a weapon or any item used to cause an injury? Yes No Intimidation, bullying or harassment of students or staff at a school? Yes No Threats of violence? Yes No Illegal drugs? Yes No

Other, (please specify)

I/We will provide written consent to the school on request to contact health Professionals or other relevant agencies. Yes No **MEDICAL INFORMATION**

Doctor's Name: Phone:

Medical Conditions (Please specify any medical conditions the student suffers from eg asthma, diabetes and/or any prescribed medication taken by the student):

Operations (Please specify any significant operations the student has had that the school should be aware of):

Allergies (Please list any known allergies the student has, eg allergy to nuts, penicillin, bee stings including specific details):

Has the student been diagnosed as being at risk of anaphylaxis? Yes No If yes, does the student have an Epipen Yes No Expiry date of Epipen:/...../.....

Immunisation (Please indicate if the student has been immunised against the following):

Hepatitis B	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Diphtheria/Tetanus/Whooping Cough	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Haemophilus Influenza type b	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Polio	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Pneumococcal disease	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Rotavirus	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Measles/Mumps/Rubella	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Meningococcal C disease	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Chickenpox	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Human Papillomavirus (HPV) (12-18 yrs)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Last Tetanus date:

Dentist's Name: Phone:

Dental Conditions (Please specify any significant conditions the school should be aware of):

This application gives the opportunity to provide information that will facilitate the smooth transition of your child into our school. It will assist the school to develop appropriate strategies to meet the particular needs of your child. If the information provided is incomplete or misleading, any decision made as to enrolment may be revised.

FAMILY DETAILS

FATHER/GUARDIAN – RESIDING AT SAME ADDRESS AS STUDENT

Surname:		First Name/s:	
Title (eg Mrs/Ms/Dr):		Relationship to Student:	
Past Student from St Joseph's College:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Phone (mobile):		(work):	
Email:			
Occupation:		Employer:	
Government Requirement	What is the occupation group? (select from list of parental occupation groups in page 9		<input type="checkbox"/>
Country of Birth: Australia <input type="checkbox"/> Other, please specify:			
Nationality:		Religion:	
Government Requirement	What is the highest year of primary or secondary school the father/guardian has completed?		
	Year 9 or equivalent or below	<input type="checkbox"/>	Year 10 or equivalent <input type="checkbox"/>
	Year 11 or equivalent	<input type="checkbox"/>	Year 12 or equivalent <input type="checkbox"/>
Government Requirement	What is the level of the highest qualification the father/guardian has completed? (Mark one box only)		
	No non-school qualification	<input type="checkbox"/>	Advanced diploma/Diploma <input type="checkbox"/>
	Certificate I to IV (including trade certificate)	<input type="checkbox"/>	Bachelor degree or above <input type="checkbox"/>
Government Requirement	Main language spoken at home:		

MOTHER/GUARDIAN – RESIDING AT SAME ADDRESS AS STUDENT

Surname:		First Name/s:	
Title (eg Mrs/Ms/Dr):		Relationship to Student:	
Past Student from St Joseph's College:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Phone (mobile):		(work):	
Email:			
Occupation:		Employer:	
Government Requirement	What is the occupation group? (select from list of parental occupation groups in page 9		<input type="checkbox"/>
Country of Birth: Australia <input type="checkbox"/> Other, please specify:			
Nationality:		Religion:	
Government Requirement	What is the highest year of primary or secondary school the mother/guardian has completed?		
	Year 9 or equivalent or below	<input type="checkbox"/>	Year 10 or equivalent <input type="checkbox"/>
	Year 11 or equivalent	<input type="checkbox"/>	Year 12 or equivalent <input type="checkbox"/>
Government Requirement	What is the level of the highest qualification the mother/guardian has completed? (Mark one box only)		
	No non-school qualification	<input type="checkbox"/>	Advanced diploma/Diploma <input type="checkbox"/>
	Certificate I to IV (including trade certificate)	<input type="checkbox"/>	Bachelor degree or above <input type="checkbox"/>
Government Requirement	Main language spoken at home:		

NON RESIDENTIAL PARENT

Surname:		First Name/s:	
Title (eg Mrs/Ms/Dr):		Relationship to Student:	
Past Student from St Joseph's College:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Address:			
Suburb:		Postcode:	
Phone (mobile):		(work):	
Email:			
Occupation:		Employer:	

NON RESIDENTIAL PARENT cont.

