



ENROLMENT AND ORIENTATION POLICY

Mandatory – Quality Area 6

PURPOSE

Black Hill Kindergarten will be part of the Central Enrolments with City of Ballarat council in 2016 for 2017 enrolments.

<http://www.ballarat.vic.gov.au/pc/education/kindergartens.aspx>

This policy will outline:

- the criteria for enrolment at Black Hill Kindergarten
- the process to be followed when enrolling a child at Black Hill Kindergarten and the basis on which places within the programs will be allocated
- procedures for the orientation of new families and children into Black Hill Kindergarten

POLICY STATEMENT

1. VALUES

Black Hill Kindergarten is committed to:

- equal access for all children
- meeting the needs of the local community
- complying with DET funding requirements relating to the enrolment of children in government-funded kindergarten places
- maintaining confidentiality in relation to all information provided on enrolment forms
- ensuring all families are welcomed and receive an effective orientation into the service.

2. SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff and parents/guardians who wish to enrol or have already enrolled their child at Black Hill Kindergarten.

3. BACKGROUND AND LEGISLATION

Background

The *Education and Care Services National Regulations 2011* require approved services to have a policy and procedures in place in relation to enrolment and orientation (Regulation 168(2)(k)).

It is intended that all eligible children (refer to *Definitions*) will have access to one year of kindergarten before commencing school. However, a shortage of places in some areas can limit choices for parents/guardians. Where demand is higher than availability, a priority system for access must be determined by the Approved Provider in order to allocate the available places. The criteria used to determine the allocation of places will vary from service to service, but is generally based on a service's philosophy, values and beliefs, and the provisions of the *Equal Opportunity Act 2012*. The Victorian Government requires funded organisations to ensure that their policies and procedures promote equal opportunity for all children. Criteria for access and inclusion are outlined in the *Victorian kindergarten policy, procedures and funding criteria* (refer to *Sources*). Services participating in central enrolment schemes are required to comply with the enrolment procedures of that scheme.

Childcare services providing approved care (refer to *Definitions*) must abide by the *Family Assistance Legislation Amendment (Child Care Rebate) Act 2011* (refer to *Legislation and standards*) and the Commonwealth Government's *Priority for allocating places in child care services* (refer to *Sources*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *A New Tax System (Family Assistance) Act 1999*
- *Charter of Human Rights and Responsibilities Act 2006* (Vic), as amended 2011
- *Children, Youth and Families Act 2005* (Vic), as amended 2011
- *Child Wellbeing and Safety Act 2005* (Vic), as amended 2012
- *Disability Discrimination Act 1992* (Cth)
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulations 160, 161, 162, 177, 183
- *Equal Opportunity Act 2010* (Vic)
- *Family Assistance Legislation Amendment (Child Care Rebate) Act 2011*
- *National Quality Standard, Quality Area 6: Collaborative Partnerships with Families and Communities*
 - Standard 6.1: Respectful and supportive relationships with families are developed and maintained
 - Element 6.1.1: There is an effective enrolment and orientation process for families
- *Sex Discrimination Act 1984* (Cth)

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Approved care: Care given by a service provider that has been approved by the Family Assistance Office to receive Child Care Benefit payments on behalf of eligible families. Most long day care, family day care, before-and-after school care, vacation care, some occasional care and some in-home care childcare services are approved providers. Details are available at www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/

Child Care Benefit (CCB): A Commonwealth Government payment to help families who use either approved or registered childcare services. All eligible families can receive some Child Care Benefit. Details are available at www.familyassist.gov.au/payments/family-assistance-payments/child-care-benefit/

Children with additional needs: Children whose development or physical condition requires specialist support, or children who may need additional support due to language, cultural or economic circumstances (refer to *Inclusion and Equity Policy*).

Deferral: When a child does not attend in the year when they are eligible for a funded kindergarten place, or officially withdraws from a service prior to the end of Term 2. DET considers that this child has not accessed a year of funded kindergarten and is therefore eligible for DET funding in the following year.

