Department of Education

GOVERNMENT OF WESTERN AUSTRALIA

Shaping the future

TRIM # here.

Application for Registration as a Home Educator

To: Director of Education / Home Education
Education Regional Office – [Select Region]
Address / Contact details (see Appendix 1)

Parent / Guardian title:	MR
Parent / Guardian name:	RAYMOND G MORRISON
Relationship to student/s:	FATHER / STEP FATHER
Home address:	40 TOLEDO CCT PORT KENNEDY 6172
Postal address:	AS ABOVE
Home telephone:	N/A
Mobile:	0459 570 046
Email:	ray.morrison85@hotmail.com
Australian Citizenship/Residency Status:	Citizen/Permanent resident: Yes ☑ No ☐
Visa Sub Class number:	
Parent / Guardian 2 title (if applicable):	MRS
Parent / Guardian 2 name (if applicable):	MIRANDA MORRISON (BIRTH MOTHER)
Alternate Contact name (Optional):	
Home address:	AS ABOVE
Home telephone:	AS ABOVE
Mobile:	0431 052 448
Email:	miranda.morrison89@outlook.com
Home Educator/s:	BOTH PARENTS. MIRANDA, RAYMOND MORRISON

* Guardians - please attach supporting documents detailing relationship to students (See Checklist at the end of the form).
* Please note that a step-parent may not be eligible to register unless they have been legally granted guardianship.
* Information will be sent by email. If you do not want to receive information by email, please contact the Home Education Administration Team in the relevant Education Regional Office.

Details of Student/s					
Student Surname:	Jones	Last school or home education region:			
Legal Surname:	Jones	Safety Bay Senior high			
First Name:	Makenzie				
Preferred Name:	Makenzie				
Birth date:	27/08/10	Gender:	F ☑	M ☐	Other ☐
Current year level:	Choose an item. 7				
School Curriculum and Standards Authority Number (SCSA):	34523846				
UDI (if applicable):		USI (if applicable):			
Student Surname:	Jones	Last school or home education region:			
Legal Surname:	Jones	Rockingham Lakes Primary school			
First Name:	Kasey				
Preferred Name:	Kasey				
Birth date:	16/12/13	Gender:	F ☐	M ☑	Other ☐
Current year level:	Choose an item. 4				
School Curriculum and Standards Authority Number (SCSA):	37363546				
UDI (if applicable):		USI (if applicable):			
Student Surname:	Morrison	Last school or home education region:			
Legal Surname:	Morrison	Rockingham lakes Primary school			
First Name:	Loki				
Preferred Name:	Loki				
Birth date:	19/01/17	Gender:	F ☐	M ☑	Other ☐
Current year level:	Choose an item. 1				
School Curriculum and Standards Authority Number (SCSA):	40368949				
UDI (if applicable):		USI (if applicable):			
☐ Siblings Previously Home Educated					
Are there any Family Court Orders regarding parental responsibility and/or the residence, education, care and welfare of the student/students? Yes ☐ No ☑ **If yes**, please provide and attach a copy of the court orders for residence/access restrictions.					

Details of Student/s					
Student Surname:	Morrison	Last school or home education region:			
Legal Surname:	Morrison	Rockingham lakes Primary school			
First Name:	Dominik				
Preferred Name:	Dominik				
Birth date:	15/01/19	Gender:	F ☐	M ☑	Other ☐
Current year level:	Choose an item. Kindy				
School Curriculum and Standards Authority Number (SCSA):	42375635				
UDI (if applicable):		USI (if applicable):			
Student Surname:		Last school or home education region:			
Legal Surname:					
First Name:					
Preferred Name:					
Birth date:		Gender:	F ☐	M ☐	Other ☐
Current year level:	Choose an item.				
School Curriculum and Standards Authority Number (SCSA):					
UDI (if applicable):		USI (if applicable):			
Student Surname:		Last school or home education region:			
Legal Surname:					
First Name:					
Preferred Name:					
Birth date:		Gender:	F ☐	M ☐	Other ☐
Current year level:	Choose an item.				
School Curriculum and Standards Authority Number (SCSA):					
UDI (if applicable):		USI (if applicable):			
☐ Siblings Previously Home Educated					
Are there any Family Court Orders regarding parental responsibility and/or the residence, education, care and welfare of the student/students? Yes ☐ No ☐ **If yes**, please provide and attach a copy of the court orders for residence/access restrictions.					

Details of Educational Program	
Commencement date for Home Education:	Address of place where your educational program will be primarily delivered if different from the home address:
Click or tap to enter a date. 25/03/24	

Choose an item WE understand and accept the responsibilities for the home education of the student/s in Choose an item BOTH care.

Parent/Guardian signature (1):	[signature]	Date:	Click or tap to enter a date. 2/11/23
Parent/Guardian signature (2) (if applicable):	[signature]	Date:	Click or tap to enter a date. 2/11/23

Optional – Additional information

Further details to inform the Home Education Moderator

Name of education program provider if other than applicant:	
Reason/s for home education:	Need more 1 on 1 due to ADHD and additional needs that school cant provide as well as some bullying issues

Is the student of Aboriginal or Torres Strait Islander origin:

☑	No	☐	Yes, Torres Strait Islander (TSI)
☐	Yes, Aboriginal	☐	Yes, both Aboriginal and TSI

Checklist for Parents(s)/Guardian(s)

Please ensure copies of the following documents are enclosed with your Application

• Birth Certificate/s	☐	
• SCSA Number Provided	☑	
• Visa/Passport Document/s	☐	(if applicable)
• Proof of Guardianship	☐	(if applicable)
• Family Court Order	☐	(if applicable)
• Marriage Certificates/s	☐	(if applicable) (Required if mother and father's names are not the same as on the birth certificate – married since birth of child)

For Office Use Only:

Date Received: Click or tap to enter a date.