

OFFICE USE ONLY

Application for Enrolment Returned ____ / ____ / ____

Level _____ Year _____

- Catholic Greek Orthodox Other
- Zoned
- New Family or Existing Family
- Alumni Family

ENROLMENT APPLICATION FORM



Family Name:

Child's Name:Date of Birth:/...../.....

CORPUS CHRISTI PRIMARY SCHOOL WERRIBEE

29 Russell Street, Werribee Vic 3030
Telephone: (03) 9741 8440
www.ccwerribee.catholic.edu.au

Enrolment Details Entered eSIS: Yes No By Initials: _____ Date: ____/____/____

Interview Booked Date ____/____/____ Time ____: ____ am/pm With: _____

Returned & Signed Code of Conduct: P&V Volunteer Enrolment Fee Paid: Yes No

At Corpus Christi we hold the care, safety and wellbeing of children and young people as a central and fundamental responsibility of our school.

OFFICE USE ONLY	☑
Date Received:	
Birth Certificate: DOB:	
Baptism Certificate:	
Immunisation Certificate: Date:	
Stewardship Paperwork / No :	
Medical Alerts:	
Additional Needs Reports:	
Medical ALERT Required:	
Action Plans Provided:	
School Reports:	
Proof of Residency: (2 Original documents to be provided)	
<ul style="list-style-type: none"> • Drivers License 	
<ul style="list-style-type: none"> • Utility Bill (Gas / Electricity /Mobile) 	
<ul style="list-style-type: none"> • Residential <ul style="list-style-type: none"> ➢ Council Rate Notice ➢ Contract of Sale ➢ Building Contract ➢ Rental Agreement 	
Covering Letter: (if non Catholic Enrolment)	

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Include Here:

(original documents to be sighted and copies to be retained by the school)

Birth Certificate

Baptism Certificate

Immunisation Certificate

Corpus Christi Primary School Enrolment Form



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FAMILY DETAILS

Name:

Address:

Email:

Tel:

Mobile:

OFFICE USE ONLY	Enrolment date:	English as an Additional Language: Yes <input type="checkbox"/> No <input type="checkbox"/>
	Start date:	House colour:
	Student/family code:	VSN:
		Visa information attached (if relevant): Yes <input type="checkbox"/> No <input type="checkbox"/>

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STUDENT DETAILS			
Surname:		Entry year (YYYY):	Entry level/grade:
First name/s:			
Preferred first name:			
Date of birth:		Religion: (include rite)	
Male: <input type="checkbox"/>	Female: <input type="checkbox"/>	Other: <input type="checkbox"/>	
HOME ADDRESS OF STUDENT			
Street number and name:			
Suburb:		Postcode:	
Home phone:			
EMERGENCY CONTACTS – OTHER THAN PARENT/GUARDIAN			
1. Name:		2. Name:	
Relationship to child:		Relationship to child:	
Address:		Address:	
Mobile:		Mobile:	
Home phone:		Home phone:	
OUT OF HOURS SCHOOL CARE			
Does or will your child utilise	Before School Care <input type="checkbox"/>	After School Care <input type="checkbox"/>	
SACRAMENTAL INFORMATION			
Baptism	Date:	Parish:	
Confirmation	Date:	Parish:	
Reconciliation	Date:	Parish:	
Communion	Date:	Parish:	
Current parish:		Stewardship No:	
PREVIOUS SCHOOL/PRESCHOOL PERMISSION			
Name and address of previous school/preschool:			
Year Level/Group:		Teacher:	
I/We give permission for the school to contact the previous school or preschool and to gather relevant reports and information to support educational planning:		No <input type="checkbox"/>	Yes <input type="checkbox"/> (If yes, please complete Form B Sample Consent for Transferring Information.)
SIBLINGS			
List all children in your family (oldest to youngest) – include applicant:			
Name	School/preschool	Year/grade	Date of birth

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NATIONALITY				
GOVERNMENT REQUIREMENT		NATIONALITY		ETHNICITY
In which country was the student born?		<input type="checkbox"/> Australia	<input type="checkbox"/> Other – please specify:	
Is the student of Aboriginal or Torres Strait Islander origin? (For persons of both Aboriginal and Torres Strait Islander origin, tick 'Yes' for both.)				
No <input type="checkbox"/>		Yes, Aboriginal <input type="checkbox"/>	Yes, Torres Strait Islander <input type="checkbox"/>	
Does the student or their parent(s)/guardian(s) speak a language other than English at home? <i>Note: Record all languages spoken.</i>				
		Student	Parent A/Guardian 1	Parent B/Guardian 2
No	English only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes	Other – please specify all languages			
Do you require the services of an interpreter at school meetings?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
IF NOT BORN IN AUSTRALIA, CITIZENSHIP STATUS*				
Please tick the relevant category below and record the visa subclass number as per government requirements: (original documents to be sighted and copies to be retained by the school)				
Australian citizen not born in Australia:				
<input type="checkbox"/>	Australian citizen (Australian passport or naturalisation certificate number/document for travel if country of birth is not Australia)			
Australian passport number:				
Naturalisation certificate number:				
Visa subclass recorded on entry to Australia:				
Date of arrival in Australia:				
Not currently an Australian citizen, please provide further details as appropriate below:				
<input type="checkbox"/>	Permanent resident: (if ticked, record the visa subclass number)			
<input type="checkbox"/>	Temporary resident: (if ticked, record the visa subclass number)			
<input type="checkbox"/>	Other/visitor/overseas student: (if ticked, record the visa subclass number)			
* Please attach visa/ImmiCard/letter of notification and passport photo page.				

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MEDICAL INFORMATION		
Doctor's name:		
Street number and name:		
Suburb:	Postcode:	Phone:
Medicare number:	Ref No of child:	Expiry:
Private health insurance: Yes <input type="checkbox"/> No <input type="checkbox"/>	Fund:	Number:
Ambulance cover: Yes <input type="checkbox"/> No <input type="checkbox"/>	Number:	
Medical condition:	Please specify any relevant medical conditions for the student, e.g. asthma, diabetes, anaphylaxis, and/or any medications prescribed for the student. A Medical Management Plan signed by a relevant medical practitioner (doctor/nurse) will be required for each of the medical conditions listed.	
Allergies:	Please list specific details for any known allergies that do not lead to anaphylaxis, e.g. hay fever, rye grass, animal fur.	
Has the student been diagnosed as being at risk of anaphylaxis ? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, does the student have an EpiPen or Anapen ? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Action Plans are to be provided to the school by the Parent before the child commences school.		
IMMUNISATION (please attach an immunisation history statement for your child)		
All vaccines are recorded on the Australian Immunisation Register (AIR). You are required to obtain an immunisation history statement for your child (visit myGov) and provide it to the school with this enrolment form.	Immunisation history statement attached: Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please provide explanation:	
TETANUS INJECTION: Date / /		
If the student entered Australia on a humanitarian visa, did they receive a refugee health check?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Please provide all required information to allow us to meet our duty of care obligations and facilitate the smooth transition of your child into our school. It will assist the school to implement appropriate adjustments and strategies to meet the particular needs of your child. If the information is not provided or is incomplete, incorrect or misleading, current or ongoing enrolment may be reviewed.</i>		
Is your child eligible or currently receiving National Disability Insurance Scheme (NDIS) support?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does your child present with:		
<input type="checkbox"/> autism (ASD)	<input type="checkbox"/> behavioural concerns	<input type="checkbox"/> hearing impairment
<input type="checkbox"/> intellectual disability/ developmental delay	<input type="checkbox"/> mental health issues	<input type="checkbox"/> oral language/communication difficulties
<input type="checkbox"/> ADD/ADHD	<input type="checkbox"/> acquired brain injury	<input type="checkbox"/> vision impairment
<input type="checkbox"/> giftedness	<input type="checkbox"/> physical impairment	<input type="checkbox"/> other condition (please specify)
Has your child ever seen a:		
<input type="checkbox"/> paediatrician	<input type="checkbox"/> physiotherapist	<input type="checkbox"/> audiologist
<input type="checkbox"/> psychologist/counsellor	<input type="checkbox"/> occupational therapist	<input type="checkbox"/> speech pathologist
<input type="checkbox"/> psychiatrist	<input type="checkbox"/> continence nurse	<input type="checkbox"/> other specialist (please specify)
If your child does have a special need, please assist us by providing the following information:		
Details of additional learning needs/additional needs provided (please provide all relevant information)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Medical/allied health professional reports attached (provide all relevant information)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