Government Requirement	What is the occupation group? (select from list of parental occupation groups in page 9) <input type="checkbox"/>
Country of Birth: Australia <input type="checkbox"/> Other, please specify:	
Nationality: Religion:	
Government Requirement	What is the highest year of primary or secondary school the mother/guardian has completed? Year 9 or equivalent or below <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/>
Government Requirement	What is the level of the highest qualification the mother/guardian has completed? (Mark one box only) No non-school qualification <input type="checkbox"/> Advanced diploma/Diploma <input type="checkbox"/> Certificate I to IV (including trade certificate) <input type="checkbox"/> Bachelor degree or above <input type="checkbox"/>
Government Requirement	Main language spoken at home:
Would you like this non-residential parent to be listed as an emergency contact: Yes <input type="checkbox"/> No <input type="checkbox"/>	

SCHOOL FEE BILLING

The Parish Schools Office (PSO) will email school fees invoices to the enrolling parent's/guardian's nominated email address at the commencement of the school year. Parents/guardians have a joint and several responsibility for the payment of the school fees. This means that the PSO can request any one of the parents/guardians to meet any outstanding school fees. Split invoices can be arranged however, this will not diminish each parent's/guardian's joint and several responsibility for the full school fees. Please note that elective fees and excursions are billed separately by the College to the family address.

EMERGENCY CONTACTS (to be used in an emergency if parents cannot be contacted, e.g. grandparents / or a friend living in the area)

Contact 1 - Name:	Contact 2 - Name:
Relationship to Student:	Relationship to Student:
Address:	Address:
Phone (home):	Phone (home):
(work):	(work):
(mobile):	(mobile):

OTHER SIBLINGS IN THE FAMILY

Name	School/Pre-school/ Employment etc	Grade (current year)	Date of Birth

COURT ORDERS (if applicable)

Are there any current court orders relating to the student? Yes No
 (If yes, copies of these court orders eg AVOs, Family Court/Federal Magistrate Court Orders or other relevant court orders MUST be provided)

Is there other information you wish the school to be aware of?

.....

.....

SPECIAL CIRCUMSTANCES (if applicable)

Are there any special circumstances about the student seeking to be enrolled that the school should know prior to enrolment?
 (eg pregnancy, living apart from parental supervision, out of home care arranged by the state) Yes No

If yes, please provide a brief description of the circumstances:.....

.....

.....

STANDARD COLLECTION NOTICE

1. The school (the Diocese both independently and through its schools) collects personal information, including sensitive information about pupils and parents or guardians before and during the course of a pupil's enrolment at the school. This may be in writing or in the course of conversations. The primary purpose of collecting this information is to enable the school to provide schooling to the pupil and to enable them to take part in all the activities of the school.
2. Some of the information we collect is to satisfy the school's legal obligations, particularly to enable the school to discharge its duty of care.
3. Laws governing or relating to the operation of a school require certain information to be collected and disclosed. These include relevant Education Acts and Public Health and Child Protection Laws.
4. Health information about pupils is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. We may ask you to provide medical reports about pupils from time to time.
5. If we do not obtain the information referred to above we may not be able to enrol or continue the enrolment of your son/daughter.
6. The school from time to time discloses personal and sensitive information to others for administrative and educational purposes. This includes to other schools, government departments, the Catholic Schools Office, the Catholic Education Commission of New South Wales, your local diocese and the parish, schools within other dioceses/other dioceses, medical practitioners, and people providing services to the school, including specialist visiting teachers, (sports) coaches, volunteers and counsellors.
7. The school from time to time may also collect and disclose personal and sensitive information about current or prospective students to others if it is required to satisfy the school's legal obligations under Part 5A of the *Education Act 1990* (NSW).
8. The school may disclose and/or receive relevant personal information to/from debt collection agents and credit reporting agencies.
9. Personal information collected from pupils is regularly disclosed to their parents or guardians. On occasions personal information disclosed to a school counsellor may be disclosed to others who have a legal obligation to receive it without betraying a confidence. However, there will be some occasions where it is necessary to directly pass on material which relates to the wellbeing of a pupil of the school.
10. Schools may also disclose information under public health and child protection laws or in circumstances where there is a serious threat to an individual's life, health or safety.
11. The school may store personal information in the 'cloud' which may mean that it resides on servers which are situated outside Australia.
12. Parents may seek access to personal information collected about them and their son/daughter by contacting the school principal. Pupils may also seek access to personal information about them. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others, where access may result in a breach of the school's duty of care to the pupil or where pupils have provided information in confidence.
13. The Dioceses' Privacy Policy also sets out how you may complain about a breach of privacy and how the school will deal with such a complaint.
14. The school from time to time engages in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist in the school's fundraising activities solely for that purpose. We will not disclose your personal information to third parties for their own marketing purposes without your consent.
15. On occasions information such as academic and sporting achievements, pupil activities and similar news is published in school newsletters and magazines and on our website. Photographs of pupil activities such as sporting events, school camps and school excursions may be taken for publication in school newsletters and magazines and on our intranet. The school will obtain separate permissions from the pupils' parents or guardians prior to publication if we would like to include photographs or other identifying material in promotional material for the school or otherwise make it available to the public such as the internet.
16. If you provide the school with the personal information of others, such as doctors or emergency contacts, we encourage you to inform them that you are disclosing that information to the school and why, that they can access that information if they wish and that the school does not usually disclose the information to third parties.

PHOTOGRAPH / VIDEO PERMISSION FORM

Dear Parent/Guardian

At certain times throughout the year, our students may have the opportunity to be photographed or filmed for our school publications, such as the school's newsletter or website and social media, to promote the school in newspapers and other media. The Catholic Education Commission of New South Wales (CECNSW) and the Catholic School Office Lismore (CSO) may also wish to use student photographs/videos in print and online promotional, marketing, media and educational materials.

We would like your permission to use your child's photograph/video for the above purposes and request that you please complete the permission form below.

Thank you for your continued support.

Student's Name: _____ **Year Level:** _____

- I give permission for my child's photograph/video and name to be published in/on:
 - The school website
 - Social media
 - Promotional materials
 - Newspapers and other media
- I authorise the CECNSW/CSO Lismore to use the photograph/video in material available free of charge to schools and education departments around Australia for the CECNSW/CSO's promotional, marketing, media and educational purposes.
- I give permission for a photograph/video of my child to be used by the CECNSW/CSO in the agreed publications without acknowledgement, remuneration or compensation.
- I understand and agree that if I do not wish to consent to my child's photograph/video appearing in any or all of the publications above, or if I wish to withdraw this authorisation and consent, it is my responsibility to notify the school.

Licensed under NEALS: The photograph/video may appear in material which will be available to schools and education departments around Australia under the National Educational Access Licence for Schools (NEALS), which is a licence between education departments of the various states and territories, allowing schools to use licensed material wholly and freely for educational purposes.

Name of Parent / Guardian: _____
(please circle)

Signed – Parent / Guardian: _____

Date: _____

If a student is aged 15+, student must also sign:

Signed – Student (15+): _____ **Date:** _____

Any personal information will be stored, used and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth) and the Privacy Amendment (Enhancing Privacy Protection) Act 2012.

PERMISSION FOR STUDENTS UNDER 14 TO ACCESS THE SCHOOL COUNSELLOR

Children between the ages of 14 and 18 may access counselling services on their own initiative subject to an assessment by the counsellor of each child's capacity to consent.

