



Waitlist Application for Friends' Early Learning

Child Information

Child's Family Name:

First Name:

Preferred Names:

Age:

Gender:

Date of Birth:

Country of Birth:

Primary Language:

Requested Booking

Room: Long Day Care

3 Year Old Kindergarten

Outside Kinder Care
(Before or After)

Outside School Hours
(Before or After)

Days: Monday

Tuesday

Wednesday

Thursday

Friday

Preferred Start Date: _____

Comments: _____

Managing Vacancies

In order to meet the Australian Government's aim of helping families who are most in need and supporting the safety and wellbeing of children at risk we ask that you indicate which of the following apply:

A child at risk of serious abuse or neglect.

A child of a sole parent who satisfies, or parents whom both satisfy, the activity test through paid employment.

Any other child.

To manage vacancies, Friends' Early Learning has a regularly updated and comprehensive waiting list. Families are placed on this waiting list in accordance with their eligibility and the date we receive their Waitlist Application. The waiting list also identifies required days, desired start date and any other relevant information. Parents are notified when a place that suits their needs becomes available. Special consideration is also given to families in need of additional days for already enrolled children or families requiring days for siblings of already enrolled children.

CONNECTIONS WITH SCHOOL

Does your child have any siblings enrolled at Friends' Early Learning: Yes No

Comments:

Does your child have any siblings enrolled elsewhere within The Friends' School: Yes No

Comments:

Has your child been accepted into The Friends' School Kindergarten program? Yes No

Comments:

Is either parent an employee of The Friends' School? Yes No

Comments:

FAMILY INFORMATION

Parent/ Guardian

Parent/ Guardian

Family Name:

Family Name:

First Name:

First Name:

Postal Address:

Postal Address:

Suburb:

Post Code:

Suburb:

Post Code:

Home Ph:

Mob:

Home Ph:

Mob:

Email:

Email:

AGREEMENT

Having read and understood the Priority of Access guidelines detailed above I/we wish to apply for placement of our child at Friends' Early Learning. I/we certify that the information provided on this form is accurate to the best of my/our knowledge. I/we understand that to maintain my/our place on the waiting list I/we need to contact Friends' Early Learning once every 12 weeks to confirm my/our continuing interest and that not doing so may result in the removal of my/our application from the waiting list.

Name of enrolling parent/guardian:

Signature:

Date:

Name of enrolling parent/guardian:

Signature:

Date: