

Thank you for choosing a Uniting Lentara Children's Services Program.

Please complete this form and scan & email or post it to your preferred service – see contact details on page 2.

Name of Service	Tick ✓	Age Group you wish to apply for (please circle)				
Cooke Court Child Care Centre		0-1	1-2	2-3	3-5	4yo kindergarten
Rupert Street Child Care & Kindergarten		0-1	1-2	2-3	3-5	

What days of the week do you need childcare? (please circle)	Monday	Tuesday	Wednesday	Thursday	Friday
Date child is required to commence from: ____ / ____ / ____					

CHILD'S DETAILS

Family Name:	Given Name:	Preferred Name:			
Date of Birth:	Attach a copy of the child's birth certificate			Male ✓	Female ✓
Address:		Suburb:	Postcode:		

Additional Information

Is your child of Aboriginal and/or Torres Strait Islander descent?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Are you a single parent family?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
<u>Single Parent Family:</u> Are you currently working, training or studying?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</i>
<u>Family with 2 Parents:</u> Are both parents currently working, training or studying?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</i>
Is your family currently being supported by a Case Manager from Family Services, Child Protection or another similar government agency?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</i>
Is your child currently in an Out of Home Care arrangement, including kinship care?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</i>
Does your child have a diagnosed need for additional support, or a disability?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</i>
Are you accessing, or on the waiting list for, any specialist services?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</i>
Is there a disabled person in your immediate family?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</i>
Is English your family's first language?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If No, what is your first language?</i>

PARENT / CARE GIVER INFORMATION

Parent / Care Giver 1:	Full Name:	Relationship to Child:			
	Mobile:	Home:		Work:	
	Email Address:	Address <i>If different:</i>			
Parent / Care Giver 2:	Full Name:	Relationship to Child:			
	Mobile:	Home:		Work:	
	Email Address:	Address <i>If different:</i>			

Our preferred method of correspondence is email. If you require correspondence by post, please tick box

Important: It is the family's responsibility to inform us of any changes to contact details, including email addresses.

Failure to do so may result in missing out on an offer of place or other important correspondence.

Please email changes to Cooke.Court@vt.uniting.org or RUPERTST@vt.uniting.org

I have completed all details on the application form and confirm that all information is true and correct.
I have attached a copy of my child's birth certificate.

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 Uniting Lentara 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 Centre	22 Church St. Richmond VIC 3121	Cooke.Court@vt.uniting.org
Rupert Street Child Care & Kindergarten	117 Rupert St. Collingwood VIC 3066	RUPERTST@vt.uniting.org