Dubbo School of Distance Education

Preschool Enrolment Application
2016

Further information
Phone: 02 5804 7000
Fax: 02 6884 0777
Email: dubbo-d.school@det.nsw.edu.au
www.dubbo-d.schools.nsw.edu.au
Distance education preschool targets children who, because of geographic isolation, are unable to access any other children’s services. Geographically isolated children who would meet the distance criteria which applies to children of primary school age, may be eligible to enrol in a distance education preschool.

In assessing a preschool child’s eligibility for enrolment in distance education, principals will take into account the distance from the applicant’s home to any local children’s services, including community based preschools, mobile children’s services and/or long day care.

Children are eligible for enrolment at the distance education preschool from the beginning of the school year, if they turn four years of age on or before 31st July in that year. Children generally attend departmental preschool classes for 15 hours per week for one year only. In exceptional circumstances an additional year of enrolment may be considered, provided that the child is not within the compulsory years of schooling. Applications for enrolment extension under this provision must be referred to the Leader, Rural and Distance Education at PO Box 717, Bathurst, 2795 or rde@det.nsw.edu.au.

### Who is enrolling?

<table>
<thead>
<tr>
<th>Student’s family name: (Please Print)</th>
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<table>
<thead>
<tr>
<th>Given names:</th>
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<td></td>
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</table>

<table>
<thead>
<tr>
<th>Student’s Date of birth:</th>
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</table>

### Reason for Enrolment

Application for enrolment at Dubbo School of Distance Education can only be made for one of the following reasons.

The student: *(Tick one only ☐ below)*

- ☐ is **geographically isolated**
- ☐ other (please specify) ..........................................................

### Office use only

<table>
<thead>
<tr>
<th>Amount received $_________</th>
<th>☐ (cheque / money order / cash)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

A Department of Education and Communities “Application to Enrol in a NSW Government Preschool” must also be completed as part of this application process.
## Supervisor Information

As a condition of enrolment, the parent/carer must nominate a person who will perform the role of supervisor during the period of enrolment and that person must accept the responsibilities as outlined following in the “Supervisor’s Role” and “Supervisor’s Agreement” sections:

<table>
<thead>
<tr>
<th>Is the parent or carer the supervisor?</th>
<th>☐ Yes ☐ No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Dr ☐ Other</th>
<th>………………………………………</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Family name:</th>
<th>Given names:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>If not parent, what is the relationship to the student?</th>
</tr>
</thead>
</table>

### Postal Address for lessons

<table>
<thead>
<tr>
<th>Street &amp; No:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Town:</th>
<th>State:</th>
<th>Postcode:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Home Telephone:</th>
<th>Work Telephone :</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Mobile Phone:</th>
<th>Email:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Preferred contact during school hours:</th>
<th>_______________________________</th>
</tr>
</thead>
</table>

### Supervisor’s role

The role of the supervisor includes:

- supervising the student during schoolwork activities and ensuring all instructions are followed carefully in a safe working environment.
- supporting and encouraging the student through assistance with locating materials and resources needed for lessons, development of a timetable for work, provision of a suitable workplace and basic equipment
- monitoring the student’s completion of set tasks and the return of work to the distance education school
- interacting with the student as required in the learning activities
- interpreting and explaining to the student the spirit and intention of instructions or comments included in lesson materials or in messages from the distance education teacher
- providing feedback to the distance education teacher on the student’s responses to the lesson activities and on their performance and interest, including advice about illness or absences which have affected the student’s ability to complete set activities
- monitoring the student’s participation in phone, computer-based or teleconference lessons as appropriate.
Supervisor’s Agreement

Thank you for taking on the role of supervisor of a Dubbo School of Distance Education (DSODE) student. It is important that every student have an at-home supervisor who will give support and guidance. Secondary students up to the age of 17 years also require the regular presence of an adult who will provide supervision and support appropriate to the age and needs of the student.

Supervisors provide appropriate protection for the student in their learning environment and assistance with organisation of learning resources, on-task behaviour and management of schedules. The supervisor must take full responsibility for precautions and safety in all assigned practical work.

Below is an outline of the role and responsibilities of a supervisor. We ask that you read this information carefully and then complete, sign and date the accompanying form and return.

SUPervision – Conditions of Enrolment

The supervisor guarantees the following:

- that the home learning environment is safe and suitable for effective distance education provision
- the student will be appropriately supervised during schoolwork activities
- the student’s work in all subjects will be completed and returned weekly to the school
- the supervisor will be contactable by phone, email or voice mail
- be conducted under strict supervision, ensuring that they are the unaided work of the student
- textbooks, teaching materials (e.g. audio recordings, DVDs, videos), unmarked lesson booklets and library books that have been issued by DSODE will be returned when the student completes the course or leaves the school.

The supervisor agrees to:

- monitor the completion of set tasks and interact with the student as required in learning activities
- provide their signature on students’ work submitted to DSODE.
- interpret and explain instructions or comments in lesson materials
- provide assistance with locating necessary materials and resources
- develop a timetable with the student and/or teacher that provides for the required number of hours of study each week
- provide a suitable work/study area for the student
- ensure that the student satisfactorily participates in as prescribed by the course
- provide the student with audio playing and recording equipment if required
- provide advice about illness or absences which have affected the student’s ability to complete set activities

IMPORTANT

Not complying with the above conditions may lead to a review of the student’s enrolment. All enrolments are required to be reviewed at regular intervals. Supervisors of students enrolled under the medical category acknowledge that if the enrolment is required for more than one year, updated specialist medical certificates will need to be supplied annually. Refund of school deposit is dependent upon return of all outstanding school resources.
# Acknowledgement of Roles and responsibilities of Supervisor

*I certify that I have read and acknowledge the role and responsibilities that will be met as supervisor of the student.*

<table>
<thead>
<tr>
<th>Supervisor’s signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor’s Name</td>
<td>Relationship to student:</td>
</tr>
<tr>
<td>(print)</td>
<td></td>
</tr>
<tr>
<td>Student’s name (print)</td>
<td>Date:</td>
</tr>
</tbody>
</table>

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# Student Access to technology

<table>
<thead>
<tr>
<th>Student home phone No:</th>
<th>Student Mobile No:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor email</td>
<td></td>
</tr>
</tbody>
</table>

**Access to technology:**

- [ ] PC
- [ ] Macintosh
- [ ] Printer
- [ ] iPod
- [ ] DVD player
- [ ] USB drive
- [ ] iPad
- [ ] Smart phone (iPhone)

**Access to internet:**

- [ ] Reliable connection at home
- [ ] Connection in another setting

*Any other information to assist in knowing student’s access to technology?*
Authority to Publish, Photograph, Film and Record Student work

School publications provide a means of celebrating student achievement and sharing ideas. Publications such as the school magazine (Myall Mail), school newsletter, the website and social media pages, encourage a positive school image and a sense of belonging for students, who are often isolated from their peers.

For this reason we ask you to complete the following authority, so that any photographs, films, recordings or student work submitted (for example on field services or residential camps) can be published.

### Student authority

I (name) _______________________________ hereby authorise and permit the NSW Department of Education and Communities (DEC) through Dubbo School of Distance Education, its employees or agents to use my work, to photograph and/or make a vision/sound recording of me.

These resources may be published, communicated and distributed for educational purposes both in Australia and internationally and may be published in any form or format whether print, electronic, analogue or digital while these resources remain relevant.

I understand DEC, through Dubbo School of Distance Education, may make use of and exhibit this work and these photograph(s), vision/sound recording(s), incorporating my image, likeness and/or my voice in any media format as it sees appropriate and I understand these will be the absolute property of the NSW Department of Education and Communities throughout the world.

I understand that my participation is entirely voluntary and that no payment of any kind is involved.

I understand that any use of this material may identify me.

<table>
<thead>
<tr>
<th>Student’s name:</th>
<th>Date:</th>
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</thead>
<tbody>
<tr>
<td>Student’s signature:</td>
<td>In the presence of:</td>
</tr>
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</table>

### Parent/Carer Authority

I (name) _______________________________ hereby authorise and permit the NSW Department of Education and Communities (DEC) through Dubbo School of Distance Education, its employees or agents to use my child’s work, to photograph my child and/or make a vision/sound recording of my child.

These resources may be published, communicated and distributed for educational purposes both in Australia and internationally and may be published in any form or format whether print, electronic, analogue or digital while these resources remain relevant.

I understand DEC, through Dubbo School of Distance Education, may make use of and exhibit this work and these photograph(s), vision/sound recording(s), incorporating my child’s image, likeness and/or my voice in any media format as it sees appropriate and I understand these will be the absolute property of the NSW Department of Education and Communities throughout the world.

I understand that my participation by my child is entirely voluntary and that no payment of any kind is involved.

I understand that any use of this material may identify the child.

<table>
<thead>
<tr>
<th>Parent/carer’s name:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent/carer’s signature</td>
<td>In the presence of:</td>
</tr>
</tbody>
</table>
### Student’s Schooling

Indicate if you plan to enrol your child in another Preschool during the year.

<table>
<thead>
<tr>
<th>Name of Preschool:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposed date of entry:</td>
<td></td>
</tr>
<tr>
<td>Other relevant information:</td>
<td></td>
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</tbody>
</table>

Indicate the name of the school the student will attend in Kindergarten next year.

<table>
<thead>
<tr>
<th>Name of school:</th>
<th></th>
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<tbody>
<tr>
<td>Proposed date of entry:</td>
<td></td>
</tr>
<tr>
<td>Other relevant information:</td>
<td></td>
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</tbody>
</table>

List other family members already enrolled in a Distance Education Centre (including secondary)

<table>
<thead>
<tr>
<th>Student’s name</th>
<th>Name of centre</th>
<th>Year</th>
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<tbody>
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</table>

List other family members:

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
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</tbody>
</table>
Student Name: | Year: Preschool
---|---

### School Contributions for 2016

- **Preschool (per year)** | $100

### Student Deposit (Compulsory)

The deposit is refundable after the student has returned all outstanding resources and completed their enrolment at DSODE.