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CONSENT FOR MEDICAL ATTENTION

Where the school is unable to contact me, or it is otherwise impracticable to contact me, I authorize the school to:

- Consent to my child receiving such medical attention as may be deemed necessary by a medical practitioner
- Administer such first aid as the school may judge to be reasonably necessary AND
- Accept responsibility for the payment of any expenses thus incurred, including ambulance

SIGNED X _____ Please Print Name: _____

Date: ____/____/____

HEALTH CARE CARD CARD NUMBER: _____	YES <input type="checkbox"/> EXPIRY DATE: ____/____
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PARENT / GUARDIAN / FATHER			
Surname:		Title: (e.g. Mr)	First name:
Address:			
Email		Date of Birth:: ____/____/____	
Home phone:		Work phone:	Mobile:
SMS messaging: (for emergency and reminder purposes) Yes <input type="checkbox"/> No <input type="checkbox"/>			
Government Requirement	Occupation:	What is the occupation group?	
Current Employer:	(select from the enclosed list of parental occupation groups)		
Religion: (include rite)		Nationality: Ethnicity if not born in Australia:	
Country of birth: <input type="checkbox"/> Australia <input type="checkbox"/> Other (please specify):			
What is the highest year of primary or secondary school Parent A/Guardian 1 has completed? (Persons who have never attended secondary school, tick 'Year 9 or below'.)			
Year 9 or below <input type="checkbox"/>	Year 10 or equivalent <input type="checkbox"/>	Year 11 or equivalent <input type="checkbox"/>	Year 12 or equivalent <input type="checkbox"/>
What is the level of the highest qualification Parent A/Guardian 1 has completed?			
No post-school qualification <input type="checkbox"/>	Certificate I to IV (including trade certificate) <input type="checkbox"/>	Advanced diploma/diploma <input type="checkbox"/>	Bachelor degree or above <input type="checkbox"/>
PARENT / GUARDIAN / MOTHER			
Surname:		Title: (e.g. Mrs/Ms)	First name:
Address:			
Email		Date of Birth:: ____/____/____	
Home phone:		Work phone:	Mobile:
SMS messaging: (for emergency and reminder purposes) Yes <input type="checkbox"/> No <input type="checkbox"/>			
Government Requirement	Occupation:	What is the occupation group?	
Current Employer	(select from the enclosed list of parental occupation groups)		
Religion: (include rite)		Nationality: Ethnicity if not born in Australia:	
Country of birth: <input checked="" type="checkbox"/> Australia <input type="checkbox"/> Other (please specify):			
What is the highest year of primary or secondary school Parent B/Guardian 2 has completed? (Persons who have never attended secondary school, tick 'Year 9 or below'.)			
Year 9 or below <input type="checkbox"/>	Year 10 or equivalent <input type="checkbox"/>	Year 11 or equivalent <input type="checkbox"/>	Year 12 or equivalent <input type="checkbox"/>
What is the level of the highest qualification Parent B/Guardian 2 has completed?			
No post-school qualification <input type="checkbox"/>	Certificate I to IV (including trade certificate) <input type="checkbox"/>	Advanced diploma/diploma <input type="checkbox"/>	Bachelor degree or above <input type="checkbox"/>

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HOME CARE ARRANGEMENTS

<input type="checkbox"/> Living with immediate family	<input type="checkbox"/> Single Parent Circle Mother or Father	<input type="checkbox"/> Out of Home Care
<input type="checkbox"/> Carer/guardian	<input type="checkbox"/> Shared parenting, (Please provide Calendar)	
<input type="checkbox"/> Kinship care	<input type="checkbox"/> Step Family / Other (Please specify)	

FEE PAYER NOMINATION and CORRESPONDENCE DETAILS

The school requires families to nominate a Fee Payer:

Both Parents Mother Only Father Only Guardian or Other:

Nominate the preferred email address for Accounts & School Correspondence:

.....@.....

