

St Mary's Community Preschool Casino Inc.



Waiting List Application Form 2024

Date application received: _____

Childs' Name: _____ Date of Birth: _____

Child's home address: _____

Email: _____

Parent 1/Guardian Name: _____

Ph home: _____ Ph work: _____ Mobile: _____

Parent 2/Guardian Name: _____

Ph home: _____ Ph work: _____ Mobile: _____

To assist us in meeting our priority of access guidelines it is necessary for us to know if your child falls into any of the categories below. **Please circle which categories apply.**

- children who are at least 4 years old on or before the 31 July in that preschool year and not enrolled or registered at a school
- children who are at least 3 years old on or before 31 July in that preschool year and are:
 - children from low-income families
 - children with an Aboriginal and Torres Strait Islander background
 - children with disability and/or additional needs
- children who are at least 3 years old on or before 31 July in that preschool year with English language needs
- children who are at risk of significant harm (from a child protection perspective)
- Non-equity 3 year old (at least 3 years old on or before 31 July in that preschool year and not in any of the above categories)

Anticipated days your child will attend (**please circle**)

Monday/Tuesday or Thursday/Friday I am interested in a third day on Wednesday

Desired commencement: Year: _____ Approximate date: _____

Are there any special circumstances that make it urgent for your child to be enrolled?

What other early childhood services is your child currently enrolled at? Is your child currently receiving fee relief at this service? _____

Signature: _____ Date: _____