



Australian Government



ABORIGINAL
HOSTELS LIMITED




Student Boarding Application Form

For assistance in completing this application, please
email boarding@ahl.gov.au



 ahl.gov.au

 02 6212 2001

 PO Box 30, Woden ACT 2606



Welcome

Welcome to Aboriginal Hostels Limited (AHL). AHL provides secondary education boarding accommodation across Australia for Aboriginal and Torres Strait Islander students. We have hostels in the following locations:

LOCATIONS		
NSW	Sydney	Biala Hostel for Girls Kirinari Hostel for Boys
	Dubbo	Grey St. Hostel
	Newcastle	Kirinari Hostel for Boys
NT	Katherine	Fordimail Hostel
	Tennant Creek	Tennant Creek Student Accommodation
QLD	Thursday Island	Canon Boggo Pilot Hostel

AHL boarding hostels provide students with:

- a home away from home that supports students' educational, emotional, social, economic and cultural development
- a culturally respectful environment that values each student and their home communities
- the highest level of care and protection
- nutritious meals
- extra-curricular support
- external service support when needed.

Applying for enrolment

To be considered for a place at AHL, this boarding application must be completed in full. We will carefully review and consider each application.

We will look for:

- a good school attendance record
- evidence of appropriate behavior at school.

We will engage with the student's current school to discuss the student's:

- academic achievements
- strengths and interests
- areas for growth
- conduct and behavior.

We want to ensure that this is the best decision for you, as well as your child. To do this, we will have discussions with the student and with you.

Please note that in order to make a decision about your application, we may seek information from community members and organisations.

Thank you for your application.



Which hostel are you interested in? (please tick)

Sydney Kirinari (Boys)

Katherine Fordimail

Sydney Biala (Girls)

Tennant Creek Student Accommodation

Newcastle Kirinari (Boys)

Thursday Island Canon Boggo Pilot

Dubbo Grey St

SECTION A – STUDENT INFORMATION**Student's full name and primary contact details**

Given Names: _____

Surname: _____ Preferred Name: _____

Home Address: _____

Gender: _____ Date of Birth: _____

Place of Birth: _____ State: _____

Birth Certificate Number: _____

Student's cultural heritage

Aboriginal / Torres Strait Islander:

Aboriginal

Torres Strait Islander

Aboriginal and Torres Strait Islander

Tribe Name: _____

Student's Religion: _____

Language(s) spoken at home: _____

School attended most recently

School Name: _____

Location: _____ Year Attended: _____



Tax file number

Does the student have a Tax File Number?

No

Yes – please provide details here:

Tax File Number: _____

Criminal record

Does the student have a criminal record?

No

Yes – please provide details here:

Does your child have a Juvenile Justice case worker?

No

Yes

If Yes, do you give permission for us to contact their case worker?

No

Yes

If Yes, please provide contact details here:

Case worker name:

Phone Number:

External support

Does your child have, or require any external support?

No

Yes – if yes, please provide details here:



SECTION B – PARENT / GUARDIAN CONTACT INFORMATION

Parent/Guardian 1

Ms Mrs Miss Mr

Given Names: _____ Surname: _____

Place of Birth: _____ Date of Birth: _____

Do you speak a language other than English at home? No Yes

Please indicate the one that is spoken most often
(If more than one) _____

What is your relationship to the student?
(for example mother/father, aunt/uncle, family friend) _____

Are you the student's legal guardian? No Yes

Does the student live with you permanently? No Yes

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email: _____

Parent/Guardian 2

Ms Mrs Miss Mr

Given Names: _____ Surname: _____

Place of Birth: _____ Date of Birth: _____

Do you speak a language other than English at home? No Yes

Please indicate the one that is spoken most often
(If more than one) _____

What is your relationship to the student?
(for example mother/father, aunt/uncle, family friend) _____

Are you the student's legal guardian? No Yes

Does the student live with you permanently? No Yes

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email: _____



Emergency contact 1 (if parent/guardian cannot be reached)

Name: _____ Relationship to Student: _____

Address: _____

Phone: _____ Mobile: _____

Work Phone: _____ Email: _____

Emergency contact 2 (if parent/guardian cannot be reached)

Name: _____ Relationship to Student: _____

Address: _____

Phone: _____ Mobile: _____

Work Phone: _____ Email: _____

Siblings

Does the student have brothers or sisters currently boarding with, or intending to enrol at an AHL hostel in the near future?

No

Yes – please provide details.

Name: _____	Enrolment Year: _____	Hostel: _____
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Name: _____	Enrolment Year: _____	Hostel: _____
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Name: _____	Enrolment Year: _____	Hostel: _____
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Special family circumstances

Are there any special family circumstances?
(e.g. single parent custody, dual custody, foster care, or access restrictions)

No

Yes

If Yes, supporting legal documents are required
– are these attached?