- Fulltime studying within Australia | $100
- Fulltime studying overseas | $200

### Overseas students (Compulsory)

- Postage $120 per term at the time of enrolment for the duration of the enrolment | $_______
- For all kits, texts and resources at the time of enrolment. This is a requirement of NSW DEC – see extract from DEC “Distance Education – Revised Enrolment Procedures 2013”

### Please pay now:

- **School contribution:**
- **Student deposit:**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td></td>
</tr>
</tbody>
</table>

Please make cheque or money order payable to: **Dubbo School of Distance Education**

### Return this page with...

- [ ] your cheque and enrolment application
- [ ] Please supply a copy of your child’s birth certificate and
- [ ] A copy of your child’s immunization records * (Please refer to information below)

The **Immunisation History*** will be one of the following:

- **i. An Immunisation History Statement** showing your child’s immunisations are up to date
  (if your child has a medical contraindication for a specific vaccine(s) a Medical Contraindication Form will also be required), or;
- **ii. A Medical Contraindication Form** if your child is unable to be immunised with any vaccines due to medical reasons, or;
- **iii. A Conscientious Objection Form** (or certified ACIR letter) if your child is unable to be immunised due to religious or philosophical reasons, or;
- **iv. An Immunisation History Form** where an immunisation provider has certified that your child is catching up their immunisations.

Immunisation History Statements are sent to each parent/guardian after their child turns 18 months and 4 years of age. You can obtain one at any time by contacting Medicare:

- By telephone on **1800 653 809**
- By email on acir@medicareaustralia.gov.au
- In person at your local Medicare office, Centrelink office or Child Support Service Centre.

**NB. Enrolments CANNOT be processed without the birth certificate.**
Application to enrol in a NSW Government preschool

Thank you for your interest in enrolling your child in a NSW Government preschool. This application form is for placement in the preschool only. It is to be completed in English. If you need an explanation of any of the questions or help in completing this application, please ask for assistance from the school staff. You are welcome to provide further information on an attached sheet.

The school will notify you of the results of your application. The information you have provided will be used by the school’s placement panel to assess your priority on the waiting list and then to enrol your child, if your application is accepted.

When you come to the school to enrol
please bring these documents with you:

- Proof of child’s residential address
  (eg original copies of council rates notice, residential lease, electricity accounts, statutory declaration etc)
- Birth certificate or identity documents
- Low Income Health Care Card
  (if applicable)
- Copies of any family law or other
  relevant court orders (if applicable).
- Immunisation history statement

In addition, if your child is a permanent or temporary resident but not an Australian citizen, you will need to provide:

- Passport or travel documents
- Current visa and previous visas
  (if applicable).

Temporary visa holders

Please note that only certain classes of temporary visa holders may enrol in a NSW Government preschool.

Information on temporary visa subclasses that are eligible to enrol is available on the Schedule of Visa Subclasses and Enrolment Conditions, found at http://www.detinternational.nsw.edu.au/schools/downloads/trp_schedvisas.pdf.

Priority for enrolment in NSW Department of Education and Communities preschools is given to Australian citizens and permanent residents, New Zealand citizens holding current New Zealand passports and their dependants, Norfolk Islanders, resident provisional visa holders and temporary humanitarian visa holders. Enrolment of children in these visa categories is subject to proof of identity and residency status as outlined in the Proof of Identity and Residency Status support document. Eligible children may enrol in NSW Department of Education and Communities preschools under the same conditions as Australian citizens and according to Enrolment of Children in NSW Department of Education and Communities Preschool Classes Procedures (https://detwww.det.nsw.edu.au/policies/student_admin/enrolment/enrolpol/preschool_proc.pdf).

Your privacy protected

The school and the NSW Department of Education and Communities are subject to the Privacy and Personal Information Protection Act 1998 (NSW) and the Health Records and Information Privacy Act 2002. The information you provide will be used to process your child’s application for enrolment, which may include a risk assessment.

It will only be used or disclosed for the following purposes:

- To assess the child’s priority for access to preschool
- General administration relating to the education and welfare of the child
- Communication with parents or carers
- To ensure the health, safety and welfare of children, staff and visitors to the school
- State and National reporting purposes
- For any other purpose required by law.

The information will be stored securely. You may access or correct any personal information by contacting the school. If you have a concern or complaint about the way your personal information has been collected, used, or disclosed, you should contact the school.

The health-related information collected is subject to the Health Records and Information Privacy Act 2002. It is being collected for the primary purpose of ensuring the health and safety of all students, staff and visitors to the school. It may be used and disclosed to medical practitioners, health workers, other government departments and/or schools for this primary purpose, or for other, related purposes.

Do parents have to answer the questions?

We are required by law to ensure the health and safety of students, staff and visitors on our premises. It is therefore necessary for you to answer all questions on this form except those about your occupation and education.

