

# Our Little Friends Kindergarten

## ENROLMENT INFORMATION

Date: \_\_\_/\_\_\_/\_\_\_

To be placed on the centre waiting list please complete the following form and return it to the centre either by fax, post or individual delivery. Telephone enrolments are also available, please phone the centre during business hours on 02 9913 1064 to speak to one of our centre staff.

### Priority of Access

Children enrolled on the waiting list are placed in order of date application and by using the following priority of access guidelines

- **FIRST PRIORITY:** A child at risk of serious abuse or neglect.
- **SECOND PRIORITY:** A child of a single parent who satisfies, or of parents who both satisfy the work/training/study test under section 14 of the Family Assistance Act.
- **THIRD PRIORITY:** Any other child.

Within each category mentioned above the following children are to be given priority;  
Children in Aboriginal and Torres Strait Islander families;  
Children in families which include a disabled person;  
Children in families whose CCB percentage is 100%  
Children in families with a non-English speaking background;  
Children in socially isolated families;  
Children of single parents.

**NB:** the above list is not in any particular priority order and children may fall into more than one category.

*The above policy is followed when appropriate eg: when a service has a large waiting list and a number of parents are competing for a limited number of vacant places. There may be the possibility that families in the third priority category may need to vacate their place, should a child in a higher priority category need care.*

What is your families priority category (Please choose from the above list): \_\_\_\_\_

Child (1) Date of Birth: \_\_\_\_\_ First Name: \_\_\_\_\_ M / F  
Child (2) Date of Birth: \_\_\_\_\_ First Name: \_\_\_\_\_ M / F  
Surname: \_\_\_\_\_

Address: \_\_\_\_\_  
Post Code: \_\_\_\_\_

Mums Name: \_\_\_\_\_  
Telephone Number (H): \_\_\_\_\_ (W): \_\_\_\_\_

Dads Name: \_\_\_\_\_  
Telephone Number (H): \_\_\_\_\_ (W): \_\_\_\_\_

Date of care required from \_\_\_/\_\_\_/\_\_\_

Does your child have any individual requirements (e.g. special needs)? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
If yes, please list: \_\_\_\_\_

Care Requirements (please circle)

MONDAY    TUESDAY    WEDNESDAY    THURSDAY    FRIDAY

Parents/guardian signature: \_\_\_\_\_

Name of staff taking enrolment: \_\_\_\_\_

It is important to contact the kindergarten should family details, such as telephone numbers change. The director will contact families via telephone when a position becomes available to offer. Our comprehensive centre information booklet is available on request which has further details about out waiting list policy procedures.

Please view our website at [www.ourlittlefriends@bigpond.com.au](http://www.ourlittlefriends@bigpond.com.au) Email : ourlittlefriends@bigpond.com