COURT ORDERS OR PARENTING ORDERS (if applicable)

Are there any current court orders or parenting orders relating to the student? Yes No

If yes, copies of these court orders/parenting orders (e.g. AVOs, Family Court/Federal Magistrates Court orders or other relevant court orders) must be provided.

Is there any other information you wish the school to be aware of?

Please note that the completion, signing and lodgement of this enrolment form is a pre-requisite for consideration of the enrolment of your child at the School, however it does not guarantee enrolment. The enrolment is formalised after the Enrolment Agreement is signed, following an offer for enrolment being made by the School. Please refer to the Terms and Conditions of the Enrolment Agreement for further details and explanation of the terms and conditions that will apply to enrolment at the School, once offered and accepted.

I/We agree to pay a \$40.00 (non-refundable) application fee upon accepting enrolment at Corpus Christi Primary School.

I/We are aware of the expectation to support the Stewardship Program at St Andrew's Parish Werribee.

FATHER/CARER/GUARDIAN SIGNATURE:		Date:
PRINT:		
MOTHER/CARER/GUARDIAN SIGNATURE:		Date:
PRINT		

SIGNATURE OF BOTH PARENTS ARE REQUIRED

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Corpus Christi Primary School

School Family Occupation Index: Parent Occupation Groups



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Please select the appropriate group from the following list.

Group N: Unemployed for more than 12 months

If you are not currently in paid work but **have had a job in the last 12 months**, or have retired in the last 12 months, please **use your last occupation** to select from the list. If you have not been in paid work for the last 12 months, enter 'N' into the 'occupation code' field on the enrolment form.

Occupation Group A: Senior management in large business organisations, government administration and defence and qualified professionals

Senior management in large business organisations

- Senior executive/manager/department head** in industry, commerce, media or other large organisations
- Business** (e.g. chief executive, managing director, company secretary, finance director, chief accountant, personnel/industrial relations manager, research and development manager)
- Media** (e.g. newspaper editor, film/television/radio/stage producer/director/manager)

Government administration

- Public service manager** (Section head or above) (e.g. regional director, hospital/health services/nurse administrator, school principal, faculty head/dean, library/museum/gallery director, research/facility manager, police/fire services administrator)
- Defence Forces commissioned officer**

Qualified professionals – generally have a degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems, identify, treat and advise on problems, teach others

- Health** (e.g. GP or specialist, registered nurse, dentist, pharmacist, optometrist, physiotherapist, chiropractor, veterinarian, psychologist, therapy professional, radiographer, podiatrist, dietician)
- Education** (e.g. school teacher, university lecturer, VET/special education/EAL/private teacher, education officer)
- Law** (e.g. judge, magistrate, barrister, coroner, solicitor, lawyer)
- Social welfare** (e.g. social/welfare/community worker, counsellor, minister of religion, economist, urban/regional planner, sociologist, librarian, records manager, archivist, interpreter/translator)
- Engineering** (e.g. architect, surveyor, chemical/civil/electrical/mechanical/mining/other engineer)
- Science** (e.g. scientist, geologist, meteorologist, metallurgist)
- Computing** (e.g. IT services manager, computer systems designer/administrator, software engineer, systems/applications programmer)
- Business** (e.g. management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer)
- Air/sea transport** (e.g. aircraft pilot, flight officer, flying instructor, air traffic controller, ship's captain/officer/pilot)

Occupation Group B: Other business owners/managers, arts/media/ sportspersons and associate professionals