The information you provide will assist the school to communicate with you and to care for your child while at school. Should you choose to submit an incomplete form, processing your application may be delayed and the quality of our service to you may be affected.

Giving false or misleading information is a serious offence. In the event that statements made in this application later prove to be false or misleading, any decision made as a result of this application may be reversed.

Why have we asked for information about your occupation and education?

All Australian Education Ministers have agreed on National Goals for Schooling in the 21st Century. The National Goals specifically state that the achievement of students in schools should not be affected by discrimination based on sex, language, culture and ethnicity, religion or disability; or by differences arising from social and economic background or geographic location.

The goals also state that “the learning outcomes of educationally disadvantaged students [should] improve and, over time, match those of other students”.

To help us to make sure we are achieving this goal, all parents across Australia, no matter which school their child attends, are being asked to provide information about family background. The main purpose of collecting this information is to promote an education system which is fair for all Australian students regardless of their background.

We use the information to evaluate whether our policies are effective and to ensure that no group is experiencing undue disadvantage because of their economic or social background.

Providing information about your occupation and education is voluntary but your information will help us to ensure that all students are being well served by Australian schools.

The four groups listed on page “2” are used by the Australian Bureau of Statistics to classify occupations. Please choose the group that you think best describes you. If you have retired or stopped work in the past year please choose the group in which you used to work.

You will need to use this table to answer the questions on pages ‘4-5’.

Secure Internet Access and Email

Students are provided with an Internet and email account to enable learning opportunities in a protected and secure environment. Students must abide by the school’s policy when using the DEC Internet and email services.

Parents will need to inform the school in writing if they do not want their child to have access to the NSW DEC Internet and email facility.

Photographs at preschool or school

Taking photographs of children can constitute a collection of their personal information. Occasionally photographs are taken of individual children and classes at preschool.

If you do not wish your child to be photographed under any circumstances, please make sure you have specified this on page “8” of this form.
### Parent occupation groups

**Group 4**  
**Machine operators, hospitality staff, assistants, labourers and related workers**
- Drivers, mobile plant, production/processing machinery and other machinery operators
- Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]
- Office assistants, sales assistants and other assistants
- Office [typist, word processing/data entry/business machine operator, receptionist, office assistant]
- Sales [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, shelf stacker]
- Assistant/aid [trades’ assistant, school/teacher’s aide, dental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]
- Labourers and related workers
- Defence Forces ranks below senior NCO not included below
- Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer, wool/hide classer, farm hand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker, miner, seafarer/fishing hand]
- Other worker [labourer, factory hand, storeman, guard, cleaner, caretaker, laundry worker, trolley collector, car park attendant, crossing supervisor]

**Group 3**  
**Tradesmen/women, clerks and skilled office, sales and service staff**
- Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/women are included in this group
- Clerks [bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent, customer services clerk, admissions clerk]
- Skilled office, sales and service staff
- Office [secretary, personal assistant, desktop publishing operator, switchboard operator]
- Sales [company sales representative, auctioneer, insurance agent/assessor/loss adjuster, market researcher]
- Service [aged/disabled/refuge/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/supervisor]

**Group 2**  
**Other business managers, arts/media/sportspersons and associate professionals**
- Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business
- Specialist manager [finance/engineering/production/personnel/industrial relations/sales/marketing]
- Financial services manager [bank branch manager, finance/investment/insurance broker, credit/loans officer]
- Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]
- Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author, media presenter, photographer, designer, illustrator, proof reader, sportswoman/woman, coach, trainer, sports official]
- Associate professionals generally have diploma/technical qualifications and support managers and professionals
- Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]
- Defence Forces senior Non-Commissioned Officer

**Group 1**  
**Senior management in large business organisation, government administration and defence, and qualified professionals**
- Senior executive/manager/department head in industry, commerce, media or other large organisation
- Public service manager [section head or above], regional director, health/education/police/fire services administrator
- Other administrator [school principal, faculty head/dean, library/museum/gallery director, research facility director]
- Defence Forces Commissioned Officer
- Professionals generally have degree or higher qualifications
- designer, illustrator, proof reader, sportswoman/woman, coach, trainer, sports official
- Associate professionals generally have diploma/technical qualifications and support managers and professionals
- Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]
- Defence Forces senior Non-Commissioned Officer

**Please note**
- If the person is not currently in paid work but had a job or retired in the last 12 months, please use the person’s last occupation.
- If the person has not been in paid work in the last 12 months, please write ‘8’ in the box.
Child’s details

Family name

First given name

Second given name

Preferred first name

Sex (tick box below)

Date of birth

Address of child

Does this child have any brothers or sisters enrolled at a NSW Government school?

If yes, which school?

If yes, please provide the details of the most recently enrolled brother or sister

Office use only

School name

Student registration number

Roll Class (eg SMITH, 9R2)

Date of enrolment at this school?
**Family details**

This section is for the parents/carers with whom the child normally lives.

