



STUDENT ENROLMENT APPLICATION PACK 2023/24

For assistance in completing this application, please contact:

PHONE: (07) 4727 6400 • EMAIL: cowboyshouse@cowboys.com.au PO Box 446, Aitkenvale Qld 4814









The key factor that will determine whether your child will be accepted into NRL Cowboys House is their desire and passion for gaining a good education and their ability to contribute to the community, internally and externally to NRL Cowboys House.

We will:

- look for a good school attendance record.
- review latest school reports.
- discuss with current school staff and/or principal:
 - o academic achievement.
 - student strengths and interests.
 - o areas for growth.
 - o conduct and behaviour.
 - o access to One School information, where possible.

We also want to make sure that this is the best decision for you as well as your child. In order to do this, we will have discussions with you and the student - where possible through face-to-face interviews in your home community.

Please note that, in order to finalise the decision about your application, NRL Cowboys House may seek information from community members and organisations.

For assistance completing this application:

NRL Cowboys House: 4727 6400

Email: cowboyshouse@cowboys.com.au

A. STUDENT INFORMATION

1. STUDE	NT'S FULL NAM	1E & CONTACT DETAIL	S	
Surname:				
Given nan	nes:		Preferre	ed name:
Home add	lress:			
2. WHO [OOES THE STUD	ENT LIVE WITH? (Plea	se tick below)	
	☐ Parents	☐ Grandparents	☐ Aunty & Uncle	☐ Guardian/Other
Full name	:			
Home add	dress (if differe	nt from above):		



3. STUDENT'S B	BIRTH &	CULTUR	RAL HER	ITAGE D	DETAILS					
Date of birth:		/	/			Gende	r: 🗆 Ma	ale 🗆 F	emale	
Place of birth: _						State: _				
Your child's cult	ural her	itage (p	lease ti	ck belov	v):					
☐ Aboriginal	☐ Tor	res Strai	it Islanc	ler 🗆	l Aborigi	nal and ⁻	Torres St	rait Islar	nder	
Clan name:										
Language(s) spo	ken at h	iome: _								
4. GOVERNMEN	NT FINAI	NCIAL A	SSISTAN	NCE						
Is the student e	ligible fo	r ABSTU	JDY?					□ No	□ Yes	
Does the student have a Tax File Number? ☐ No ☐ Yes (Please provide number)										
5. DOES YOUR	CHILD H	AVE A C	RIMINA	AL RECO	RD? (Ple	ase tick l	below)			
□ No	☐ No ☐ Yes — If yes, please give details									
If yes, please giv	ve the na	ame of t	heir So	cial Woı	rker:					
Do you give per	mission	for us to	o conta	ct their	Social W	orker?	☐ Yes		□No	
6. CURRENT SC	HOOL									
School Name:										
Location:										
Current year lev	rel:	□ 6	□ 7	□8	□ 9	□ 10	□ 11	□ 12	!	
Has your child e	ver bee	n exclud	led or e	xpelled	from sch	iool?		□ No	☐ Yes	



B. FAMILY INFORMATION

1. PARENT 1 / GUARDIAN 1	
Title (please circle): Mrs / Ms / Miss / Mr / Dr	
Given names:	
Surname:	
Place of birth: Date of birth:	
Do you speak a language other than English at home? ☐ Yes ☐ No	
If yes, please give details:	
What is your relationship to the student? (e.g., mother, father, aunt, uncle, grandpa family friend)	arent, sibling,
Are you the student's legal guardian? ☐ Yes ☐ No	
Does the student live with you permanently? ☐ Yes ☐ No	
CONTACT INFORMATION	
Mailing address:	
Postcode:	
Community address (if different from above):	
Postcode:	
Home number: Mobile:	
Work number:Email:	
EMERGENCY INFORMATION	
Would you like to be the emergency contact for your child? \Box Yes \Box	No
Please list the name, address, and contact number of nominated person(s):	