No

Yes

Are there any other conditions enforced by law? Please provide details:

No

Yes – Please provide details:

Undesirable contact

If a person is banned by law, or you have reason to believe it is not suitable for a particular person to have contact with this student, please outline the details below:

Person's Full Name:

This person is legally not to have contact

I prefer this person doesn't have contact

Please notify us if addresses or contact details change. It is your responsibility to ensure our hostel has an up-to-date contact in case of an emergency.



SECTION C – STUDENT MEDICAL INFORMATION

In order for your child's application to be accepted, this section must be filled out in full.

1. Health care details

Medicare Card number: _____ Valid to: _____

Healthcare/Pension/Centrelink Reference Number: _____

Community Health Centre: _____ Phone: _____

A member of a Private Health Fund? ☐ No ☐ Yes – please provide details:

Fund Name: _____ Member Number: _____

Blood group (if known): _____ ☐ Negative ☐ Positive

Does the student have a MedicAlert bracelet or pendant? ☐ No ☐ Yes – please provide details:

Is there any cultural or religious consideration relating to student's medical or health care? ☐ No ☐ Yes – please provide details:

2. Existing health conditions

Please indicate if the student has any existing health conditions:

Physical Disability	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Please specify: _____
Psychological/Mental Health	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Please specify: _____
Behavioural or Safety	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Please specify: _____
Sensory (Vision/Hearing)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Please specify: _____
Communication	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Please specify: _____
Other	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Please specify: _____



Please indicate if the student has any existing health conditions:

(please tick or add details below)

Epilepsy	No	Yes
Diabetes	No	Yes
Rheumatic heart disease or other heart sickness	No	Yes
Kidney disease or other kidney problems	No	Yes
Asthma or breathing problems	No	Yes
Auto immune disease	No	Yes
Allergies	No	Yes
Migraines	No	Yes
Ear infection or perforation (hole in the eardrum)	No	Yes
Hearing problems	No	Yes
Eye/vision problems	No	Yes

If Yes, please provide details of any chronic condition:

Is the student currently taking medication?

No

Yes – please list below or on a separate sheet, if necessary.

3. Prescription medications**Please list the prescription medications your child is currently taking, including their dose and frequency:**

Name of medication	Dose	Frequency	Duration	By self or needs assistance



4. Non-Prescription medications

Please list the non-prescription medications your child is currently taking, including their dose and frequency:

Name of medication	Dose	Frequency	Duration	By self or needs assistance

5. Asthma history

Does the student have an asthma action plan? No Yes – please attach a copy.

If the student has asthma, an Asthma Action Plan must be provided before commencement.

Has the student been to hospital due to asthma in the past 2 years? No Yes – please provide details:

Has the student been treated with oral corticosteroids in the past 12 months? No Yes – please provide details:

Name, dose and device used of current preventer medication:

What signs/symptoms does the student display when their asthma is getting worse?

Name, dose and device used for current reliever medication:



6. Allergies/Anaphylaxis reactions

Does the student have an anaphylaxis action plan? No Yes – please attach a copy.

An anaphylaxis action plan must be provided before commencement of enrolment.

Please provide details of any diagnosed allergies and/or severe allergic reactions to the following:

Medications:
(e.g. Penicillin) _____

Food:
(e.g. peanuts) _____

Other:
(e.g. plants, insect bites/stings, etc.) _____

7. Immunisation information

An immunisation record must be provided before commencing at a boarding hostel.

Is the student's immunisation record attached? No Yes

SECTION D – ADDITIONAL INFORMATION

Privacy and information policy

- Our hostel collects personal information, including sensitive information about students, parents or guardians before and during the course of the student's enrolment at the hostel.
- Certain laws governing or relating to the operation of the hostel facility require that certain information be collected. These include Public Health and 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.
- Our hostel occasionally has to 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 our hostel, 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 our hostel.
- 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, media and on AHL webpages.
- Parents may ask for access to personal information collected about them and their child by contacting the hostel. 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 undesirable impact on the privacy of others, or access may result in breach of hostel duty of care to the students, or where students have provided information in confidence.



ABSTUDY travel policy

- Students approved for ABSTUDY may be entitled to travel to and from the hostel at the beginning and end of each school term.
- The boarding hostel will arrange travel details directly with ABSTUDY and notify you of your child's travel arrangements once they have been booked.

Important

- Parents/Guardians must ensure their child boards the transport booked. Missing a flight/train/coach may result in ABSTUDY no longer funding travel for your child to the hostel.
- If there is a need to reschedule travel (sorry business/illness/family business) you need to contact the hostel and ABSTUDY to arrange rescheduling (some costs and conditions may apply).
- Parents/Guardians must accompany your child, or arrange for a responsible adult to accompany your child while travelling to and from the hostel. If you choose to allow your child to travel independently, AHL must be satisfied that suitable arrangements for care of travelling students have been made and will ask parents to confirm these as a condition of ongoing enrolment.

SECTION E – STUDENT AGREEMENT

Boarding hostel rules and expectations

All students are required to follow the boarding rules and expectations.

I respect myself and my property

- Shower every day and after physical activities.
- Brush your hair and your teeth every day.
- Wear clean clothes.
- Wash your dirty clothes.
- Make your bed every day.
- Keep your room clean and tidy every day (regular room inspections will be undertaken by staff).
- Do not graffiti.
- Vandalism is forbidden (all damage will be paid for by the student).

I will always try to do my best

- Protect and respect your belongings.
- Drugs, alcohol, cigarettes, e-cigarettes, vaping and sniffing are forbidden.
- I respect others and their property.
- Be polite – say 'please' and 'thank you'.
- Respect other people's opinions and ideas.
- Do not steal.
- Do not use others' personal belongings without their permission.
- Do not go into another student's room without their permission.
- Do not say bad things about others.
- Be friendly and make others feel welcome.



I respect the hostel – my home away from home

- Always behave appropriately in the hostel and in public.
- Be respectful and friendly to hostel visitors.
- Be respectful toward staff and follow their directions.
- Take care of hostel property – it is there for you and others.
- Adhere to the Information Technology Student agreement.
- Be proud of your home away from home.
- Respect your environment – do not throw rubbish around.
- Damaging hostel property is forbidden (all damage will be paid for by the student).

Student agreement to the boarding house rules and expectations***I want to come to the boarding hostel for educational reasons and agree to abide by the boarding hostel rules and expectations and:***

- I will attend school every day unless I have permission from my Head of Boarding to be absent.
- I will return straight home on the bus from school every day unless there are school activities and/or I have prior permission from the Head of Boarding.
- 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 do my best to return to the hostel and school on time after my holidays. If I cannot return on time, I will call the hostel before I am due to arrive back to the boarding hostel.
- I understand that there will be no relationships of a sexual nature while I am living at the boarding hostel.
- I will treat my fellow students, hostel staff and all people that I come in contact with respectfully during my time at the boarding hostel.
- I will not bully or harass other students in boarding hostel.
- I will not engage in any illegal activity within the hostel or on other premises.

Student Signature

Date

SECTION F – PARENTAL/GUARDIAN CONSENT AND AGREEMENTS

1. General parental/guardian authority and consent

I agree for hostel staff to act on my behalf in matters concerning the safety, health and welfare of my child.

No Yes

2. Privacy policy

As part of hostel activities there may, on occasion, be a need for staff or invited media to take photographs, voice and/or video footage of your child for publication in newspapers, newsletters, training videos, school/hostel websites, social media, and documentation. Please indicate below if you do/do not wish your child to feature in such publicity. In most circumstances, the images will not include any personal information regarding the student's identity.

I agree that photographs and/or video footage of my child may be taken and used for these purposes.

No Yes

3. Transport policy

I consent to my child travelling under the supervision of staff on the hostel bus or on public transport, or by private car as required and whenever such travel is necessary in connection with hostel activities.

No Yes

4. Medical emergency authorisation

I authorise the hostel to seek medical/dental attention, call an ambulance or to hospitalise my child when considered necessary. I further authorise that, if an emergency occurs requiring surgery, anaesthetic, oxygen, blood transfusion or medication and I am unable to be contacted within a reasonable time, hostel staff have the authority to authorise treatment on my behalf as recommended by an accredited medical practitioner.

No Yes



5. Authority/Consent to supply medical information

I authorise the hostel to supply medical information as required by others.

No Yes

6. Authority/Consent for vaccinations

I give consent for my child to receive vaccinations and immunisations (e.g. polio, hepatitis B, rubella, tetanus) as recommended by a registered medical practitioner; to receive medical examination and emergency medical treatment if required, as well as attend education sessions on topics deemed relevant or essential by the hostel.

No Yes

7. Authority/Consent for general health services

AHL partners with the Department of Health to provide comprehensive and localised medical services at all hostels.

The local medical services will help each student achieve and maintain their best possible health by offering all students a complete Health Check at commencement. This Health Check will help ensure that students are ready for learning by identifying or ruling out issues such as hearing and vision problems. The assessment will cover hearing, vision, dental and general health and wellbeing.