Eligible child: A child who meets the criteria outlined in the *Victorian kindergarten policy, procedures and funding criteria*.

Enrolment application form: A form to apply for a place at the service.

Enrolment application fee: A payment to cover administrative costs associated with the processing of a child's enrolment application for a place in a program at the service.

Enrolment form: A form that collects contact details, and personal and medical information from parents/guardians about their child. This is completed after a place has been offered by the service and accepted by the applicant. The information on this form is placed on the child's enrolment record (see below) and is kept confidential by the service.

Enrolment record: Contains information on each child, as required under the National Regulations, including contact details, names of authorised nominees (refer to *Definitions*), names of persons authorised to consent to medical treatment or to authorise administration of medication, names of persons authorised to take the child outside the service, details of any court orders, personal and health information including specific healthcare needs, medical management plans and dietary restrictions etc. (Regulations 160, 161, 162). This information is kept confidential by the service.

Fees: A charge for a place within a program at the service.

SOURCES AND RELATED POLICIES

- *Child Care Benefit (Eligibility of Child Care Services for Approval and Continued Approval) Determination 2000*, included in the *Legislative Extracts*:
www.deewr.gov.au/EarlyChildhood/Programs/ChildCareforServices/Operation/Pages/InstructionSheets.aspx
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011*:
www.acecqa.gov.au/links-and-resources/national-quality-framework-resources/
- *Guide to the National Quality Standard*:
www.acecqa.gov.au/links-and-resources/national-quality-framework-resources/
- *Priority for allocating places in child care services*:
www.deewr.gov.au/Earlychildhood/Programs/ChildCareforServices/Operation/Pages/Priorityforallocatingplacesinchildcareservices.aspx
- *Victorian kindergarten policy, procedures and funding criteria*:
www.education.vic.gov.au/ecprofessionals/kindergarten/

Service policies

- *Acceptance and Refusal of Authorisations Policy*
- *Complaints and Grievances Policy*
- *Fees Policy*
- *Inclusion and Equity Policy*
- *Privacy and Confidentiality Policy*

PROCEDURES

The Approved Provider is responsible for:

- determining the criteria for priority of access to programs at Black Hill Kindergarten, based on funding requirements and the service's philosophy
- developing procedures that ensure all eligible families are aware of, and are able to access, an early childhood program, and considering any barriers to access that may exist
- complying with the *Inclusion and Equity Policy*
- appointing a person to be responsible for the enrolment process and the day-to-day implementation of this policy
- providing opportunities (in consultation with the Nominated Supervisor and educators) for interested families to attend the service during operational hours to observe the program and become familiar with the service prior to their child commencing in the program
- ensuring that enrolment forms (refer to *Definitions*) comply with the requirements of Regulations 160, 161, 162
- reviewing the enrolment form to determine its effectiveness in meeting the regulatory and management requirements of the service
- ensuring that enrolment records (refer to *Definitions*) are stored in a safe and secure place, and kept for three years after the last date on which the child was educated and cared for by the service (Regulation 183)
- ensuring that the orientation program and plans meet the individual needs of children and families, and comply with DET funding criteria
- reviewing the orientation processes for new families and children to ensure the objectives of this policy are met
- ensuring that parents/guardians of a child attending the service can enter the service premises at any time that the child is being educated and cared for, except where this may pose a risk to the safety of children or staff, or conflict with any duty of the Approved Provider, Nominated Supervisor or educators under the Law (Regulation 157).

The person responsible for the enrolment process is accountable for the following:

- providing enrolment application forms (refer to Attachment 2 – Sample Enrolment Application Form)
- collating enrolments
- maintaining a waiting list
- collecting, receipting and banking enrolment fees
- offering places in line with this policy and criteria for priority access, and providing relevant paperwork to families in accordance with this policy

- providing a monthly report to the Approved Provider regarding the status of enrolments and any difficulties encountered
- storing completed enrolment application forms in a lockable file (refer to *Privacy and Confidentiality Policy*) as soon as is practicable
- complying with the *Privacy and Confidentiality Policy* of the service
- providing a copy of the *Enrolment and Orientation Policy* with the enrolment application form.