2. PARENT 2 / GUARDIAN 2				
Title (please circle): Mr / Ms / Miss / Mrs / Dr				
Given names:				
Surname:				
Place of birth:	Date o	f birth:		
Do you speak a language other than English at h If more than one language, please indicate the c		☐ Yes en most often:	□No	
What is your relationship to the student? (e.g., r family friend)	mother, father,	aunt, uncle, grar	ndparent, sibling,	
Are you the student's legal guardian?		☐ Yes	□ No	
Does the student live with you permanently?		□ Yes	□ No	
CONTACT INFORMATION				
Mailing address:				
	Postcode:			
Community address (if different from above): _				
	Postcode:			
Home number:	Mobile:			
Work number:	Email:			
Emergency Contact				
Would you like to be the emergency contact for	your child?	☐ Yes	□ No	
Please list the name, address, and contact numb	per of the nomir	nated person(s):		



3. SPECIAL FAMILY CIRCUMSTANCES			
Are there any special family circumstances? (e.g., single parent custody, dual custody foster care, access restrictions):			
If yes, supporting legal documents are required – are these attached? ☐ Yes ☐ No			
Are there any other conditions enforced by law? Please provide details:			
C. STUDENT HEALTH & WELLBEING			
THIS SECTION IS TO BE COMPLETED BY A MEDICAL PRACTITIONER			
1. HEALTH CARE DETAILS			
MEDICARE Card Number:			
Reference:			
Expiry:			
Student CRN No:			
Community Health Centre: Phone number:			
Private Health Fund:			
Is the student a carrier of any blood borne infection? (e.g., HIV, Hepatitis)			
□ No □ Yes – if yes, please provide details:			
Does the student have a Medic Alert bracelet or pendant?			
□ No □ Yes – if yes, please provide details:			
Is there any cultural or religious consideration relating to student's medical or health care?			
□ No □ Yes – if yes, please provide details:			



2.	EXISTING HEALTH CONDITIONS		
	ase indicate if the student has any of the following ow.)	ng ch	ronic conditions? (Please tick or add details
	Epilepsy or fits Diabetes Rheumatic heart disease or other heart sickness Kidney disease or other kidney problems Asthma or other breathing problems		Allergies Migraines Ear infection or perforation (hole in the eardrum) Hearing problems Eye problems or glasses
	navioural Conditions: ADHD ADD OCD		autism Asperger's
Det	ails of the condition:		
Doe	es the student have any existing health condition	ns? (P	lease list below)
	he student currently taking medication? No □ Yes – Please list the medications below		
Ple	ERGIES/ANAPHYLACTIC REACTIONS ase provide details of any diagnosed allergies an ease attach treatment plan if applicable):	d/or a	anaphylactic reactions to the following
	Medications (e.g., Penicillin)		
	Food (e.g., peanuts)		
	Other (e.g., plants, insect bites/stings, etc.)		



3. IMMUNISATION	INFORMATION				
Immunisation reco	Immunisation record attached:				
Please indicate imn	nunisation status in t	he boxes below usin	g the most approp	oriate code:	
	Fully immunised Incomplete immunisa		Not immunised Personal objection	ns	
Measles	Mumps	Rubella	Tetanus	Pertussis	
Diphtheria	Polio (OPV)	Hepatitis B	Hib	BCG	
Covid 1st	Covid 2nd	Covid Booste	er		
4. MEDICAL PRAC	CTITIONER COMPLETI	NG THIS SECTION			
Name:					
Position/Role:					
Contact Number: Email:					



D. NRL COWBOYS HOUSE POLICIES

1. FEES & CHARGES

Families must contribute to the student's boarding costs. The Parental contribution Fee - \$50 per week, per child to cover extra expenses not covered by ABSTUDY. This will be discussed with you before this application is finalised.

Families need to provide clothing, personal items, and spending money for your student throughout the year.