### Parent/Carer 1

*If applicable, copies of any relevant family law or other court orders must be provided.*

<table>
<thead>
<tr>
<th>Title (e.g. Mr/Ms/Mrs/Dr)</th>
<th>Sex (tick box below)</th>
<th>Relationship to child</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Family name</th>
</tr>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Occupation group (write 1, 2, 3, 4 or 8)</th>
<th>See page 2 for instructions.</th>
</tr>
</thead>
<tbody>
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<td></td>
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</tbody>
</table>

### School education

What is the highest level of schooling completed? For persons who never attended school, mark ‘Year 9’ or equivalent or below (mark one box only)

- [ ] Year 12 or equivalent
- [ ] Year 11 or equivalent
- [ ] Year 10 or equivalent
- [ ] Year 9 or equivalent or below

### Educational qualifications

What is the highest qualification completed?

- [ ] Bachelor degree or above
- [ ] Advanced diploma/diploma
- [ ] Certificate I to IV (inc. trade cert.)
- [ ] No non-school qualification

### Languages other than English spoken at home

Does this Parent/Carer speak a language other than English at home?

- [ ] No, English only
- [ ] Yes

If yes, what languages other than English are spoken at home?

Please write the exact language spoken – for example, Cantonese or Mandarin, not simply ‘Chinese’. Please do not write a nationality such as ‘Indian’. Please specify the actual language spoken eg Hindi or Punjabi.

<table>
<thead>
<tr>
<th>Main language other than English spoken at home</th>
</tr>
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<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Other languages spoken at home</th>
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<tbody>
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<td></td>
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</tbody>
</table>

Interpreters may be available during school interviews. Would an interpreter be required?

- [ ] Yes
- [ ] No
Family details

This section is for the parents/carers with whom the child normally lives.

### Parent/Carer 2

*If applicable, copies of any relevant family law or other court orders must be provided.*

<table>
<thead>
<tr>
<th>Title (eg Mr/Ms/Mrs/Dr)</th>
<th>Sex (tick box below)</th>
<th>Relationship to child</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td></td>
</tr>
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<td>Female</td>
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<tr>
<th>Family name</th>
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<th>Occupation</th>
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</table>

Occupation group (write 1, 2, 3, 4 or 8) See page 2 for instructions.

### School education

What is the highest level of schooling completed? For persons who never attended school, mark ‘Year 9’ or equivalent or below (mark one box only)

- [ ] Year 12 or equivalent
- [ ] Year 11 or equivalent
- [ ] Year 10 or equivalent
- [ ] Year 9 or equivalent or below

### Educational qualifications

What is the highest qualification completed?

- [ ] Bachelor degree or above
- [ ] Advanced diploma/diploma
- [ ] Certificate I to IV (inc. trade cert.)
- [ ] No non-school qualification

### Languages other than English spoken at home

Does this Parent/Carer speak a language other than English at home?

- [ ] No, English only
- [ ] Yes

If yes, what languages other than English are spoken at home?

Please write the exact language spoken – for example, Cantonese or Mandarin, not simply ‘Chinese’. Please do not write a nationality such as ‘Indian’. Please specify the actual language spoken eg Hindi or Punjabi.

Main language other than English spoken at home

Other languages spoken at home

Interpreters may be available during school interviews. Would an interpreter be required?

- [ ] Yes
- [ ] No
## Family details

### Contact details for parents/carers with whom the child normally lives

**Name to be used for all correspondence** (eg Mr and Mrs A. Black, Ms B. Green)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Relationship</th>
</tr>
</thead>
</table>

**Residential address** (eg 1 High Street, Sydney, NSW, 2000)

<table>
<thead>
<tr>
<th>Residential Address</th>
<th>Correspondence Address</th>
</tr>
</thead>
</table>

**Is this the residential address of the child to be enrolled?**

- [ ] Yes
- [ ] No

**Correspondence address** (If you have a correspondence address that is different to your residential address please write it here eg PO Box 51, Sydney, NSW, 2001)

<table>
<thead>
<tr>
<th>Correspondence Address</th>
<th>Email Address</th>
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</thead>
</table>

**Email address for correspondence**

<table>
<thead>
<tr>
<th>Email Address</th>
<th>Phone Number (Home)</th>
<th>Phone Number (Work or Mobile)</th>
</tr>
</thead>
</table>

**Should the school need to contact you, please specify, in order of preference, how you would like to be contacted**

<table>
<thead>
<tr>
<th>Contact Name</th>
<th>Phone Number (Home)</th>
<th>Phone Number (Work or Mobile)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Contact Name</th>
<th>Phone Number (Home)</th>
<th>Phone Number (Work or Mobile)</th>
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</thead>
</table>

### Other Parent/Carer contact details for parent/carer not living with this child

**Title** (eg Mr/Ms/Mrs/Dr)

<table>
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<tr>
<th>Title</th>
<th>Sex (Male/Female)</th>
<th>Relationship to child (eg mother, father)</th>
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</table>

**Family name**

<table>
<thead>
<tr>
<th>Family Name</th>
<th>Given Name</th>
<th>Phone Number (Home)</th>
<th>Phone Number (Work or Mobile)</th>
</tr>
</thead>
</table>

