

respect responsibility resilience



Bowden Brompton
Community School

TORRENS ROAD CAMPUS
Ph: 8346 4041
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BEACH CAMPUS
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LITTLE PARA CAMPUS
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POTENTIAL STUDENT INFORMATION FORM

Version 10, Updated 4/4/16

Please complete in full and fax back to BBCS. BBCS will schedule an appointment in regard to potential student upon receiving this document. Please include EDSAS attendance and behaviour management data for the previous 12 months. This information is required prior to an interview commencing. You may provide documents of sensitive nature in the interview.

The interview does not guarantee an enrolment at BBCS. Once the parent / carer and student agree that BBCS is the best educational option they are to inform the Head of Campus (HOC) who will consult with the school's Leadership team & Behaviour Coach. At this point the HOC or delegate will contact the Behaviour Coach & parents/carer to inform them of induction dates or whether the student will undergo a 4 week trial at BBCS to ensure the student will attend the school regularly and is willing to commit to the school programs. Subject to the trial, the enrolment is finalised. Enrolment enquires go to the Head of Campus or you may ring the Principal (Torrens Road campus) to discuss any queries.

[Government of SA Information Sharing Guidelines](#)

Behaviour Coach/Attendance Officer: _____ Region: _____ Ph: _____

Interview Date: _____ Name of Student: _____ GOM :

DOB: _____ Age: _____ Year Level: _____

Address: _____

Name of Parent/Caregiver: _____

Ph: Home _____ Work _____ Mobile _____

Student Ph: Mobile _____

Emergency Contact Person: _____

Ph: Home _____ Work _____ Mobile _____

Current School: _____ School Contact Person: _____

Exclusion (current school - date, reason, placement): _____

Gender: F / M

School Card Holder: Y / N

Aboriginal/Torrens Straight Islander: Y / N

Non-English Speaking Background: Y / N

NEP It is highly recommended that the current NEP's is presented at the interview.

Level of support _____ Date of last NEP review: _____

OTHER SERVICES INVOLVED: (Please describe their involvement)

Agent/Services	Contact	Comments/Assessment Reports Available
SIW Coordinators <input type="checkbox"/>	_____	_____
Guidance Assessment <input type="checkbox"/>	_____	_____
Disabilities <input type="checkbox"/>	_____	_____
Speech Pathologist <input type="checkbox"/>	_____	_____
Social Worker <input type="checkbox"/>	_____	_____
Aboriginal Ed <input type="checkbox"/>	_____	_____
Attendance <input type="checkbox"/>	_____	_____
Learning Centre <input type="checkbox"/>	_____	_____
Other <input type="checkbox"/>	_____	_____

OTHER AGENCIES INVOLVED:

Agent/Services	Contact	Comment/Assessment Reports Available
CAMHS <input type="checkbox"/>	_____	_____
Families SA <input type="checkbox"/>	_____	_____
GOM or VCA <input type="checkbox"/>	_____	_____
Hospitals <input type="checkbox"/>	_____	_____
Options Co-ordinator <input type="checkbox"/>	_____	_____
ENU - Exceptional Needs Unit <input type="checkbox"/>	_____	_____
Psychiatrist / Psychologist <input type="checkbox"/>	_____	_____
Physiotherapist <input type="checkbox"/>	_____	_____
Other <input type="checkbox"/>	_____	_____

MEDICAL, PSYCHIATRIC, or PHYSICAL CONDITIONS:

Condition	Medication	Dr or Psych
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Is there a current Health Care Plan? Y/N Date _____

PREVIOUS SCHOOLS ATTENDED (last 2 years):

School

Date

_____	_____
_____	_____
_____	_____

EXCLUSIONS / SUSPENSIONS:

Date

Reason

Placement

_____	_____	_____
_____	_____	_____
_____	_____	_____

ESSENTIAL BEHAVIOURAL ISSUES: (Please indicate the behaviours of the student and describe them in order of concern)

Attendance

Number of days absent for the last 12 months: _____

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Peers

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Teachers

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Emotions / Social issues

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Verbal aggression

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Physical aggression

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Medication

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Illicit drugs / Substance abuse

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Police issues / Legal obligations

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

ADDITIONAL BEHAVIOURAL ISSUES: (Please indicate the behaviours of the student and describe them in order of concern)

Depression

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Self Injurious Behaviour / Suicide

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Domestic Violence

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Absconding

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Bizarre or Unusual Behaviour

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Agitation / Anxiety

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Moods

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

Other

Not a Concern Rarely an issue Sometimes an issue Frequently an issue Ongoing/current concern N/A

ADDITIONAL COMMENTS:

PARENT/CARER COMMENTS: