

**Collaroy Plateau Community Kindergarten Inc.**

ABN : 64 679 495 807

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**Application for Waiting List**

**To submit this application please print it out, complete the form and either:**

- **post to us;**
- **scan and email it to us;**
- **arrange a time to drop the form into us**

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: M/F \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Country of Birth: \_\_\_\_\_ Languages spoken: \_\_\_\_\_

Is your child from Aboriginal or Torres Strait Islander decent? Yes/No

Parent/Guardian's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email address: \_\_\_\_\_

Group Preference:    2 days -            Mon/Tues    or    Thu/Fri            No Preference  
                                 3 days -            Mon -Wed    or    Wed-Fri

Year to attend Collaroy Plateau Community Kindergarten: \_\_\_\_\_

Please note: Children generally must be turning 4 by 31<sup>st</sup> July to attend in that year. Children with birthdays after 31<sup>st</sup> July generally attend the following year (i.e. when they are already 4).

However, if vacancies remain after all 4 year old children have been offered a position at our kindergarten, positions will then be offered to those children turning 4 after 31<sup>st</sup> July but with a higher fee for children who are not from families with a Low Income Health Care Card, Pension Card or who are not from an Aboriginal and Torres Strait Islander background.

In order to comply with guidelines determined by the Department of Education, our funding body, and to ensure priority of enrolment on a needs basis, you are requested to supply the following information:

Please indicate your employment status by placing a cross in the appropriate circle:

Collaroy Plateau Community Kindergarten

Updated January 2020

**Two Parent Family**

**Sole parent family**

Both Parents working full-time

Sole parent working full-time

One parent full-time, one part-time

Sole parent working part-time

One parent full-time, one not working

Sole parent not working

One parent part-time, one not working

Both parents part-time

Both parents not working

As we provide some support for children with special needs, please state any special needs your child may have; including allergies, developmental delays, Non-English speaking background etc.

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Please list any support services your child is attending i.e. speech therapy, OT etc

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We receive additional funding, and can therefore offer fee relief, for children whose family holds a Low Income Health Care Card, Pension Card or who have Aboriginal or Torres Strait Islander background. Please indicate your family meets these criteria:

Low Income Health Care Card      YES / NO  
ATSI Heritage                              YES / NO

By filling out this form your child's name goes on to our waiting list. We recommend that you place your child/ren on waiting lists at other centres to provide you with a choice as there is no guarantee that you will be offered a place at our preschool.

I have read and agree with the terms and conditions of the Enrolment Policy      YES / NO

Please indicate how you heard about the kindergarten:

- Word of Mouth                       Drive past
- Website                                       Other (please indicate) \_\_\_\_\_

Comments: \_\_\_\_\_

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<p><b><u>Office use only</u></b></p> <p>Date of Application _____ For the year _____</p>
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