**Residential address** (eg 1 High Street, Sydney, NSW, 2000)

<table>
<thead>
<tr>
<th>Residential Address</th>
<th>Correspondence Address</th>
</tr>
</thead>
</table>

**Does the child sometimes reside at this address?**

- [ ] Yes
- [ ] No

**Correspondence address** (eg PO Box, Sydney, NSW, 2001)

<table>
<thead>
<tr>
<th>Correspondence Address</th>
<th>Email Address</th>
</tr>
</thead>
</table>

**Email address for correspondence**

<table>
<thead>
<tr>
<th>Email Address</th>
<th>Phone Number (Home)</th>
<th>Phone Number (Work or Mobile)</th>
</tr>
</thead>
</table>

*If applicable, copies of any relevant family law or other court orders must be provided.*
## Emergency contacts

If we cannot contact you, in the event of an emergency please provide contact details of at least two other contacts. Please nominate people who may be contacted in the event of an emergency when the parents cannot be contacted. Ideally, the contact person should be someone who lives in the neighbourhood of the school. Please ensure that you have discussed with the people listed on this page their willingness to be emergency contacts.

<table>
<thead>
<tr>
<th>Contact name 1</th>
<th>Address</th>
<th>Phone number (home or mobile)</th>
<th>Phone number (work or mobile)</th>
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<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Contact name 2</td>
<td>Address</td>
<td>Phone number (home or mobile)</td>
<td>Phone number (work or mobile)</td>
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</table>

## Child’s medical details

<table>
<thead>
<tr>
<th>Doctor’s name/ medical centre</th>
<th>Doctor’s or medical centre’s address (eg. 1 High Street, Sydney, NSW, 2000)</th>
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**Parent/Carer permission**

I give my **permission** for the school to seek information from the doctor/medical centre named above about how to manage any allergy or medical condition experienced by the child.  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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<table>
<thead>
<tr>
<th>Doctor’s phone number</th>
<th>Child’s Medicare number</th>
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</table>

Please refer to the Addendum - H. Student medical details and health conditions attached to this form.
Child's details

Country of birth

Languages other than English spoken at home

Does the child speak a language other than English at home?

No, English only

Yes

If yes, what languages other than English are spoken at home? Please write the exact language spoken – for example, Cantonese or Mandarin, not simply 'Chinese'. Please do not write a nationality such as 'Indian'. Please specify the actual language spoken eg Hindi or Punjabi.

Main language other than English spoken at home

Other languages spoken at home

Religion

If none, please write 'no religion'

Aboriginality

Is the child of Aboriginal or Torres Strait Islander origin?

No

Aboriginal

Torres Strait Islander

Both Aboriginal and Torres Strait Islander

Child's residency status

What is the child's residency status?

Australian citizen

New Zealand citizen

Norfolk Islander

Permanent resident

Temporary visa holder

If born overseas, on what date did the child arrive in Australia?

day

month

year

For Australian born citizens, if the child was living overseas for two or more years, on what date did the child return to Australia?

day

month

year

If the child is a permanent or temporary visa holder please provide the following information:

Current visa sub-class

Visa expiry date

Principal visa holder

Subordinate visa holder

Yes

No

Yes

No

Photographs at preschool or school

Occasionally photographs are taken of individual children or classes at preschool. Please mark one of the following:

Yes, I give permission

No, never photograph my child

Please ask whenever you intend to photograph my child

Previous Child Care Experience

What type of care did this child have in the year prior to enrolling at preschool?

Long day care

Family day care

Occasional care

Playgroup

Preschool

Other care eg parent, relative, other carer

Amount of formal care each week, prior to enrolling at preschool:

Up to 6 hours per week

Up to 12 hours per week

12 hours to fulltime each week

Name of preschool, long day care centre or other formal care service
### Child’s details

#### Children with additional needs

Is your child a young person with:

- [ ] autism
- [ ] behaviour disorders
- [ ] a hearing impairment
- [ ] an intellectual disability
- [ ] a language disorder
- [ ] a vision impairment
- [ ] a physical disability
- [ ] acquired brain injury
- [ ] Other (please specify)

Legislation and department policy recognise that ‘accommodations and/or learning adjustments’ may be required for children with additional needs.

Is there anything that you do or modify at home that may help us at preschool to meet your child’s additional needs?

- [ ] signing
- [ ] access to technology
- [ ] modifications to equipment, furniture and learning spaces
- [ ] none required
- [ ] Other (please specify)

What may be required for your child in this preschool?

- [ ] Braille
- [ ] personal carer support
- [ ] none required
- [ ] Other (please specify)

#### Special circumstances and history relevant to risk assessment

The NSW Department of Education and Communities has a responsibility to assess and manage any risk of harm to its staff and students. This application gives you the opportunity to provide the preschool with information that will help facilitate the smooth transition of children into the specific preschool setting.

Are there any special circumstances about the child seeking to be enrolled that the preschool should know prior to enrolment? (eg living apart from parental supervision, subject of a court order, out of home care arranged by the state, history of self harming or violence towards other children)

- [ ] Yes
- [ ] No

If yes, please provide a brief description of the circumstances

#### Information relating to assessment for priority placement

This information is being collected to assess if the family meets the criteria for priority placement on the basis of financial disadvantage.

Do you have a Low Income Health Care Card or are you receiving an Income Support Payment? (eg Newstart Allowance, Disability Support Pension from Centrelink or the Department of Veterans’ Affairs. This does not include Family Tax Benefit or Carer Allowance.)

- [ ] Yes
- [ ] No

If applicable, please provide Low Income Health Care Card number
### Collection of child from preschool

Regulation 160 (3)(b)(iii) of the Education and Care Services National Regulations 2011 states that details must be provided for a person who has been given permission by a parent or family member to collect the child from the education and care service.

**Authorisation**

I therefore authorise the following individuals whose names and details appear below to collect my child from the preschool if my child’s parent is unavailable.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone number</th>
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### Illness, accident and emergency treatment

Regulation 160 (3)(b)(iv) of the Education and Care Services National Regulations 2011 states that the enrolment record must include the name, address and contact details of any person who is authorised to consent to medical treatment of, or to authorise administration of medication, to the child.

This person:

a. has given written authorisation for the service to seek medical, dental or hospital treatment or ambulance service, and
b. has given written consent to the carrying out of appropriate medical, dental or hospital treatment, in the event that such action appears to be necessary because the child has been injured, or is ill, on the premises.

**Authorisation and Consent**

Regulation 161 (1) of the Education and Care Services National Regulations 2011 requires the following signed authorisations to be kept in the enrolment record:

a. To allow medical treatment to be sought for the child from a registered medical practitioner, hospital or ambulance service
b. Transportation of the child by an ambulance service

1. I authorise and consent for the nominated supervisor to seek medical or hospital treatment or an ambulance service
2. I authorise and consent to the medical treatment of the child
3. I authorise and consent to the transportation of the child in the event that such action appears to be necessary

Signature of authorised person/parent

Print name

Address

Phone number

Date

---

### Excursions or regular outings

I confirm I am authorised to authorise an educator to take the child outside the education and care service premises for planned excursions or regular outings.

Signature of authorised person/parent

Print name

Address

Phone number

Date

---

Please tick this box if no other person besides the child’s parents is authorised to collect the child.

A separate signed authority from parents is required for every excursion as outlined in Regulation 102.
In dealing with this application, it may be necessary for the preschool, or another part of the Department of Education and Communities, to look at documents held by previous care providers, health care professionals or other government agencies.

This information will be collected, used and stored consistent with the Privacy and Personal Information Protection Act 1998 and Health Records and Information Privacy Act 2002. The cooperation of the applicant in accessing such information, while not always necessary, is appreciated and will speed up the assessment of the application.

Acknowledgements

1. I acknowledge that the Department of Education and Communities may seek and gain access to relevant information about this child related to one or more of the questions in this application that is held by previous care providers, health care professionals or other government agencies.

2. I understand that the school may approach these bodies directly. The information they request may include information related to any of the questions I have answered in this application.

3. I understand that placement in a preschool does not mean that this child will automatically be enrolled in the following year in the school to which the preschool is attached. I understand that I will be required to complete an Application to enrol in a NSW Government school.

4. I understand that, consistent with Regulation 161(1)(a) of the Education and Care Services National Regulations 2011 that the approved provider, nominated supervisor or an educator may seek medical treatment, hospital or ambulance service for the child and transportation of the child by an ambulance service.

Declaration of accuracy

1. I declare that the information provided in this Application to Enrol is, to the best of my knowledge and belief, accurate and complete.

2. I recognise that, should statements in this application later prove to be false or misleading, any decision made as a result of this application may be reversed.

Signature of applicant

Print name

Date

day  month  year

Signature of second applicant (if applicable)

Print name

Date

day  month  year
Record of evidence

Original documents must be sighted and photocopied.

All children:

Child’s Identity (name and age eg birth certificate, passport etc)
Yes [ ] No [ ]

Residential address (eg rates notice, rental agreements, electricity accounts etc)
Evidence supplied [ ]
Yes [ ] No [ ]
In area? [ ]
Yes [ ] No [ ]

In addition, for children who are not Australian citizens, more information is required.

Passport or travel documentation no.
[ ]

Country of issue
[ ]

Current visa sub-class (if applicable)
[ ]

Previous visa sub-classes (if applicable)
[ ]

Other issues

Immunisation certificate/history statement sighted and photocopied
Yes [ ] No [ ] Complete [ ] Incomplete [ ]

Low Income Health Care Card sighted and photocopied
Yes [ ] No [ ]

Any family law, AVOs or other relevant court order (if applicable)
Yes [ ] No [ ]

For parent not living with child (p6)
Yes [ ] No [ ]

Principal’s checklist and certification

Special Circumstances and Child’s History assessed?
Yes [ ] No [ ]

Risk Assessment required?
Yes [ ] No [ ]

Risk Assessment conducted?
Yes [ ] No [ ]

Risk Management Plan and Resources in place?
Yes [ ] No [ ]

On the basis of the information provided on this form and gained from the required assessments, I [accept] or [decline] this application to enrol.

