

Thank you for choosing a Lentara Uniting Care Children's Services Program. Please complete this form and return it to the contact details for your preferred service listed on the bottom of this page.

| Name of Service | Age group you wish to apply for (please circle) | | | | | Tick an individual service or number the service in order of your preference |
|---------------------------------------|---|-----|-----|-----|------------------|--|
| | 0-1 | 1-2 | 2-3 | 3-5 | 4yo kindergarten | |
| Cooke Court Child Care Kindergarten | | | | | | |
| Rupert Street Child Care Kindergarten | | | | | | |
| Merrilands Children's Centre | | | | | 4yo kindergarten | 3yo kindergarten |

| | | | | | |
|---|--------|---------|-----------|----------|--------|
| What days of the week do you need childcare (please circle) | Monday | Tuesday | Wednesday | Thursday | Friday |
| Date Child Care is required to commence from: | / / 20 | | | | |

INFORMATION ABOUT YOUR CHILD

Date Of Birth:
Attach a copy of the child's birth certificate

| | | |
|---|--|-----------------|
| Family Name: | Given Name: | Preferred Name: |
| Residential Address: | Suburb: | Postcode: |
| Is your child of Aboriginal or Torres Strait Islander descent? Aboriginal / Torres Strait / Both (Please Circle) | Are there any other professionals your child or family is currently working with i.e.: Enhanced Maternal Child Health, Family Support etc. Yes (name of agency) _____ No | |
| Does your child have any diagnosed or undiagnosed medical conditions or additional support needs? Yes (please provide details) _____ No | Have you utilised this early childhood/ kindergarten service in previous years? Yes (child's name and year) _____ No | |

PARENT/ CARE GIVER INFORMATION

| | | | |
|--|------------------------|---|------------------------|
| Parent/Care Giver 1 Full Name: | Relationship to child? | Parent/Care Giver Full Name: | Relationship to child? |
| Address If different from Child | | Address If different from Child | |
| Telephone/s: Home: _____ Work: _____ Mobile: _____ Email: _____ | | Telephone/s: Home: _____ Work: _____ Mobile: _____ Email: _____ | |
| Do you prefer correspondence via Post Email? If via email please provide your preferred email address for all communication _____ | | | |
| Parent/Guardian Signature _____ | | Date _____ | |

CONFIDENTIALITY AND PRIVACY The Early Childhood Service uses the enrolment form to collect personal information to comply with The Education and Care Services National Regulations and for the purpose of program enrolment (see privacy policy for collection statement and more details). The information provided will be shared with Lentara UnitingCare for operational purposes only (e.g. fee collection, Bad Debt management, program management, statistical information required by Department of Education and Early Childhood Development). The information will not be disclosed to any other party except as required by law.

| | | |
|---------------------------------------|--|--|
| Cooke Court Child Care Kindergarten | 22 Church St Richmond VIC 3121 | COOKECOURT@lentarauc.org.au |
| Rupert Street Child Care Kindergarten | 115-117 Rupert St Collingwood VIC 3066 | RUPERTST@lentarauc.org.au |
| Merrilands Children's Centre | 23 -25 Ryan St Reservoir VIC 3073 | merrilands.cc@kindergarten.vic.gov.au |

Possible models of delivery for Kindergarten at Merrilands Children's centre and Rupert Street Kindergarten only

We are seeking information from families in regards to possible models of service delivery.

Please note that this information will inform the decision making process however it does not guarantee that these models of service delivery will be available at the service of your preference at the time of enrolment.

Below you will find several examples of models of service delivery and time frames. Please number these in accordance with which model you would find most preferable for your family. There is a section for comments if you would care to share with us the rationale behind these preferences.

| Possible models of delivery for 15 hours of 4 year old group Kindergarten Program | Preference from 1 to 4 | Comment | | | | | |
|---|---|----------------|----------------|----------------|----------------|----------------|--|
| Example - Sessional Model 3 x 5 hour sessions child is in a group of up to 32 other children | <table border="1"> <tr> <td>5 Hours</td> <td>5 hours</td> <td>5 hours</td> </tr> </table> | 5 Hours | 5 hours | 5 hours | | | |
| 5 Hours | 5 hours | 5 hours | | | | | |
| Example - Rotational model option 1 Can be comprised of a number of sub groups of up to 10 children Child is allocated to a sub group of up to 9 other children Child would attend 3 x 5 hours session across the week on the same days Child is in a group of up to 39 other children over the 3 sessions | <table border="1"> <tr> <td>5 hours ABC</td> <td>5 hours BCD</td> <td>5 hours CDA</td> <td>5 hours DAB</td> </tr> </table> | 5 hours ABC | 5 hours BCD | 5 hours CDA | 5 hours DAB | | |
| 5 hours ABC | 5 hours BCD | 5 hours CDA | 5 hours DAB | | | | |
| Example - Rotational model option 2 Can be comprised of a number of sub groups of up to 10 children Child is allocated to a sub group of up to 9 other children Child would attend 3 x 5 hours session across the week on the same days Child is in a group of up to 49 other children over the 3 sessions | <table border="1"> <tr> <td>5 hours ABC</td> <td>5 hours BCD</td> <td>5 hours CDE</td> <td>5 hours DEA</td> <td>5 hours EAB</td> </tr> </table> | 5 hours ABC | 5 hours BCD | 5 hours CDE | 5 hours DEA | 5 hours EAB | |
| 5 hours ABC | 5 hours BCD | 5 hours CDE | 5 hours DEA | 5 hours EAB | | | |
| Example - Long day model 2 x 7.5 hour sessions child is in a group of up to 32 other children | <table border="1"> <tr> <td>7.5 hours</td> <td>7.5 hours</td> </tr> </table> | 7.5 hours | 7.5 hours | | | | |
| 7.5 hours | 7.5 hours | | | | | | |

| Possible models of delivery of 3 year old group Kindergarten Program | Preference from 1 to 3 | Comment | | |
|--|--|-----------|---------|--|
| Example – 1 x of 2.5 hour sessions | <table border="1"> <tr> <td>2.5 hours</td> </tr> </table> | 2.5 hours | | |
| 2.5 hours | | | | |
| Example - 2 x 2 hours sessions | <table border="1"> <tr> <td>2 hours</td> <td>2 hours</td> </tr> </table> | 2 hours | 2 hours | |
| 2 hours | 2 hours | | | |
| Example - 1 x 5 hour sessions | <table border="1"> <tr> <td>5 hours</td> </tr> </table> | 5 hours | | |
| 5 hours | | | | |

| Possible arrival and departure times | | | | | |
|--------------------------------------|------------------------|---------|--------------------------|------------------------|---------|
| Possible Arrival time | Preference form 1 to 4 | Comment | Possible departure times | Preference from 1 to 4 | Comment |
| 8.30 am | | | 4.00pm | | |
| 9.00 am | | | 4.30pm | | |
| 9.15 am | | | 4.45pm | | |
| 9.30 am | | | 5.00pm | | |

Office Use Only Checklist:

| Actions | Date | Actioned by: | Notes |
|-------------------------------|--|--------------|-------|
| Application received | | | |
| Application complete | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Information processed to data | | | |