The Nominated Supervisor, Certified Supervisor and other educators are responsible for:

- responding to enrolment enquiries on a day-to-day basis and referring people to the person responsible for the enrolment process, as required
- reviewing enrolment applications to identify children with additional needs (refer to the *Inclusion and Equity Policy*)
- responding to parent/guardian enquiries regarding their child's readiness for the program that they are considering enrolling their child in
- ensuring that enrolment forms are completed prior to the child's commencement at the service
- ensuring that parents/guardians of a child attending the service can enter the service premises at any time that the child is being educated and cared for, except where this may pose a risk to the safety of children or staff, or conflict with any duty of the Approved Provider, Nominated Supervisor or educators under the Law (Regulation 157)
- developing strategies to assist new families to:
 - feel welcomed into the service
 - become familiar with service policies and procedures
 - share information about their family beliefs, values and culture
 - share their understanding of their child's strengths, interests, abilities and needs
 - discuss the values and expectations they hold in relation to their child's learning
- discussing the individual child's needs with parents/guardians and developing an orientation program to assist them to settle into the program
- encouraging parents/guardians to:
 - stay with their child as long as required during the settling in period
 - make contact with educators and carers at the service, when required
- assisting parents/guardians to develop and maintain a routine for saying goodbye to their child
- providing comfort and reassurance to children who are showing signs of distress when separating from family members
- sharing information with parents/guardians regarding their child's progress with regard to settling in to the service
- discussing support services for children with parents/guardians, where required
- complying with the service's *Privacy and Confidentiality Policy* in relation to the collection and management of a child's enrolment information.

Parents/guardians are responsible for:

- reading and complying with this *Enrolment and Orientation Policy*
- completing enrolment forms prior to their child's commencement at the service
- ensuring that all required information is provided to the service
- updating information by notifying the service of any changes as they occur.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

ATTACHMENTS

- [Attachment 1](#): General enrolment procedures
- [Attachment 2](#): Sample Enrolment Application Form

ENDORSEMENT

AUTHORISATION

This policy was adopted by the Approved Provider of Black Hill Kindergarten **May 2016**

REVIEW DATE: MAY 2019

ATTACHMENT 1

General Enrolment procedures



- Enrolment applications will be accepted any time after the child has turned 2 years of age or before June of the year prior to their kindergarten year..
- Enrolment application forms are available from the service.
- A separate application form must be completed for each child, and for each proposed year of attendance at the service.
- To facilitate the inclusion of all children into the program, enrolment applications should clearly identify any additional or specific needs of the child.
- Parents/guardians of children applying for a second year of funded kindergarten do not need to submit an enrolment application form for the following year.
- A copy of the child's birth certificate and **immunisation records** must be submitted with all applications.
- Completed enrolment application forms are to be forwarded to the person responsible for the enrolment process at the service, at 602 Sherrard Street or via email to black.hill.kin@kindergarten.vic.gov.au
- Access to completed enrolment application forms will be restricted to the person responsible for the enrolment process, the Approved Provider, Nominated Supervisor and educators at the service, unless otherwise specified by the Approved Provider and Enrolment Officer.
- Applications will be entered on the waiting list using the eligibility and priority of access criteria.

1. Closing dates for enrolment applications

The closing dates for enrolment applications are:

- **First Friday of June** for children to attend the funded kindergarten program for the following year.

2. Procedure for a late application for enrolment

Applications received after the closing date will be considered after all other applicants have been offered a place, in line with the eligibility and priority of access criteria of Black Hill Kindergarten.

3. Allocation within groups

Where the service provides more than one funded kindergarten program places within the programs will be allocated by the service in line with the eligibility and priority of access criteria. Parent choice of either Group 1 or Group 2 are taken into consideration when placing children into groups.