For students under 14 years of age parents will generally be notified if a child is accessing counselling services. However, should the need unexpectedly arise:

I/we _____ give / do not consent for my child under 14 years of age to access the school counsellor
(please circle)

Signature _____ Name _____ Date _____
Parent/Guardian 1 Please Print

Signature _____ Name _____ Date _____
Parent/Guardian 2 Please Print

Parents have the right to withdraw their consent at a later date if they so decide for any children under 14 years of age.

PERMISSION FORM FOR ANNUAL MANDATORY EXCURSIONS

SPORT CARNIVALS

The annual Swimming Carnival and Athletics Carnival are compulsory College events and by enrolling my child I give permission for my child to be involved in both of these events. I am aware that it may involve travel away from the College, by bus, private vehicle and / or walking, and include water activities.

Signature _____ Name _____ Date _____
Parent/Guardian 1 Please Print

Signature _____ Name _____ Date _____
Parent/Guardian 2 Please Print

SPORT AND PE PROGRAM

I give permission for my son/daughter to be involved in St Joseph's College's Sport Program. I am aware that it may involve travel away from the College, by bus, private vehicle and / or walking, and include water activities. Further details can be obtained from the College if required.

Signature _____ Name _____ Date _____
Parent/Guardian 1 Please Print

Signature _____ Name _____ Date _____
Parent/Guardian 2 Please Print

PASTORAL PROGRAM

From time to time activities as part of the pastoral program, for example Reflection Days and Masses, may involve travel away from the school grounds. I give permission for my child to travel away from the College by bus, private vehicle and / or walking.

Signature _____ Name _____ Date _____
Parent/Guardian 1 Please Print

Signature _____ Name _____ Date _____
Parent/Guardian 2 Please Print

EXCURSIONS AND PAYMENTS

From time to time as part of the curriculum at St Joseph's College it is beneficial for students to go on excursions. Excursion notes which include permission notes and medical information will be given to students. The permission note along with payment for excursions needs to be returned two weeks prior to an excursion taking place. I am aware that my child may travel away from the College by bus or private vehicle to attend excursions and agree to pay the required amount by the due date.

Signature _____ Name _____ Date _____
Parent/Guardian 1 Please Print

Signature _____ Name _____ Date _____
Parent/Guardian 2 Please Print

LOCAL EXCURSIONS

From time to time it is beneficial to use local facilities and amenities to enhance our curriculum. In these cases the students walk to these areas. I give permission for my child to walk to various locations in the local vicinity for curriculum activities.

Signature _____ Name _____ Date _____
Parent/Guardian 1 Please Print

Signature _____ Name _____ Date _____
Parent/Guardian 2 Please Print

AGREEMENT

In dealing with this application, it may be necessary for the school, or any part of the Catholic Schools Office, to look at documents held by previous schools, health care professionals or other government agencies. This information will be collected, used and stored consistent with the *Privacy Act 1988, Health Records and Information Privacy Act 2002 & Privacy Amendment (Enhancing Privacy Protection) Act 2012*. The consent of the owner of the information, while not always necessary, is appreciated and will speed up the assessment of the application.

Consent to Access Documents

1. I/We consent to St Joseph's College and the Catholic Schools Office gaining access to relevant information about the student to be enrolled held by previous schools, health care professionals or other government agencies.
2. I/We have included copies of the following documents with this application for enrolment (please tick):
 - Birth Certificate *
 - Baptism Certificate and any other Sacramental Certificates to date (if applicable)
 - Passport, visa, citizenship documentation (if applicable) *
 - Most recent previous school reports and NAPLAN results
 - Current Family Court Orders (if applicable) *
 - Relevant medical and/or additional needs information (if applicable)
 - Reports of assessment received for speech, hearing, cognitive (IQ), occupational therapy (if applicable).
3. I/We understand the school may approach these bodies directly. The information they request may include information related to any of the questions I have answered above.