The local medical services 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 General Practitioner (GP) will make a referral to the relevant specialist or other health provider for any follow-up. We will only share health-related information with other health providers if we have parental/guardian consent to do so.

In addition to the initial health check, the local medical services can support the ongoing health needs of your child by:

- working with the hostel staff to handle daily health needs of students including administering medication, non-invasive procedures, and care for chronic illness (diabetes, asthma, seizures, life-threatening allergies and other concerns)
- responding to any immediate health concerns, during clinic hours
- providing health information and education to students.

I give consent for my child to have a complete Health Check on commencement at the hostel, receive ongoing health and dental care from local medical services and for the service to share health-related information with other health providers for the purpose of making a referral and/or coordinating health care.

No Yes



8. Authority/Consent for education information

I give consent for our hostel to seek education information from my child's current and previous schools.

No Yes

I give consent for the hostel to obtain reports on the student's behaviour from my child's current and previous schools.

No Yes

9. Consent for swimming at the hostel

I give consent for my child to use the swimming pool facility at the hostel (where one is available).

No Yes

I would describe my child's swimming capability:

Non swimmer with fear of water:	No	Yes
Non swimmer without fear and enjoys water activities:	No	Yes
Weak swimmer can swim less than 50 metres:	No	Yes
Moderate swimmer can confidently swim over 200 metres:	No	Yes
Participated in formal learn-to-swim classes/programs:	No	Yes

Level attained (if applicable): _____

10. Mobile and IT policy agreement

As a parent I will support my child to understand the rules for the use of all electronic devices. I will also ensure that my child understands the risk to their safety, and the safety and security of other users.

As a parent I agree to support my child to adhere to the following conditions:

- Accept responsibility for AHL issued laptop and accessories.
- Keeping the AHL issued username and password private – do not share it and do not use any other person's username and password.
- Report any inappropriate material or messages to staff.
- Understanding that mobile phone or electronic device can be confiscated for inappropriate behaviour.
- Understanding that inappropriate images/videos (including posting on social media) should not be distributed.
- Understanding the risks of uploading, downloading or accessing any materials that are illegal or inappropriate, as this may cause harm or distress to others. Understanding that it is not permitted to use any programs or software that might allow me to bypass the filtering/security systems in place to prevent access to such materials.
- Understanding that AHL can monitor all usage.



11. Parent and guardians code of conduct

The success of students boarding with AHL is reliant on a strong partnership with parents/guardians. We welcome feedback from them and commit to regularly communicating with parents and guardians. We will always communicate with respect and we ask that you also treat our staff and students with respect at all times.

Our expectations for parents and guardians are below:

Communication

- Always be polite both when talking with us and writing to us.
- Act as a positive role model.
- Raise concerns with staff through our feedback processes.
- Follow our procedures for providing advice for student leave or other requirements.
- Do not approach other parents/guardians or students directly if a problem arises, raise this with the Head of Boarding.
- Abusive or aggressive behaviour towards our staff or students is never tolerated.

Collaboration

- Assist us in ensuring the students adhere to the Boarding House Rules and Expectations.
- Ensure students attend school every day and only take students out of the hostel when required.
- Advise us when a concern arises and work with us to address it.
- Work with us when student's behaviour is not acceptable.

Privacy

- Never take or post photographs or mention other students on social media without the express consent of the other child/children's parents/guardians.
- Do not post photographs of students if it has the potential to bring negative comments towards the student(s), staff or AHL.
- Do not set up any group using AHL, the AHL logo, or the hostel in its title.
- Do not share email addresses of parents/guardians without their express consent.

I have read and I understand the above conditions and will support my child to adhere to these conditions.

Name Parent/Guardian 1

Signature

Date

Name Parent/Guardian 2

Signature

Date



12. Checklist, acknowledgment and signature of parent(s)/guardian(s)

Please tick and sign to show you acknowledge and agree to the following:

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

I/We acknowledge and accept that if it can be demonstrated that I/we 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/We have included copies of the following documents with this application for enrolment:

- Birth Certificate
- Two most recent school reports
- Relevant family court orders (if applicable)
- Medical reports and/or special needs information including clinical/educational assessments (if applicable)
- Immunisation record
- Details of any medications – prescription and non-prescription
- Details of any allergies (Example: Asthma/Anaphylaxis Action Plan).

*I/We understand that if this application is successful, the information that I/we have provided must be kept up to date throughout the enrolment period at the hostel.
Our signature(s) below confirm our formal consent and agreements.*

Name Parent/Guardian 1

Signature

Date

Name Parent/Guardian 2

Signature

Date

FIND OUT MORE



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