4. Offer of places

- Places will be allocated to applicants in accordance with the eligibility and priority of access criteria of the service.
- Applicants who are successful will be notified in writing of a confirmed place.
- Parents/guardians who do not wish to accept the offer of a place, or intend to withdraw their enrolment, are requested to notify the Approved Provider, or the person responsible for managing the enrolment process at the service, within 2 weeks after they have received the letter of Acceptance..
- Second-round offers will be made **2 weeks** after first-round offers.
- An enrolment form and other relevant information will be provided after the place is accepted.

Note: Places will not be allocated to children until any substantial debt owed to the service by the family is paid, or a payment plan is agreed to between the family and the service (refer to *Fees Policy*).

5. Eligibility and priority of access criteria for the funded kindergarten program

The following children are eligible for attendance in the funded kindergarten program:

- children who have been granted approval to receive funding for a second year of kindergarten in accordance with the *Victorian kindergarten policy, procedures and funding criteria* (available at www.education.vic.gov.au/ecprofessionals/kindergarten/)
- children who were eligible to attend in the previous year, but:
 - deferred
 - withdrew from the service on or before the last day of Term 2 and have completed the *Kindergarten withdrawal and deferment form* (available from the service)
- children who turn four years of age by 30 April in the year they will attend kindergarten
- children turning six years of age at kindergarten who have been granted an exemption from school-entry age requirements by the regional office of DET (refer to *Victorian kindergarten policy, procedures and funding criteria*, available at www.education.vic.gov.au/ecprofessionals/kindergarten/)
- children who are younger than the eligible age, but whose parents/guardians have submitted an early age entry request for their child to attend school the following year. This written request is to be directed to the regional office of DET, or the non-government school the child will be attending. A copy of the approval must be attached to the kindergarten application. Parents/guardians should note that very few requests are approved by DET. If the child attends kindergarten early, but does not proceed to school in the following year, they will be unable to access a second year of kindergarten unless they are deemed eligible by DET for having recognised developmental needs
- three-year-old Aboriginal and Torres Strait Islander children, and children known to Child Protection may be eligible for the Early Start Kindergarten program. This scheme provides funding to enable children to attend a kindergarten program that is planned and delivered by an early childhood teacher for a specific number of hours. Details are available at www.education.vic.gov.au/ecsmanagement/careankinder/earllystart/

When demand exceeds availability, the Approved Provider will refer to the service's values, philosophy and *Inclusion and Equity Policy* to determine the priority of access. This will include:

- children who have received funding for a second year of kindergarten
- children who were eligible to attend in the previous year but deferred or withdrew from the service on or before the last day of Term 2.

If participating in a central enrolment scheme, the priority of access for that scheme will be implemented. Childcare services providing approved care (refer to *Definitions*) must abide by the *Family Assistance Legislation Amendment (Child Care Rebate) Act 2011* (refer to *Legislation and standards*) and the Commonwealth Government's *Priority for allocating places in child care services* (refer to *Sources*).

Families who want their children to return to a 4 year old kindergarten program and are willing to pay the Government funding will only be accepted if there is more on the waiting list.

6. Eligibility and access criteria for three-year-old children

The Approved Provider will determine eligibility and access criteria applicable to the service. Considerations will follow the criteria

1. children recommended by an educator for an additional year in the four-year-old program
2. siblings attending the service who have attended Black Hill Kindergarten
3. Siblings who have or are attending Black Hill Primary School
4. living closest to the kindergarten