Declaration

4. I/We understand and support the Catholic ethos of the school and agree to abide by the rules and regulations of the school including those pertaining to program of studies, sport, pastoral care, school uniform, discipline and the general operation of the school.
5. I/we undertake not to engage in social media or allow our children to engage in social media that disparages or brings the school, employees or Trustees of the Catholic Church into disrepute. Furthermore, I / we acknowledge the right of the school to suspend or terminate my/our child(ren)'s enrolment from the school in the event that social media statements are made that defames or disparages the school, employees or the Roman Catholic Church.
6. If this enrolment application is successful I/we agree to honour the financial commitments required by the school as per the Schedule of Fees and Charges.
7. I/We understand that if this application is successful the information that I/we have provided must be kept up to date throughout the period of enrolment eg. Change of address, court orders.
8. If this enrolment is accepted I/we agree to support our child's participation in the religious life of the school (eg school liturgies, retreat programs).
9. I/We agree, if my child should require urgent medical treatment, the school staff are authorised to seek medical attention. This may include transportation to the nearest hospital, medical centre or doctor by ambulance or private vehicle and I/we agree to meet all costs.

I/We have read all of the information in the enrolment package and understand the policies that we will need to abide by should this enrolment application be successful.

I/We have read the Standard Collection Notice about the collection and management of the personal information contained in this form.

I/We declare that the information provided in this Enrolment Application is, to the best of my knowledge and belief, accurate and complete. I recognise that, should statements in this application later prove to be false or misleading, any decision made as a result of this application may be reversed.

Mother/Guardian signature _____ Date: _____

Father/Guardian signature _____ Date: _____

Please note: Acceptance of this application for enrolment is subject to the approval of the College Principal.
Acceptance to this school does not constitute acceptance into any other Catholic school.

Office use only

Application received:	Receipt number:	
Interview date/time:	Interviewer:	
Originals sighted:	Commencement date:	
Enrolment terminated:	Letter received:	New school:

Parental Occupation is defined as the **main** work undertaken by the parent/guardian. If a parent/guardian has more than one job, report their main job.
If the person is not currently in **paid** work but has had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation.
If the person has not been in **paid** work in the last 12 months, enter '8' in the appropriate box.

GROUP 1**Senior management in large business organisation, government administration and defence, and qualified professionals**

Senior executive/manager/department head in industry, commerce, media or other large organisation.
Public Service Manager (Section head or above), regional director, health/education/police/fire services administrator.
Other Administrator school principal, faculty head/dean, library/museum/gallery director, research facility director.
Defence Forces Commissioned Officer.
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.
Health, Education, Law, Social Welfare, Engineering, Science, Computing professional.
Business management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer.
Air/Sea transport aircraft/ship's captain/officer/pilot, flight officer, flying instructor, air traffic controller.

GROUP 2**Other business managers, arts/media/sportspersons and associate professionals**

Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business.
Specialist manager finance/engineering/production/personnel/industrial relations/sales/marketing.
Financial services manager bank branch manager, finance/investment/insurance broker, credit/loans officer.
Retail Sales/services manager shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency.
Arts/media/sports musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportsman/woman, coach, trainer, sports official.
Associate professionals generally have diploma/technical qualifications and support managers and professionals.
Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional.
Business/administration recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager.
Defence Forces senior Non-Commissioned Officer.

GROUP 3**Tradesmen/women, clerks and skilled office, sales and service staff**

Tradesmen/women generally have completed a 4-year Trade Certificate, usually by apprenticeship.
All tradesmen/women are included in this group.
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.
Skilled office, sales and service staff:
Office secretary, personal assistant, desktop publishing operator, switchboard operator.
Sales company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher.
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.

GROUP 4**Machine operators, hospitality staff, assistants, labourers and related workers****Drivers, mobile plant, production/processing machinery and other machinery operators.**

Hospitality staff hotel service supervisor, receptionist, waiter, bar attendant, kitchen hand, porter, housekeeper.

Office Assistants, sales assistants and other assistants:

Office typist, word processing/data entry/business machine operator, receptionist, office assistant
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.
Assistant/aide trades' assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant.

Labourers and related workers.

Defence Forces ranks below senior NCO not included above.

Agriculture, horticulture, forestry, fishing, mining worker farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand.

Other worker labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor.