

Department of Education
Preschool Eligibility and Waiting List
Form



List No:

Family Name: _____

Child's Given Name: _____

Child's Preferred Name: _____

Sex: Male / Female

Date of Birth: _____

Is your child of Aboriginal and/ or Torres Strait Islander Origin? Yes / No

Home Address: _____

Suburb _____ Postcode _____

Mother's / Carers Name: _____

Occupation: _____

Home telephone number: _____

Mobile telephone number: _____

Email address: _____

Medicare number: _____

Health Care Card Number: _____ exp: ____/____

Father's / Carers Name: _____

Occupation: _____

Home telephone number: _____

Mobile telephone number: _____

Email address: _____

Medicare number: _____

Health Care Card Number: _____ exp: ____/____

Emergency Contact Name: _____

Home telephone number: _____

Mobile telephone number: _____

Relationship to family: _____

ONLY FOR NON-AUSTRALIAN CITIZENS

If your child is not an Australian citizen, what is his or her residency status? _____

If your child is not a permanent or temporary visa holder, please provide the following information:

- Current Visa class: _____
- Current Visa sub-class _____
- Visa Expiry date: _____

Languages Spoken at home

Does your child speak a language other than English at home? Yes / No

If yes, what other languages does your child speak?

Main Language: _____

Other Languages: _____

Does your child have any specific needs? (eg. Disability, significant difficulty in learning or behaviour, or a known history of violence).

If yes, please describe: _____

Does your child have any allergies or medical conditions?

If yes, please describe: _____

Does your child currently attend another prior to school service? Yes / No

If yes, name of service: _____

**Will your child attend another prior to school service in addition to this Department of Education
Preschool? Yes / No**

If yes, name of service: _____

Name of school your child will attend in Kindergarten: _____

Bankstown South Infants Preschool offers all children preschool classes based on a five day/ fortnight.

Please indicate if you have a preference for days your child would attend preschool. **Please note this preference will be used as a guide and does not guarantee placement on these days.**

- Monday Tuesday and alternate Wednesdays
- Thursday Friday and alternate Wednesdays

NAMES OF OTHER CHILDREN RESIDING WITH YOUR CHILD (attach details of additional children to this form)

	Given Names	Family Name	Date of Birth	Sex	Name of School (if applicable)
1					
2					
3					
4					
5					
6					

Making False or misleading declarations for material gain is an offence under sections 25 and 25A of the Oaths Act 1900. I certify that the information given on these forms are correct

Signature of Parent / Carer: _____ Date: _____

The personal information provided in the Eligibility and Waiting List form is being obtained for the purposes of processing the child's application for enrolment in the preschool class. It will be used by the Department of Education for general student administration and communication purposes and other matters relating to the education and welfare of the child. This information is mandatory, if you do not provide all or any information it may delay or prevent the processing of this application for enrolment. This information will be stored securely. You may access or correct any personal information provided by contacting the school.

Office Use Only:

Date and Time received: ___/___/___ Time: _____

Birth Certificate or Identity Documents Sighted and Photocopied for File	Yes	No
Proof of Residence - 100 points of Id required. See attached sheet.	Yes	No
Immunisation Details Sighted and Photocopied for File (From Medicare)	Yes	No
Passport or Travel Documentation for Children who are not Australian Citizens Sighted and Photocopied for File	Yes	No
Citizenship/Visa Documentation for Parents if Born Overseas	Yes	No
Child's Aboriginality and/or Torres Strait Islander Status Confirmed	Yes	No

Year to attend preschool _____

Signed by Staff: _____ Date: _____

Residential address check form

*Up to three months old

Documents showing the full name of the child's parent	Points
1. Only one of (i.e. no additional points for additional documents) <ul style="list-style-type: none"> 1.1. Council rates notice 1.2. Lease agreement through a registered real estate agent for a period of at least 6 months or rental board bond receipt 1.3. Exchanged contract of sale with settlement to occur within the applicable school year 	40
2. Any of the following <ul style="list-style-type: none"> 2.1. Private rental agreement for a period of at least 6 months 2.2. Centrelink payment statement showing home address 2.3. Electoral roll statement 	20 each
3. Any of the following documents <ul style="list-style-type: none"> 3.1. Electricity or gas bill showing the service address* 3.2. Water bill showing the service address* 3.3. Telephone or internet bill showing the service address* 3.4. Drivers licence or government issued ID showing home address* 3.5. Home building or home contents insurance showing the service address 3.6. Motor vehicle registration or compulsory third party insurance policy showing home address 3.7. Statutory declaration stating the child's residential address, how long they have lived there, and any supporting information or documentation of this. 	15 each

These documents are a requirement from the Department of Education and we are unable to accept this waiting list form without them.