ATTACHMENT 2

BLACK HILL KINDERGARTEN ENROLMENT APPLICATION FORM



Preschool year attending							
Child's Family Name							
Given Names							
Address							
				Postcode			
Date of birth				Male		Female	
Phone No (home)				Business			
Language Spoken at home							
Fee subsidy for Low Income Families. Please indicate if you have one of the following							
Health Care Card				Pensioner Concession			
Is the child of Australian Aboriginal or Torres Strait Islander origin? (tick one box only)							
Yes, Torres Strait Islander				Yes, both Aboriginal and Torres Strait Islander			
Yes, Aboriginal				No, not Aboriginal nor Torres Strait Islander			
Does your child have additional needs?			Yes		No		
If yes please specify							
(You are encouraged to discuss your child's needs with the teacher when your child's place is confirmed)							
If your child has additional needs are they registered with a specific agency?						Yes	No
Name of Agency							
Contact person				Phone			
Does your child have siblings who have attended Black Hill Kinder in the past?						Yes	No
Does your child have siblings who have or are attending Black Hill School?						Yes	No
Print name of Parent/Guardian							
Signature of Parent/Guardian							

How do I Enrol?

- Complete the above Enrolment Form
- Enclose a copy of the Birth Certificate or suitable evidence of the Child's birth and immunisation records
- Forward completed Enrolment Application form, with attachments to Black Hill Kindergarten Enrolments Officer, 602 Sherrard Street, Black Hill 3350
- Please notify the preschool of any changes to your address or other relevant information on 53327849

ATTACHMENT 2

<p>ENROLMENT FORM</p> <p>Certificate Supplied: NO <input type="checkbox"/></p> <p style="text-align: center;">Immunisation Certificate Supplied: YES <input type="checkbox"/> NO <input type="checkbox"/></p>	<p>Birth YES <input type="checkbox"/></p>
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CHILD'S DETAILS	
PRESCHOOL YEAR ATTENDING:	
SURNAME:	FIRST NAME:
SECOND NAME:	PREFERRED NAME:
SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTH DATE: (DD/MM/YYYY) / /
ADULT A DETAILS	ADULT B DETAILS
SEX: <input type="checkbox"/> F <input type="checkbox"/> M TITLE: MR/MS/MRS/MISS	SEX: <input type="checkbox"/> F <input type="checkbox"/> M TITLE: MR/MS/MRS/MISS
SURNAME	SURNAME
FIRST NAME	FIRST NAME
OCCUPATION	OCCUPATION
EMPLOYER	EMPLOYER
COUNTRY OF BIRTH	COUNTRY OF BIRTH
LANGUAGE OTHER THAN ENGLISH: YES NO	LANGUAGE OTHER THAN ENGLISH: YES NO
OTHER LANGUAGE:	OTHER LANGUAGE:
INTERPRETER REQUIRED	INTERPRETER REQUIRED
RELATIONSHIP OF ADULT A TO CHILD	RELATIONSHIP OF ADULT B TO CHILD
<input type="checkbox"/> Parent	<input type="checkbox"/> Parent
<input type="checkbox"/> Step-Parent	<input type="checkbox"/> Step-Parent
<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Foster Parent
<input type="checkbox"/> Relative	<input type="checkbox"/> Relative
<input type="checkbox"/> Friend	<input type="checkbox"/> Friend
THE CHILD LIVES WITH ADULT A:	THE CHILD LIVES WITH ADULT B:
<input type="checkbox"/> Always	<input type="checkbox"/> Always
<input type="checkbox"/> Mostly	<input type="checkbox"/> Mostly
<input type="checkbox"/> Balanced	<input type="checkbox"/> Balanced
<input type="checkbox"/> Occasionally	<input type="checkbox"/> Occasionally
<input type="checkbox"/> Never	<input type="checkbox"/> Never
ADULT A HOME ADDRESS	ADULT B HOME ADDRESS (Tick if same as Adult A) <input type="checkbox"/>

