PRESCHOOL ENROLMENT

Please remember to provide the following information with your enrolment:

- Proof of residency (ie. Copy of Drivers licence OR household account)
- Birth certificate  (Copy)
- Immunisation record  (Copy)

Kingsford Smith School
100 Starke Street
Holt ACT 2915
Phone: (02) 6207 4455
Facsimile: (02) 6207 4456
Web: www.kss.act.edu.au
REQUEST FOR PRESCHOOL PLACEMENT

This form needs to be submitted to your first preference school with your child’s Application to Enrol in an ACT Public School form

STUDENT DETAILS

Student’s family name

Student’s given name(s)

CARER INFORMATION

If your child is in care please complete the following:

Name of carer/centre:

Address:

Centre based: Number of hours per week

Family Day Care: Number of hours per week

Other: Number of hours per week

Please give details:

SCHOOL ENROLMENT APPLICATION

1. First school preference:
   (Name of school nominated on School Enrolment Form)

2. Second school preference

3. Preschool sessions
   □ Koori Preschool □ 3 Year old Preschool
   By Invitation Only

4. Alternative Programs:
   Does your child access an alternative Early Childhood program, e.g. an Early Intervention Program, Koori Preschool Program, etc.? If so, please provide details.
   □ 4yr Old Preschool Mon/Tue/Alt Wed □ 4yr Old Preschool Alt Wed/Thur/Fri

I understand that I may seek enrolment for my child into ONE preschool only.

Ensuring your privacy is protected

Chapter 2 of the Education Act 2004 (ACT) provides for compulsory education. The ACT Department of Education and Training (the Department) collects information on this form to enable it to effectively manage enrolment in ACT public schools.

The Department and ACT public schools are subject to the Privacy Act 1988 (Cth), the Health Records (Privacy and Access) Act 1997 (ACT) and the Territory Records Act 2002 (ACT).

The Department provides this information (on request) to other government agencies authorises to receive it including:

- The Commonwealth Department of Families Housing, Community Services and Indigenous Affairs
- Centrelink
- Australian Bureau of Statistics
- The Office of the ACT Minister for Education and Training

The information will also be used or disclosed for the following purposes:

- General student administration relating to the education and welfare of the student
- Communication with students, parents or carers
- To ensure the health, safety and welfare of students, staff and visitors to the school
- ACT and national reporting purposes
- For any other purpose required by law.

Signature of parents/carers

Date

Date
Application to enrol in an ACT public school

Thank you for your interest in enrolling your child in an ACT public school. This application form is to be completed in English. If you need an explanation of any of the questions or help in completing this application, please ask for assistance from the school staff.

The enrolment process has three stages:
1. Completion of an application for enrolment (this form).
2. The nominated school will notify you whether your application has been provisionally accepted or has been referred to another school, and the next steps in enrolling your child in a public school.
3. A visit to the school where your child has been offered a place. The information you have provided will be used by the school to confirm the enrolment of your child and complete the enrolment process. Please do not purchase items such as uniforms until you receive confirmation of enrolment.

Ensuring your privacy is protected

Chapter 2 of the Education Act 2004 (ACT) provides for compulsory education. The ACT Education and Training Directorate (the Directorate) collects information on this form to enable it to effectively manage enrolment in ACT public schools. This information is stored securely.

The Directorate is subject to the Privacy Act 1988 (Cth), the Health Records (Privacy and Access) Act 1997 (ACT) and the Territory Records Act 2002 (ACT).

The Directorate provides this enrolment information (on request) to other government agencies authorised to receive it including:
- Commonwealth Department of Families Housing, Community Services and Indigenous Affairs
- Centrelink
- Australian Bureau of Statistics
- Australian Curriculum, Assessment and Reporting Authority.

The information will also be used or disclosed for the following purposes:
- Student administration relating to the education and welfare of the student
- Communication with students, parents or carers
- To ensure the health, safety and welfare of students, staff and visitors to the school
- Provision and management of IT services
- ACT and national reporting purposes.
- For any other purpose required by law or authorised under privacy legislation.

Other information is collected during schooling to support and record your child's progress and achievements.

Note: You may access or correct any personal information by contacting the school. If you have any concerns about the collection, use or disclosure of personal information, you should contact the school.


Questions about your occupation and education help us to meet the National Goals for Schooling for the 21st Century.

To help us to achieve the goal that the learning outcomes of educationally disadvantaged students should improve and, over time, match those of other students, we require information about family background. The main purpose of collecting this information is to promote an education system which is fair for all Australian students regardless of their background.

The four groups listed in this form are used by the Australian Bureau of Statistics to classify occupations.

Internet Access and Email

Students are provided with an Internet and email account to enable them to access learning opportunities in a secure environment. Students must abide by the Acceptable Use of Information Technology policy when using Directorate Internet and email services.

Photographs at school

Occasionally, photographs are taken of individual students and classes of students at school. If you do not wish your child to be photographed under any circumstances, please specify this by checking the box in this form.

Student Data Transfer

The Directorate seeks your approval to collect information from your child's previous school(s). This approval will enable the new school to access information about your child's prior school experience and assist in their positive adjustment to the new school. Please complete the check box at the end of this form to indicate that you consent to the new school seeking information about your child's prior schooling.

When you come to complete enrolment, please bring these documents with you:

- Proof of student's residential address (eg original copies of lease, electricity accounts, statutory declaration etc)
- Birth certificate or identity documents
- Copies of any family law or other relevant court orders (if applicable)
- Immunisation history statement (only required for students enrolling in primary schools for the first time).

In addition, if your child is a permanent resident but not an Australian citizen, you will need to provide:

- Passport or travel documents
- Current visa and previous visas (if applicable).

In addition, if your child is a temporary visa holder you will also need to contact the International Education Unit and submit all required documentation. You may be required to pay international student tuition fees for your child. Further information is available from the School Education section of the Directorate website, www.det.act.gov.au.

ACT Education and Training Directorate
GPO Box 158
CANBERRA ACT 2601
www.det.gov.au
Phone: +61 2 6207 5111 or
Canberra Connect: 13 22 81

Giving false or misleading information is a serious offence under the Criminal Code 2002 (ACT)
<table>
<thead>
<tr>
<th>Language</th>
<th>Translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>If you need interpreting help, telephone:</td>
</tr>
<tr>
<td>Arabic</td>
<td>إذا احتاجت للمساعدة بالترجمة اللغة، اتصل بالهاتف:</td>
</tr>
<tr>
<td>Chinese</td>
<td>如果您需要口译员帮助，请拨电话:</td>
</tr>
<tr>
<td>Croatian</td>
<td>Ako trebate pomoć tumača telefonirajte:</td>
</tr>
<tr>
<td>Dari</td>
<td>که درک کنید ترجمه نشاندگان ضروری دارید. این شماره تلفن کنید:</td>
</tr>
<tr>
<td>Greek</td>
<td>Αν χρειάζεστε διερμηνεία τηλεφωνήστε στο:</td>
</tr>
<tr>
<td>Italian</td>
<td>Se avete bisogno di un interprete, telefonate al numero:</td>
</tr>
<tr>
<td>Lao</td>
<td>របៀប មានភាសាប្រឈមក្នុងការសិក្សារបាន ដោយ ទូរស័ព្ទ៖</td>
</tr>
<tr>
<td>Maltese</td>
<td>Jekk ghandek bżonn l-ghajnuna t'interpretu, ċempel:</td>
</tr>
<tr>
<td>Persian</td>
<td>اگر به ترجمه نیاز دارید، این شماره تلفن کنید:</td>
</tr>
<tr>
<td>Russian</td>
<td>Если вам нужна помощь переводчика, звоните по телефону:</td>
</tr>
<tr>
<td>Spanish</td>
<td>Si necesita la asistencia de un intérprete, llame al:</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>Nếu bạn cần một người thợ ngôn ngữ gọi điện thoại:</td>
</tr>
</tbody>
</table>

**TRANSLATING AND INTERPRETING SERVICE**

**131 450**

Canberra and District – 24 hours a day, seven days a week
Application to enrol in an ACT Public School

Please return the completed Application to Enrol form to this school. If enrolling for preschool please ensure you also include a completed Additional Information for the Preschool Year form.

Application for Enrolment at

Year of Commencement

Year level at Commencement

Student Information

Family or Surname

Given Names

Known as (preferred name)

Date of Birth / / Sex Male Female

Student mobile phone

Student email address

Home Contact Information

Street

Suburb/Town

State

Postcode

Home phone

Is this a silent number? Yes No

Home fax

Medicare No. This is required in case of a medical emergency involving your child.

