



Waiting List Number.

Preschool waiting list application form

Department preschools enrol children for <u>one year only,</u> the year before they start school. Children can enrol if they turn four years of age before 31 July that year and <u>will attend school the following year.</u>

A waiting list application form will only be accepted with a birth certificate.

A.	A. Child's details						
	Childs Given Name:						
	Date of Birth:						
	Home Address:						
	Is your child of Aboriginality or Torres Strait Islander origin? Please circle Yes / No						
	Residency Details: What is your child's residency status? □ Australian Citizen						
	 Permanent Resident or Temporary Visa Holder (Current Visa Sub Class): Expiry Date: 						
	A child born in Australia is only automatically an Australian citizen if at least one parent was an Australian Citizen or Permanent Resident when the child was born.						
	Languages Spoken at Home: Does your child speak a language other than English at home? Please circle Yes / No						
	If yes, what language (s) other than English are spoken at home by your child? Main languageOther language						
	Enrolment information can be provided in other languages if required.						
	Child's Additional Learning and Support Needs: Does your child have any additional needs? eg: disability, significant difficulty in learning / behaviour, or speech. If yes please give details and attach any reports available.						
	Is your child toilet trained? It is advisable to start now.						
	Is your child seeking help at additional services, eg: (Speech, OT, Physio)						
	If yes please give details and attach any reports available.						
	Child's Medical Details:						
	Does your child have any allergies or medical conditions? Yes / No						
	If yes please describe:						
	Office Use Only						
	Date Received:Year Applied for:_	Local Scho	ol:				
	Record of Evidence:		/N.L.				
	Child's identity (name & age, birth certificate, pa	. ,					
	Residential Address (rates notice, rental agreer In Area? Yes / No	nems, electricity accol	IIIIS) TES/INO				
	Children who are not Australian Citizens, passp	oort or travel document	tation sighted Yes /No				
	Country of issue:		5				

В.	Family Details:							
	Parent Carer's Name:							
	Occupation:	ful	I time/ part t	time- days	worked			
	Phone: Home	Work		Mobile				
	Parent Carer's Name:							
	Occupation:	ful	I time/ part t	time- days	worked			
	Phone: Home	Work		Mobile_				
	Email:							
C.	Other information							
		attending another childcar						
	Next year will your ch	ild attend another childcar	e service in	addition to	o this preschool?			
	If yes, name of servic	e:			<u> </u>			
	Name of school you	r child will attand Kindar	garton Unal	alo to proces	on application if this scation			
	is not filled in.	r child will attend Kinder	<u>yarteri </u> unai	oie to proce	ess application if this section			
	Names of your child's siblings (attach details of additional children to this form)							
	Given Names	Family Name	Date of Birth	Gender	Name of School if Possible			
D.	Bankstown South Infants Preschool offers all children preschool classes 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.							
	• .	nd alternate Wednesdays d alternate Wednesdays	Yes /No Yes /No		reference 2 nd Preference reference 2 nd Preference			
	This information is being of financial disadvantage. Do you have a Low Ir	y to Assessment for Prior collected to assess if the family ncome Health Care Card?	meets the crite	eria for prior				
	Health Care Card (not	medicare card)Yes / No Num	nber					

The personal information provided on the waiting list application 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. Whilst the provision of this information is voluntary, if you do not provide all of this 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.

Making false or misleading declarations for material gain is an offence under sections 25 and 25A of the oaths Act 1900.

I understand that my child must attend preschool in the first week of the school year on their allocated days or they may forfeit their spot. Extended leave for intrastate, interstate or overseas holidays during January/February may result in your child's spot being allocated to another student and they will be placed back on the waiting list.

I declare that the information provided in this application is, to the best of my knowledge accurate and complete. I am aware that if information I have given is false or misleading, any decision made as a result of this application may be changed.

Parent/ Carer Name:	•
Parent/ Carer Signature:	Date:
Office use:	
Place offered date:	
Accept /Decline :	
Other notes:	
	_
	_



Bankstown South Infants School

Bidjigal Clan of the Darug Nation

16 Stacey St, Bankstown NSW 2200

P: 9790 6176

W: bankstowsi-p.schools.nsw.gov.au | E: bankstowsi-p.school@det.nsw.edu.au

As part of the Department of Education's requirement to enrol your child at Bankstown South Infants School and Preschool the following documents must be supplied to the school at the time of submitting your application.

□ Child's birth certificate
 □ Child's proof of residency (if child or one or both parents born overseas)
 This can include – Child's Australian passport, Citizenship papers or Visa Documents.
 □ Child's immunisation history statement (printout from Medicare – blue books not accepted)
 □ Proof of address (100 points worth of documents must be supplied – see the table below)

Documents showing the full name of the child's parent	Points
Only one of (i.e no additional points for additional documents)	
Council rates notice	40
• Lease agreement through a registered real estate agent for a period of at least 6 months or rental board bond receipt	
Exchanged contract of sale with settlement t occur within the applicable school year	
Any of the following	
 Private rental agreement for a period of at least 6 months 	20 each
Centerlink payment statement showing home address	
Electoral roll statement	
Any of the following – current or no more than 3 months old	
 Electricity or gas bill showing the service address 	15 each
 Water bill showing the service address 	10 00011
 Telephone or internet bill showing the service address 	
 Drivers licence or government issued ID showing home address 	
 Motor vehicle registration or CTP insurance policy showing the home address 	
• Statutory declaration stating the child's residential address, how long they have lived	
there and any support information or documentation of this.	

Thank you for cooperation

Leyla Derbas Relieving Principal