No & Street:		No & Street:	
Suburb		Suburb	
State	Postcode	State	Postcode

ADULT A POSTAL ADDRESS		ADULT B POSTAL ADDRESS (Tick if same as Adult A) <input type="checkbox"/>	
Street/Box No:		Street/Box No:	
Suburb		Suburb	
State	Postcode	State	Postcode
Send Correspondence addressed to:		Adult A	Adult B
		Both Adults	
ADULT A CONTACT INFORMATION		ADULT B CONTACT INFORMATION	
HOME PHONE No:		HOME PHONE No:	
MOBILE PHONE No:		MOBILE PHONE No:	
BUSINESS HOURS PHONE No:		BUSINESS HOURS PHONE No:	
Can we contact at work? Yes <input type="checkbox"/> No <input type="checkbox"/>		Can we contact at work? Yes <input type="checkbox"/> No <input type="checkbox"/>	
EMAIL:		EMAIL:	
Do you wish to receive newsletters and family statements via email? No <input type="checkbox"/> Yes <input type="checkbox"/>		Do you wish to receive newsletters and family statements via email? Yes <input type="checkbox"/> No <input type="checkbox"/>	
EMERGENCY CONTACT INFORMATION / AUTHORISATIONS			
Please list below the details of those people who you have authorised as emergency contacts for the child. This list may be amended at any time. In the event that the parents or guardians cannot be contacted the person/s listed below with authority will be contacted regarding collecting the child. In the event of an emergency involving the child, consent to medical treatment or the administration of medication, or to authorise an Educator to take the child outside of the Service premises. Please tick the appropriate boxes for each contact to confirm authorisation.			
Name		Name	
Address		Address	
Phone (H)	(W)	Phone (H)	(W)
Mobile		Mobile	
Relationship to child		Relationship to child	
<input type="checkbox"/> Authorised to Collect (Authorised Nominee)		<input type="checkbox"/> Authorised to Collect (Authorised Nominee)	
<input type="checkbox"/> Notification in the event of an Emergency		<input type="checkbox"/> Notification in the event of an Emergency	
<input type="checkbox"/> Authorised to consent to Medical Treatment		<input type="checkbox"/> Authorised to consent to Medical Treatment	
<input type="checkbox"/> Authorisation for the administration of medication		<input type="checkbox"/> Authorisation for the administration of medication	
<input type="checkbox"/> Authorised to authorise an Educator to take the child outside of the premises		<input type="checkbox"/> Authorised to authorise an Educator to take the child outside of the premises	
Name		Name	
Address		Address	
Phone (H)	(W)	Phone (H)	(W)
Mobile		Mobile	
Relationship to child		Relationship to child	
<input type="checkbox"/> Authorised to Collect (Authorised Nominee)		<input type="checkbox"/> Authorised to Collect (Authorised Nominee)	
<input type="checkbox"/> Notification in the event of an Emergency		<input type="checkbox"/> Notification in the event of an Emergency	
<input type="checkbox"/> Authorised to consent to Medical Treatment		<input type="checkbox"/> Authorised to consent to Medical Treatment	
<input type="checkbox"/> Authorisation for the administration of medication		<input type="checkbox"/> Authorisation for the administration of medication	
<input type="checkbox"/> Authorised to authorise an Educator to take the child outside of the premises		<input type="checkbox"/> Authorised to authorise an Educator to take the child outside of the premises	
DEMOGRAPHIC DETAILS OF CHILD			
◆ In which country was the child born? Australia Other – Please Specify:			
What is the residential status of the child? Permanent Temporary			
Basis of Australian Residency: Eligible for Passport Holds Passport Permanent Residency Visa			
Date of Arrival in Australia: (dd/mm/yyyy) / / Visa Expiry Date: / / Visa Subclass:			