Home email address

This address is where the student lives

Full Time OR Part Time

The family is to receive (please tick) School News Student Reports

Mailing Address - if it is the same as home address, write "as above"

Street

Suburb/Town

State

Postcode
# Family Details

**Parental Responsibility - Please mark the relevant box below with a tick. Note: It may be necessary to tick more than one box**

1. Student lives with both parents together
2. Student lives with each parent at different times
3. Student lives with mother
4. Student lives with father
5. Both parents share parental responsibility for day to day care
6. Mother has sole responsibility for day to day care
7. Father has sole responsibility for day to day care
8. Both parents share parental responsibility for education
9. Mother has sole parental responsibility for education
10. Father has sole parental responsibility for education
11. Self-student is responsible for him/herself
12. Other, such as same sex family: - give details:

---

**Names of adults with whom this student lives the majority of the time**

*(the address supplied for home contact information on page 3)*

<table>
<thead>
<tr>
<th>Family Title (eg Mr and Mrs Smith)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Family or Surname</td>
<td>Adult 1</td>
</tr>
<tr>
<td>Given Name</td>
<td></td>
</tr>
<tr>
<td>Relationship to student</td>
<td></td>
</tr>
<tr>
<td>Daytime phone</td>
<td></td>
</tr>
<tr>
<td>Mobile/other phone</td>
<td></td>
</tr>
<tr>
<td>Work email address</td>
<td></td>
</tr>
</tbody>
</table>

**Contact priority**

Contact priority is an indication of who should be contacted in the event of an emergency. Number them 1,2,3,4,5,6  9=Not to be contacted
Other persons with Parental Responsibility for this student (if any)

Fill in this section only if there are other adults with parental responsibility, for example, carer, foster parent, guardian.

<table>
<thead>
<tr>
<th>This address is where the student lives</th>
<th>Full Time □ OR Part Time □</th>
<th>The family is to receive (please tick): School News □ Student Reports □</th>
</tr>
</thead>
</table>

Family Title (eg Mr and Mrs J Smith)

<table>
<thead>
<tr>
<th>Adult 3</th>
<th>Adult 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family or Surname</td>
<td></td>
</tr>
<tr>
<td>Given Name</td>
<td></td>
</tr>
<tr>
<td>Relationship to student</td>
<td></td>
</tr>
<tr>
<td>Daytime phone</td>
<td></td>
</tr>
<tr>
<td>Mobile/other phone</td>
<td></td>
</tr>
<tr>
<td>Work email address</td>
<td></td>
</tr>
</tbody>
</table>

Contact priority*
Contact priority is an indication of who should be contacted in the event of an emergency. Number them 1,2,3,4,5,6 9=Not to be contacted

<table>
<thead>
<tr>
<th>Home Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
</tr>
<tr>
<td>Suburb/Town</td>
</tr>
<tr>
<td>Home phone</td>
</tr>
<tr>
<td>Home fax</td>
</tr>
<tr>
<td>Home email address</td>
</tr>
</tbody>
</table>

Mailing Address - If it is the same as home address, write "as above"

| Street | |
|--------||
| Suburb/Town | State | Postcode |
### Other Contact/s (such as emergency contacts, not already included on previous pages of this form)

<table>
<thead>
<tr>
<th>Family or Surname</th>
<th>Other Contact 1</th>
<th>Other Contact 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Given Name</th>
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</table>

<table>
<thead>
<tr>
<th>Relationship to student</th>
<th></th>
<th></th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Daytime phone no.</th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<table>
<thead>
<tr>
<th>Address</th>
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</table>

<table>
<thead>
<tr>
<th>Contact priority*</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact priority is an indication of who should be contacted in the event of an emergency. Number them 1, 2, 3, 4, 5, 6, 7 = first to be contacted</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Student Access and Carer Responsibility

Is there any limitation(s) on contact between the student and a parent or another person? If yes, attach a copy of current Court Order or registered parenting plan that contains the limitation(s).
- [ ] Yes
- [ ] No

Does the student have carer responsibilities?
- [ ] Yes
- [ ] No

### Details of Siblings

This information will not appear in the school database unless the sibling attends the same school. (If more than two siblings please attach applicable information to the back of this form.)