Business owner/manager

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- Farm/business owner/manager** (e.g. crop and/or livestock farmer/farm manager, stock and station agent, building/construction, manufacturing, mining, wholesale, import/export, transport business manager, real estate business)
- Specialist manager** (e.g. works manager, engineering manager, sales/marketing manager, purchasing manager, supply/shipping manager, customer service manager, property manager, personnel, industrial relations)
- Financial services manager** (e.g. bank branch manager, finance/investment/insurance broker, credit/loans officer)
- Retail sales/services manager** (e.g. shop, post office, restaurant, real estate agency, travel agency, betting agency, petrol station, hotel/motel/caravan park, sports centre, theatre/cinema, gallery, car rental, car fleet, railway station)

Arts/media/sportspersons

- Artist/writer** (e.g. editor, journalist, author, media presenter, photographer, designer, illustrator, musician, actor, dancer, painter, potter, sculptor)
- Sports** (e.g. sportsman/woman, coach, trainer, sports official)

Associate professionals – generally have diploma/technical qualifications and provide support to managers and professionals

- Medical, science, building, engineering, computer** technician/associate professional
- Health/social welfare** (e.g. enrolled nurse, community health worker, paramedic/ambulance officer, massage therapist, welfare/parole officer, youth worker, dental hygienist/technician)
- Law** (e.g. police officer, government inspector, examiner or assessor, occupational/ environmental health officer, security advisor, private investigator, law clerk, court officer, bailiff)
- Business/administration** (e.g. recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/business manager, project manager/administrator, other managing supervisors)
- Defence Forces** (e.g. senior non-commissioned officer)
- Other** (e.g. library technician, museum/gallery technician, research assistant, proofreader)service staff

Tradesmen/women – generally have completed a four-year trade certificate, usually by apprenticeship. All tradesmen/women are included in this group.

- Trades** (e.g. electrician, plumber, welder, cabinet maker, carpenter, joiner, plasterer, tiler, stonemason, painter decorator, butcher, pastry cook, panel beater, fitter, toolmaker, aircraft engineer)

Clerks, skilled office, sales and service staff

- Clerk** (e.g. bookkeeper, bank clerk, PO clerk, statistical/actuarial clerk, accounts/claims/audit/ payroll clerk, personnel records clerk, registry/filing clerk, betting clerk, production recording clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk/despatcher, bond clerk, customs agent/clerk, customer inquiry/complaints/service clerk, hospital admissions clerk)
- Office** (e.g. secretary, personal assistant, desktop publishing operator, switchboard operator)
- Sales** (e.g. company sales representative (goods and services), auctioneer, insurance agent/assessor/loss adjuster, market researcher)
- Carer** (e.g. aged/disabled/refuge care worker, child care assistant, nanny)
- Service** (e.g. meter reader, parking inspector, postal delivery worker, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/gaming table supervisor)

Occupation Group D: Machine operators, hospitality staff, office assistants, labourers and related workers

Drivers, mobile plant, production/processing machinery and other machinery operators

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- Driver or mobile plant operator** (e.g. car, taxi, truck, bus, tram or train driver, courier/deliverer, forklift driver, street sweeper driver, garbage collector, bulldozer/loader/grader/excavator operator, farm/horticulture/forestry machinery operator)
- Production/processing machine operator** (e.g. engineering, chemical, petroleum, gas, water, sewerage, cement, plastics, rubber, textile, footwear, wood/paper, glass, clay, stone, concrete, production/processing machine operator)
- Machinery operator** (e.g. photographic developer/printer, industrial spray painter, boiler/air-conditioning/refrigeration plant, railway signals/points, crane/hoist/lift, bulk materials handling machinery)

Hospitality, office staff

- Sales staff** (e.g. sales assistant, motor vehicle/caravan/parts salesperson, checkout operator, cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff, street vendor, telemarketer, sales demonstrator, shelf stacker)
- Office staff** (e.g. typist, word processing/data entry/business machine operator, receptionist)
- Hospitality staff** (e.g. hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, fast food cook, usher, porter, housekeeper)
- Assistant/aide** (e.g. trades assistant, school/teacher's aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, home helper, salon assistant, animal attendant)

Labourers and related workers

- Defence Forces** (other ranks (below senior NCO) without trade qualification not included above)
- Agriculture, horticulture, forestry, fishing, mining worker** (e.g. farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand)
- Other worker** (e.g. labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor)

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Corpus Christi Primary School Photograph/Recording Permission Form



Dear Parent/Guardian

At certain times throughout the year, students may have the opportunity to be photographed or recorded/filmed by the school or its service providers for school publications, such as the school's newsletter or website and social media, or to promote the school in newspapers and other media.