To provide the best leadership and development program for our students some activities will not be funded by ABSTUDY and may be an optional extra cost.

2. MOBILE PHONE POLICY

NRL Cowboys House Students are permitted to have mobile phones. However, their use will be restricted in the following manner:

- Junior students will be required to hand in phones at bedtime each night. Phones are then returned to the student on the following afternoon after study.
- Senior students will be allowed access to their phones at all times, as long as they are used within the ICT guidelines of use.
- Students must also adhere to their school mobile policy.
- If a student uses their phone irresponsibly, it may be confiscated and returned to the student at the end of the school term.
- Mobile phones are to be free of inappropriate or offensive content.
- Mobile phones will not be used during study times.
- The camera or video function on mobile phones is not to be used without explicit permission of both a staff member and the subject(s) of the picture/video being taken.

3. PRIVACY AND INFORMATION POLICY

- NRL Cowboys House collects personal information, including sensitive information about students, parents, or guardians before and during the student's enrolment at the House.
 - The primary purpose of collecting this information is to enable NRL Cowboys House to provide schooling and to exercise our duty of care to your child while they are a student with NRL Cowboys House.
- Certain laws governing or relating to the operation of the boarding facility require that certain information be collected. These include Public Health & Child Protection Laws.
- Health information about students is sensitive information within the terms of the National Privacy Principles under the Privacy Act. We ask you to provide medical reports about students when requested.



- NRL Cowboys House occasionally must disclose personal and sensitive information to others for administrative, educational, health and wellbeing purposes. This includes to schools in which your student is enrolled, government departments, medical practitioners and people providing services to NRL Cowboys House, including tutors, coaches, volunteers, and counsellors.
- If we do not obtain the information referred to above, we may not be able to enrol or continue to enrol your child at NRL Cowboys House.
- Personal information, including photographs, collected of students will be regularly disclosed to parents or guardians. Information such as academic and sporting achievements, student activities or other news is published in newsletters and on our website.
- Parents may ask for access to personal information collected about them and their child by contacting NRL Cowboys House. Students may also ask for 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, or access may result in breach of NRL Cowboys House duty of care to the students or where students have provided information in confidence.

I/we acknowledge sections A, B and C have the above information	been filled out correctly and that we	e have understood
Signature(s) below confirm agreements, aut	thorisations and consents as recorde	ed in this document.
Name:	_ Signature:	_ Date:
Name:	Signature:	Date:



E. STUDENT AGREEMENT

l,	(student name) want to come to NRL Cowboys
House for educational reasons and to board at NR	L Cowboys House.

- I will attend school every day unless I have permission from the General Manager, Director of Boarding, Head of Campus or Education Manager.
- I will return straight home on the bus from school every day unless there are school activities and/or I have prior permission from General Manager, Director of Boarding, Head of Campus or Education Manager.
- I will study with Tutors and complete further hours of study as required to finish my homework and to hand in my assignments on time.
- I will follow boarding rules and will do tasks around the NRL Cowboys House as directed.
- I will return to NRL Cowboys House and school on time after my holidays. If I cannot return on time, I will call NRL Cowboys House BEFORE I am due to arrive back in Townsville.
- I agree to pay for any damages I cause to NRL Cowboys House property.
- I understand that there will be no relationships of a sexual nature while I am living at NRL Cowboys House.
- I will treat everyone with respect at the NRL Cowboys House

have read and understood these conditions. I accept and will abide by them.		
Student signature:	Date:	