<table>
<thead>
<tr>
<th>Sibling 1</th>
<th>Sibling 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family or Surname</td>
<td></td>
</tr>
<tr>
<td>Given Name</td>
<td></td>
</tr>
<tr>
<td>Date of Birth</td>
<td>/ /</td>
</tr>
<tr>
<td>Sex</td>
<td>Male [ ] Female [ ]</td>
</tr>
<tr>
<td>Does this sibling attend this school?</td>
<td>Yes [ ] No [ ]</td>
</tr>
</tbody>
</table>

### Previous Schools - including ACT Preschool(s)

<table>
<thead>
<tr>
<th>School 1.</th>
<th>City/Town and State</th>
<th>Date/s Enrolled</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School 3.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Photographic Permission

Photographs are sometimes taken of individual students or classes for promotional or educational uses. Please check the box below if you **DO NOT** want your child photographed.

- [ ] I DO NOT want photographs taken of my child
Student Demographic Details

Is the student of Aboriginal or Torres Strait Islander origin?  
(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes.)

No ☐  Yes, Aboriginal ☐  Yes, Torres Strait Islander ☐

In which country was the student born?

Australia ☐  Other - please specify:

Does the student speak a language other than English at home?  
(If more than one language, indicate the one that is spoken most often.)

No, English only ☐  Yes, please specify:

Other ☐

Residential Status (tick one only)  
Student Visa ☐  Permanent ☐  If student visa, enter Visa type code:  
Diplomat ☐  Other Temporary ☐

Date arrived in Australia: / /  Date first enrolled in school in Australia: / /

Religion (optional):

Student Medical Information

It is essential you tell the school before your child starts school if he or she has any allergies or other medical conditions. You should also notify the school as soon as you become aware of any new allergies or medical conditions.

**Allergies**
Please specify any allergies suffered by the student (e.g. peanuts, insect stings):

**Other Medical Conditions**
Please specify any other medical conditions (e.g. asthma, diabetes, epilepsy):

**Medication**
Please specify any prescribed medication to be taken by the student (please provide list if insufficient space):

If you have completed any information in the medical details above, an Emergency Treatment Plan must be provided. Proforma plans are available from the school. **Note:** Without an Emergency Treatment Plan the school can only provide first aid treatment.

**Note:** In accordance with the Medication Policy, parents must give written permission and directions for the administration of any medication taken during school hours or after school activities.

I consent to my child receiving paracetamol for temporary pain relief?  Yes ☐  No ☐

Is there any other information which you believe may help us in providing the best possible care?

Doctor's Name:  
Doctor's Phone: 

Dentist's Name:  
Dentist's Phone: 

Student has been fully immunised:  Yes ☐  No ☐  Exempt ☐
Parent/Guardian Information
The following information is required for national reporting purposes

Adult 1

In which country was Adult 1 born?
- Australia □
- Other - please specify □

Does Adult 1 speak a Language other than English at home? (If more than one, indicate the one that is spoken most often.)
- No, English only □
- Yes, Other - please specify □

What is the highest year of primary or secondary school that Adult 1 has completed? (For persons who have never attended school, mark "Year 9 or equivalent or below")
- 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 that Adult 1 has completed?
- Bachelor degree or above... □
- Advanced diploma/Diploma... □
- Certificate I to IV (including trade certificate)... □
- No non school qualification... □

What is the occupation group of Adult 1?
Please refer to the listing of parent occupations groups on the final page of this form.
- 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' above.

Occupation - (please specify)

Adult 2

In which country was Adult 2 born?
- Australia □
- Other - please specify □

Does Adult 2 speak a Language other than English at home? (If more than one, indicate the one that is spoken most often.)
- No, English only □
- Yes, Other - please specify □

What is the highest year of primary or secondary school that Adult 2 has completed? (For persons who have never attended school, mark "Year 9 or equivalent or below")
- 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 that Adult 2 has completed?
- Bachelor degree or above... □
- Advanced diploma/Diploma... □
- Certificate I to IV (including trade certificate)... □
- No non school qualification... □

What is the occupation group of Adult 2?
Please refer to the listing of parent occupations groups on the final page of this form.
- 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' above.

Occupation - (please specify)
Parent/Guardian Information for other persons with Parental Responsibility
The following information is required for national reporting purposes

Adult 3

In which country was Adult 3 born?
- Australia □
- Other - please specify

Does Adult 3 speak a Language other than English at home? (If more than one, indicate the one that is spoken most often.)
- No, English only □
- Yes, Other - please specify

What is the highest year of primary or secondary school that Adult 3 has completed? (For persons who have never attended school, mark "Year 9 or equivalent or below."
- 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 that Adult 3 has completed?
- Bachelor degree or above... □
- Advanced diploma/Diploma □
- Certificate I to IV (including trade certificate)... □
- No non school qualification □

What is the occupation group of Adult 3?

Occupation - (please specify)

Adult 4

In which country was Adult 4 born?
- Australia □
- Other - please specify

Does Adult 4 speak a Language other than English at home? (If more than one, indicate the one that is spoken most often.)
- No, English only □
- Yes, Other - please specify

What is the highest year of primary or secondary school that Adult 4 has completed? (For persons who have never attended school, mark "Year 9 or equivalent or below."
- 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 that Adult 4 has completed?
- Bachelor degree or above... □
- Advanced diploma/Diploma □
- Certificate I to IV (including trade certificate)... □
- No non school qualification □

What is the occupation group of Adult 4?

Occupation - (please specify)
General Consent of Person with Parental Responsibility for Student

I hereby consent to the above-mentioned child attending supervised school activities approved by the principal. This consent covers all occasions during the time that the child is enrolled at this school, unless otherwise indicated in writing.

☐ I give consent for information about my child to be obtained from their previous school if indicated on page 6. I understand that I can request to see the information received from my child's previous school.

NOTE: This consent for the child's attendance at school supervised excursions is for those excursions which occur in the immediate vicinity of the school and generally involve movement on foot or bicycle. Specific consent will be sought for all other excursions.

In the case of the above-mentioned child requiring medical treatment or in the case of a medical emergency, I consent to the school providing first aid or treatment as outlined in an emergency treatment plan (as indicated in the medical information section of this form). I further authorise the school, where it is impracticable to communicate with me, to arrange for him/her to receive such medical or surgical treatment as may be deemed necessary.

I agree to accept responsibility for costs incurred on my behalf in securing medical treatment and associated services for the above-mentioned child including the securing of ambulance transportation in the event of an emergency.

I understand that the Directorate does not provide automatic personal injury or liability insurance for student accidents.

(You should therefore consider whether your current medical and/or ambulance cover is appropriate.)

Parent/Guardian Signature

Date

Date

Ensuring your privacy is protected

Chapter 2 of the Education Act 2004 (ACT) provides for compulsory education. The ACT Education and Training Directorate (the Directorate) collects information on this form to enable it to effectively manage enrolment in ACT public schools.

The Directorate and ACT public schools are subject to the Privacy Act 1988 (Cth), the Health Records (Privacy and Access) Act 1997 (ACT) and the Territory Records Act 2002 (ACT).

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- The Commonwealth Department of Families Housing, Community Services and Indigenous Affairs
- Centrelink
- Australian Bureau of Statistics

The information will also be used or disclosed for the following purposes:
- Student administration relating to the education and welfare of the student
- Communication with students, parents or carers
- To ensure the health, safety and welfare of students, staff and visitors to the school
- Provision and management of IT services
- ACT and national reporting purposes
- For any other purpose required by law or authorised under privacy legislation.

Office Use Only

<table>
<thead>
<tr>
<th>Certificate Flag</th>
<th>Sighted residency status</th>
<th>LSC - Learning Support Centre</th>
<th>HLU - Hearing Impaired Unit</th>
<th>SL - Vision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sighted Proof of</td>
<td>Sighted residential address</td>
<td>USU - Learning Support Unit</td>
<td>ST - Typing</td>
<td>ST - Special Education</td>
</tr>
<tr>
<td>Visa (emp.</td>
<td>Sighted Proof of</td>
<td>ASU - Autism Specific</td>
<td>ST - Hearing</td>
<td>Repeating</td>
</tr>
<tr>
<td>residence only)</td>
<td>Communication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student ID</td>
<td>Roll Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enrol Date</td>
<td>Part/Full Time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Key</td>
<td>Year Level</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>House</td>
<td>Campus</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Parental Occupation Groups: This information is required to complete your answers on pages 4 and 6

#### Group 1: Senior management in large business organisation, government administration and defence, and qualified professionals
- Senior executive/manager/Directorate 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 faculty 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.

- 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/sports persons and associate professionals
- Owner/manager of a 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.*

- 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/P0 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, asset loss adjuster, market researcher].
- Service [aged/disabled/refuge/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, kitchenhand, 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].*