



STUDENT PROFILE

This form must be completed by all students seeking Confirmation of Appropriate Accommodation and Welfare (CAAW). All questions must be answered and dates entered in DD/MM/YY format unless specified. This icon appears in sections where additional documentation must be attached.

STUDENT DETAILS (please attach a copy of the photo page on student's passport)

Student ID: Date of birth: Gender: M F
 Family name: Given name(s):
 Nationality: Languages spoken at home:

Home country address

Number and Street: Suburb/City:
 Province/State: Country: Postcode/Zip code:
 Telephone (country code/area code/number): Mobile:
 Email:

DIETARY REQUIREMENTS

Do you have specific dietary requirements i.e. halal, vegetarian? Yes No If yes, please provide details.

MEDICAL

Please advise if the student suffers from any of the following: Yes No If yes, please provide details.

Anxiety Asthma Bed wetting Blackouts Depression Diabetes Dizzy spells Fits of any type
 Heart condition Migraine Sleep walking Travel sickness

Please specify if the student suffers from the following allergies: Yes No If yes, please provide details including effect of the allergy.

Penicillin Bee stings Animals Food Other

MEDICAL (CONT.)

Please specify any current medication taken by the student and the reason:

Name of medication	Reason for medication	Dosage
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Has your child been immunised? Yes No If yes please select from the following:

Tetanus Polio Tuberculosis Other (please specify):

Student's swimming ability: Basic Intermediate Advanced

Please specify any further information (eg; fear of heights):

HOBBIES/INTERESTS

Outdoor:


Indoor:

Please help us gain an understanding of your child by answering yes or no to the following questions:

Confident relating to adults	Yes	No
Confident relating to peers	Yes	No
Responsible completing homework	Yes	No
Confident working independently with minimum supervision	Yes	No
Enjoys spending free time with family/siblings	Yes	No
Enjoys time with friends outside of the family	Yes	No
Prefers spending time alone	Yes	No
Makes new friends easily	Yes	No
Enjoys playing sport	Yes	No

Is there anything else you would like to mention?

FAMILY DETAILS

 **Mother's details (please attach a copy of the photo page from mother's passport)**


Family name: Given name(s):

Number and Street: Suburb/City:

State: Country: Postcode/Zip code:

Telephone (country code/area code/number): Mobile:

Email: Passport number:

 **Father's details (please attach a copy of the photo page from father's passport)**

Family name: Given name(s):
Number and Street: Suburb/City:
State: Country: Postcode/Zip code:
Telephone (country code/area code/number): Mobile:
Email: Passport number:

Siblings

Male Age(s): Female Age(s):

Do you have any family or friends in Australia? Yes No

If yes, please provide details of all family/friends that your child may be in contact with (you may list on a separate sheet if required).

Family name: Given name(s):
Number and Street: Suburb/City:
State: Postcode/Zip code:
Telephone (country code/area code/number): Mobile:
Email: Relationship:

STUDENTS AND WORK

Providing work does not affect school attendance or performance, students who have written permission from parents may work up to a maximum of 20 hours per week (including voluntary work).

Parents/Guardians please note:

It is expected that students who have been given permission to work will arrive home from work no later than 9:00pm Sunday to Thursday, and 11:00pm Friday and Saturday. Should work adversely affect school performance or attendance, TAFE International Western Australia (TIWA) approval to work will be withdrawn and your child will be required to cease employment.

I give permission for my child to undertake employment

I do not give permission for my child to undertake employment up to a maximum of 20 hours per week.

Other – please specify i.e.; only permitted to work Saturdays

HOLIDAYS

It is a student visa requirement that TIWA be advised of student's holiday arrangements. Each term students are required to advise TIWA if they will be returning home for the holiday or remaining in homestay.

Students returning home must provide flight details for both outgoing and return journeys including flight number, booking reference and ticket number.

DECLARATION

By signing this approval I confirm that all the information included on the form is correct.

Parent / Legal guardian name: Signature: Date:

SUBMIT THIS FORM

Please send the completed form to admissions.tiwa@dtwd.wa.gov.au and ensure that total email attachments are under 6MB.