Signature of principal

Print name

Date
[ ] day [ ] month [ ] year

Enrolment Notes

Principal’s checklist and certification

Special Circumstances and Child’s History assessed?
Yes [ ] No [ ]

Risk Assessment required?
Yes [ ] No [ ]

Risk Assessment conducted?
Yes [ ] No [ ]

Risk Management Plan and Resources in place?
Yes [ ] No [ ]

On the basis of the information provided on this form and gained from the required assessments, I [accept] or [decline] this application to enrol.

Signature of principal

Print name

Date
[ ] day [ ] month [ ] year

Enrolment Notes
H. Student medical details and health conditions

It is essential you inform the school before your child is enrolled if he or she has any medical conditions. This must include any known allergies. You should also contact the school as soon as you are aware of any newly diagnosed allergies/other medical conditions or changes to an existing condition. This will assist the school to support the safety and wellbeing of your child and allow planning to occur to determine the best way to meet the individual health and support needs of your child. This is important information for your child’s safe participation at the school.

Note: Where the words ‘your child’ are used, they should be taken as a reference to the student seeking enrolment.

Student’s Medicare number

Doctor’s name/medical centre

Doctor’s address (eg 1 High Street, Sydney, NSW, 2000)

Doctor’s phone number (work)

Please provide the name, address and phone number of any other doctor or medical specialist who may currently be treating your child for any allergy or other medical condition you may list when completing Section H. Attach an additional page if required.

<table>
<thead>
<tr>
<th>Allergy / Medical Condition</th>
<th>Doctor’s Name</th>
<th>Address</th>
<th>Telephone</th>
</tr>
</thead>
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</table>

If your child has a documented plan to support any health or medical needs from a previous school or organisation (eg preschool, occasional care, etc) please provide it to the school as an attachment to this form.

ALLERGIES – THESE CAN INCLUDE ALLERGIES TO INSECT STINGS, DRUGS, LATEX, FOOD (EG NUTS, EGGS, PEANUTS) OR OTHER.

If your child has an allergy, please specify in the box below. For this allergy, answer the 11 questions that follow (where applicable). If there is insufficient space, please attach additional pages clearly marked ‘Section H’.

For any additional allergies your child has, please answer each of the 11 questions (where applicable) on a separate page for each allergy. Attach this additional information (clearly marked ‘Section H’) to the back of this form.

Allergy to:

1. Has a doctor diagnosed this allergy? □ Yes □ No

2. Is this a severe allergy (anaphylaxis)? □ Yes □ No

Anaphylaxis is a severe, potentially life-threatening, allergic reaction.

3. Has your child been hospitalised with a severe allergic reaction (anaphylaxis) or any other allergy? □ Yes □ No

4. If yes, which hospital?

5. Does your child have an ASCIA Action Plan for Anaphylaxis? □ Yes □ No

6. If yes, is this plan attached? □ Yes □ No

7. Has your child been prescribed an adrenaline autoinjector (ie EpiPen®/Anapen®)? □ Yes □ No

If your child has been prescribed an adrenaline autoinjector, you will need to provide the school with one (and renew prior to expiry date).
8. What is the expiry date of the adrenaline autoinjector that will be provided to the school?

If not known at the time of completing this form, the school will require this information on enrolment.

9. Does your child have an ASCIA Action Plan for Allergic Reactions?  Yes No

10. If yes, is this plan attached?  Yes No

Each time your child is prescribed a new adrenaline autoinjector the doctor should issue an updated ASCIA Action Plan for Anaphylaxis. It is important that a copy of any updated plan is provided to the school.

11. Please list any other medication prescribed for this allergy.

The school will require further details in relation to prescribed medication on enrolment.

Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form. Information is also available on the Department’s website.

MEDICAL CONDITIONS OTHER THAN ALLERGIES AND ANAPHYLAXIS (EG ASTHMA, SEVERE ASThma, DIABETES, EPILEPSY)

Please identify and provide details below of any other medical condition for which your child is being treated. (If more than one condition or insufficient space, please attach additional pages and include answers to all 7 questions that follow).

Medical condition: ____________________________

1. Has a doctor diagnosed this condition?  Yes No

2. Has your child been hospitalised with this condition?  Yes No

3. If yes, which hospital? ____________________________

4. Does your child have a documented action plan from a doctor (eg asthma action plan)?  Yes No

5. If yes, is this plan attached?  Yes No

6. Is your child taking prescribed medication for this condition?  Yes No

7. If yes, what is the prescribed medication?

The school will require further details in relation to prescribed medication on enrolment.

Parents of children who require their child to be administered prescribed medication at school must complete a written request. The school can provide you with a copy of a request form. Information is also available on the Department’s website.