



**CANTERBURY COMMUNITY CHILD CARE  
CENTRE INC.  
PRE-SCHOOL KINDERGARTEN**

**APPLICATION FOR WAITING LIST**

The centre is a community based, non-profit making organisation which is managed by the parents of the children currently enrolled. Therefore it is necessary that parents play an active role in the centre.

DoE Start Strong Guidelines for Preschool Start Strong Free

Preschool is designed to support families with cost of living pressures through the delivery of free preschool for 600 hours in the two years before school.

Start Strong Guidelines for Preschool Services state that we are required to give equal priority of access to:

**PRIORITY OF ACCESS**

- Children who are at least 4 years old on or before 31 July in that school year and not enrolled or registered at a school
- Children who are at least 3 years old on or before 31 July in that school year and from a low income and/ or Aboriginal families
- Children with English language needs
- Children with a disability and/or additional needs
- Children who are at risk of significant harm

There is no order of priority assigned to the list of points above. Priority must be given to the groups outlined above before any other groups, including non-equity 3 year olds. The guidelines are intended to assist services with making enrolment decisions, in a way that seeks to allocate places to those in the greatest need. However, the particular community needs of the preschool will also be relevant. Services may consider the hours children are enrolled at other funded services when making enrolment decisions.

<b>Date applied (today):</b>	/	/
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<b>Child's Details</b>	Family Name
	Given Name(s)
	Date of Birth    /    /    Age when applied    yrs    mths
	Country of Birth/ Ethnic Background (optional)
	Home Address <span style="float: right;">Postcode</span>
	Phone Number
	Home Contact Person
<b>Parent 1 Details</b>	Name
	Address
	Phone (home) <span style="float: right;">(work)</span>
	Email address Date of Birth



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**Parent 2  
Details**

Name

Address

Phone (home)

(work)

Email address

Date of Birth

**Special  
Needs**

Does your child have a diagnosed disability or additional need?  Yes  No

Please select below:

- Asthma
- Anaphylaxis
- Food Allergy
- ADD/ADHD
- Hearing impairment
- Behavioural Concerns
- Autism Spectrum Disorder
- Visual impairment
- Epilepsy
- Other

Please give details

Do you have any concerns about your child's development?  Yes  No

if yes, please give details

Does your child currently receive any type of therapy or support?  Yes  No

if yes, please give details

**Other  
Details**

Child's Religion

Is English your child's second language?

Yes  No

Languages Spoken at Home

1. \_\_\_\_\_

2. \_\_\_\_\_

Is any parent born overseas?

Yes  No

Is your child from an Aboriginal and Torres Strait Islander background?

Yes  No



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Do you have a current Family Health Care Card issued by the Department of Human Services?  Yes  No

If yes, your family may be eligible for a fee reduction.

Expiry date of HCC: \_\_\_\_\_

Copy taken of HCC: \_\_\_\_\_

Any additional information? \_\_\_\_\_

**In order to process is application, a \$10.00 waiting list fee is required.**

**Please pay directly into the preschool account.**

**Account Name: CCCCC**

**BSB:062133**

**Account number:10090792**

**This fee is non- refundable and does not guarantee a position for your child at the centre.**

The preschool will be accessing Start Strong Community Preschool funding.

From 2023 fee relief will be available to all eligible families through the start strong for community preschools program.

The fee relief will be passed on to you as a reduction to your fees.

Upon accepting a position for your child you must complete a fee relief declaration form.

Families can only access fee relief at one early childhood education service at any one time for each child.

Monday and Tuesday OR Thursday and Friday.

Children can attend a third day

(Wednesday) for a fee of \$56.00for 4 year olds \$65.00 for 3 year olds

**PLEASE INDICATE PREFERRED ATTENDANCE**

Monday, Tuesday

Thursday, Friday

Monday, Tuesday, Wednesday

Wednesday, Thursday, Friday

Date from when enrolment is required: \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Waiting list fee received** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Confidentiality**

*Information requested in this form is required under the Children (Care and Protection) Act. All information collected will be treated as confidential under the CCCCC Privacy Policy. Copies of the CCCCC Privacy Policy can be provided on request.*



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