F. PARENTAL CONSENT & AGREEMENTS

1. GENERAL PARENTAL A	AUTHORITY AND CONSENT
I agree for the staff of NF health, and welfare of m ☐ Yes ☐ No	RL Cowboys House to act on my behalf in matters concerning the safety, y child.
2. PARENTAL CONTRIBU	TION
I agree to pay NRL Cowbo cover general expenses o □ Yes □ No	oys House a parental contribution fee of \$50 per week. This payment will of the child.
3. CONSENT TO WEEKEN	ND VISITS
•	Boarding Rules of NRL Cowboys House, my child has my permission to stay ds with nominated people for a maximum of 5 weekends per term.
☐ Yes ☐ No	
Nominated persons for v	veekend visits:
Name 1:	Relationship to student:
Address:	
Phone number:	
Name 2:	Relationship to student:
Address:	
Phone number:	
, -	ng consent for other persons to take my child out of NRL Cowboys House, I person(s) full responsibility for the wellbeing of my child.
☐ Yes ☐ No	
person, NRL Cowboys Ho	hild is planning on staying overnight or on weekends with a nominated buse will be notified by the Thursday before of the full details of who will be pping them back and when.
4. Scholarships	
Please tick if your child h	as or is eligible for the following scholarships:
WCCCA [



5. MEDIA CONSENT

As part of NRL Cowboys House activities there may, on occasion, be a need for House staff or invited media to take photographs and or video footage of your child for publication in newspapers, newsletters, training videos, school/ NRL Cowboys House/North Queensland Toyota Cowboys websites and documentation. Please indicate below if you do/do not wish your child to feature in such publicity.

websites and do such publicity.	ocumentation. Please indicate below if you do/do not wish your child to feature in
I agree that pho	otographs and or video footage of my child may be taken and used for these purposes
☐ Yes	
_	information supplied on the Student Information and Family Information sections of e provided to the relevant parties for the stated purposes.
☐ Yes	□ No
of both the stud	that NRL Cowboys House use CCTV cameras within the facility for the added security dents and staff. I agree that footage of students may be taken and used for security ver, I understand that my child's personal privacy will be protected.
☐ Yes	□ No
6. TRANSPORT	POLICY
•	child travelling with the permission of NRL Cowboys House and Staff in the House transport or by private vehicle in connection with house activities.
☐ Yes	□ No
7. MOBILE PHO	ONE POLICY
_	that my child's access to their mobile phone is subject to House rules and that I may yealling the duty phone in their dormitory which is available 24 hours a day.
☐ Yes	□ No
	n for General Manager, Director of Boarding or Head of Campus at their discretion to Id's mobile phone usage and content.
☐ Yes	□No
8. MEDICAL EN	MERGENCY AUTHORISATION
hospitalise my or requiring surger contacted within	Cowboys House to seek medical / dental attention, call an ambulance or to child when considered necessary. I further authorise that, if an emergency occurs ry, anaesthetic, oxygen, blood transfusion, or medication and I am unable to be n a reasonable time, NRL Cowboys House has the authority to authorise on my nt as recommend by an accredited medical practitioner.
☐ Yes	□No



9. AUTHORITY/CONSENT TO SUPPLY MEDICAL INFORMATION

•		
I authorise medical information (including dental and allied health information) about my child to be released and to be given to NRL Cowboys House and any Medical Practitioners/ Health Authorities so they can look after my child's health and administer standard treatments to ensure optimal health care.		
□ Yes	□No	
10. AUTHORITY	CONSENT FOR VACCINATIONS	
_	ent for my child to receive vaccinations and immunisations (e.g., polio, hepatitis B,) as recommended by a registered medical practitioner.	
☐ Yes	□ No	
11. AUTHORITY	CONSENT TO FOR GENERAL HEALTH SERVICES	
•	ouse has partnered with a local medical clinic in Townsville to provide health services.	
NRL Cowboys House staff will inform parents/ guardians of any concerns arising from the health check and will discuss with parents/ guardians any follow-up required.		
If required, the GP will make a referral to a relevant specialist or other health provider follow-up.		
In addition to the initial and regular health checks, the GP may support the ongoing health needs of your child by:		
 working medical 	g with NRL Cowboys House Staff to handle daily health needs of students including tion.	
	stration, non-invasive procedures, and care for chronic illness (diabetes, asthma, s, life threatening allergies and other concerns).	
-	ding to any immediate health concerns, during clinic hours. ng health information and education to students.	
In addition to these GP services, NRL Cowboys House employs general registered psychologists to provide social and emotional support to our boarders.		
I give consent for my child to have a complete Health Check on commencement at NRL Cowboys House and twice a year thereafter, receive ongoing health and dental care from the House's nominated GP and for the GP to share health-related information with other health providers for the purpose of making a referral and or coordinating healthcare.		
☐ Yes	□ No	