Melbourne Archdiocese Catholic Schools Ltd (MACS) and the Catholic Education Commission of Victoria Ltd (CECV) may also wish to use student photographs/recordings in print and online promotional, marketing, media and educational materials.

We would like permission to use your child's photograph/recording for the above purposes. Please complete the permission form below and return it to the school as soon as possible. Thank you for your continued support.

NAME OF STUDENT	YEAR LEVEL
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I give permission for my child's:

- name
- photograph
- recording

to be published by the school on/in:

- the school website
- social media
- promotional materials
- newspapers and other media.
- I authorise MACS/the CECV to use the photograph/recording in material available free of charge to schools and education departments around Australia for MACS/the CECV's promotional, marketing, media and educational purposes.
- I give permission for a photograph/recording of my child to be used by the school/MACS/the CECV in the agreed publications without acknowledgment, remuneration or compensation.
- I understand and agree that if I do not wish to consent to my child's photograph/recording appearing in any or all of the publications above, or if I wish to withdraw this authorisation and consent, it is my responsibility to notify the school.

LICENSED UNDER NEALS: The photograph/recording may appear in material which will be available to schools and education departments around Australia under the National Educational Access Licence for Schools (NEALS), which is a licence between education departments of the various states and territories, allowing schools to use licensed material wholly and freely for educational purposes.

NAME OF PARENT / GUARDIAN / CARER (Please circle)	
Signature:	Date:
Print Name:	Date:
If the student is aged 15+, they may also sign	

Any permission and consent given may be withdrawn by the parent/guardian or student (if they are aged 15 or over) by notifying the school in advance of any photograph or recording being made.

Disclaimer: Personal information will be held, used and disclosed in accordance with the school's Privacy Collection Notice and Privacy Policy available on its website: <https://www.cwerrabee.catholic.edu.au/>

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CORPUS CHRISTI PRIMARY SCHOOL

VISION AND MISSION STATEMENT

We, at Corpus Christi, continue the Spirit-filled legacy of Mary Mackillop within our Catholic Learning Community. We recognise that we are an integral part of the St. Andrew's Parish of Werribee.

Inspired by the courage and tenacity of Mary Mackillop, we recognise that each of us is called to be a living part of the Body of Christ.

Therefore we:

- Live out in word and deed the *Gospel values* of justice, integrity, respect and dignity
- *Celebrate* our faith, scripture and tradition
- Provide contemporary learning for *all* members of our community
- Create an environment that *enables* each member of the community to find *greater meaning* in his/her life
- Foster a culture that *values* the *Pursuit of Excellence*.

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Our Parish Primary Schools



LITTLE RIVER ●

WYNDHAM VALE ●

Our Vision

To Be A Vibrant Catholic Community,
Nourished By Christ The River Of Life,
Celebrating The Diversity And Giftedness
Of All God's People . . .

Our Mission

To Live As An Interconnected And
Collaborative Community,
To Reach Out, Welcome And Value All,
Offering A Place Of Belonging
And Acceptance . . .

WERRIBEE NORTH ●

Our Values

ST ANDREW'S ● **Relationship:** nurturing an evolving relationship with God, connected in faith and love with others and with the whole of creation . . .

Community: creating a warm, inclusive community where all work together, all care for each other and where each person is welcomed, valued and respected . . .

Celebration: gathering to share our lives and to celebrate God's loving presence in sacraments and liturgy . . .

Learning: deepening our understanding and experience of God, our Christian tradition and our life, empowering and enabling us to grow to our fullest potential . . .

Outreach: living out the Gospel teachings by offering service to those in need in the Parish and the wider community . . .

WERRIBEE CENTRAL SOUTH ●

WERRIBEE SOUTH ●

Revised and Updated June 23, 2022

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