12. AUTHORITY/CONSENT FOR EDUCATION INFORMATION

l give consent for previous school	or NRL Cowboys House to seek education information from my child's current and ls.
□ Yes	□ No
•	or NRL Cowboys House to a One School Report on the students' behaviour from my and previous schools.
□ Yes	□ No
I give consent for Excursions and	or NRL Cowboys House Manager to sign permission slips for my child to attend School Functions.
☐ Yes	□No



13. CHECKLIST, ACKNOWLEDGEMENT AND SIGNATURE OF PARENT(S) / GUARDIAN(S)

I have completed this application form fully and to the best of my knowledge.

I acknowledge and accept that if it can be demonstrated that I have withheld information relevant to this application, especially in relation to this student's individual needs, medical conditions, health care requirements, Parenting Orders or other Court Orders then the application may be refused or enrolment terminated.

I have included copies of the following documents with this application for enrolment (please tick appropriate boxes): ■ Birth Certificate ☐ Two most recent school reports and NAPLAN test results ☐ ABSTUDY – Authority to enquire form ☐ Immunisation Record ☐ Details of any medications – prescription & non-prescription ☐ Details of any allergies ☐ Relevant Family Court Orders (where applicable) ☐ Medical reports and/or special needs information including clinical/educational assessments FOR THIS APPLICATION TO PROCEED, ALL REQUESTED **INFORMATION MUST BE PROVIDED** I understand that that if this application is successful the information that I/we have provided must be kept up to date throughout the enrolment period at NRL Cowboys House. I acknowledge that completion of this form does not necessarily follow that our student will be accepted into NRL Cowboys House and that final selections will be determined in accordance with NRL Cowboys House enrolment criteria. Our signature(s) below confirm our agreements, authorisations and consents as recorded in this document. Name: _____ Date: _____ Date: _____ Name: ______ Date: ______ Date: _____



NRL Cowboys House - Parental Contribution Boarding Fees

The annual Boarding Fee **must** be paid by the Parent or Guardian for each student attending the NRL Cowboys House. The annual cost has been spread over the year from the 1st January until the 31st December. **Please note** payments do not stop over the holidays.

The yearly cost for Parental Contribution to Boarding Fees is in addition to Abstudy Payments money and can be broken down as follows:

Frequency	Total Amount Payable
Weekly	\$50
Fortnightly	\$100
School terms x 4	\$650 term 1
payments	\$650 term 2
	\$650 term 3
	\$650 term 4
Yearly	\$2600

CENTREPAY

If you are the recipient of any Centrelink money, you can log onto your myGov account and setup Centrepay Payments to pay your child's boarding fees. **This must be completed prior to your child's arrival.**

DIRECT DEPOSIT

Direct deposits can be set up with your Bank or Pay Roll Officer to automatically transfer payments, should you choose not to use Centrepay. All Boarding fees are to be deposited to the following account:

Cowboys Charity Ltd BSB: 084 - 970

Account Number: 416 519 711 Reference: STUDENTS NAME

While as an organisation we are more than happy to assist you in any way necessary to set up your payments (Centrpay), we also need to ensure equality for all families. Failure to pay fees will result in your child's place being put at risk.

Regards

Rochelle Jones

Rochelle Jones | General Manager T (07) 4727 6400 E rjones@cowboys.com.au Karen Haughton

Karen Haughton | Business Manager T (07) 4727 6401 M 0419 514 646 E khaughton@cowboys.com.au