Does the child speak English? Yes <input type="checkbox"/> No <input type="checkbox"/>	◆Does the child speak a language other than English at home? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify:
◆ Is the child of Aboriginal or Torres Strait Islander origin? (Please tick)	
Yes <input type="checkbox"/> No <input type="checkbox"/> Aboriginal Islander	Yes <input type="checkbox"/> Torres Strait Islander Yes <input type="checkbox"/> Aboriginal & Torres Strait
SIBLING DETAILS	
Does your child have sibling/s who have attended Black Hill Kinder in the past? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, please provide names:	
Does your child have sibling/s attending Black Hill Primary School? Yes <input type="checkbox"/> No <input type="checkbox"/> If so, please provide names:	
CHILD RESTRICTIONS DETAILS	
ACCESS RESTRICTIONS: IS THE CHILD AT RISK? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is there an Access Alert for the child? Yes <input type="checkbox"/> No <input type="checkbox"/> (If Yes, then complete the following questions)	
Access Type: Court Order Family Law Order Restraining Order Other	
*** Please provide a copy of any orders to the Kindergarten. ***	
Is there an Activity Alert for the child? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please describe the activity restriction:	
FEE SUBSIDY FOR LOW INCOME FAMILIES – PLEASE INDICATE IF YOU HAVE ONE OF	
Health Care Card	Pensioner Concession
INFORMATION FOR BODIES WHICH PROVIDE FUNDING TO THIS EDUCATION AND	
From time to time the Regulatory Authorities seek information on the characteristics of the children and their families who use an Education and Care Service. This is used in planning new policies, programs and resources to support services. To help provide accurate information please answer the following questions by ticking the appropriate box indicating Yes or No:	
Does the child have a developmental delay or disability including intellectual, sensory or physical impairment? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Does either Parent have a disability? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is the family a single parent family? Yes <input type="checkbox"/> No <input type="checkbox"/>	
CHILD'S HEALTH INFORMATION	
Registered Medical Practitioner/Medical Service Name	Phone
Registered Medical Practitioner/Medical Service Address	
*Maternal & Child Health (MCH) Centre	*Contact Name
Medicare No	*Ambulance Subscription No
	*Pension No
	*Healthcare No
Expiry Date / /	Expiry Date / /
*Is the child currently attending or has previously attended	
<input type="checkbox"/> Counsellor/Psychologist	<input type="checkbox"/> Occupational Therapy
<input type="checkbox"/> Speech Therapy	<input type="checkbox"/> Dietitian
<input type="checkbox"/> Paediatrician	<input type="checkbox"/> Specialist
<input type="checkbox"/> Other	
If yes, please provide details:	
MEDICAL CONDITIONS DETAILS	
Does the child suffer impairments in any of the following areas:	
Hearing <input type="checkbox"/>	Vision <input type="checkbox"/>
Asthma <input type="checkbox"/>	Speech <input type="checkbox"/>
Mobility <input type="checkbox"/>	
ASTHMA MEDICAL CONDITION DETAILS (Answer the following ONLY if the child suffers from Asthma)	
Please indicate if your child suffers from any of the following symptoms: (Please tick all applicable)	
Coughing <input type="checkbox"/>	Wheezing <input type="checkbox"/>
Difficulty Breathing <input type="checkbox"/>	Exhibits symptoms after exertion <input type="checkbox"/>
Tight Chest <input type="checkbox"/>	
Does the child take medication for asthma? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes please provide an Asthma Management Plan to the Kindergarten	
ALLERGIES e.g. Anaphyllaxis	

Does the child have any allergies? If Yes, please specify: e.g. Nuts, shellfish, penicillin:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the child require an EpiPen? If Yes please provide the kindergarten with a current Anaphylaxis Action Plan from your doctor	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name and dosage of other medication taken for allergies: e.g Claratyne	
Is the medication taken as a preventative or in response to symptoms? Response	Preventative

DIETARY RESTRICTIONS	
Does the child have any dietary restrictions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes , please provide details of any dietary restriction:	
If the service is aware that the child has a specific healthcare need, allergy or other relevant medical condition as identified above, has a copy of the services's Medical conditions policy been provided to the parent or guardian of the child?	
Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
Has a communications plan been developed to ensure that (a) relevant staff members and volunteers are informed about the medical conditions policy, the medical management plan and risk minimisation plan for the child and (b) the child's parent can communicate any changes to the medical management plan and risk minimisation plan for the child.	
Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
CHILD'S IMMUNISATION STATUS	
Has the child been immunised?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes , provide the details by selecting one of the options below:	
<input type="checkbox"/> Attaching a copy of the Immunisation Record from the Child Health Record OR <input type="checkbox"/> Attaching a copy of the Immunisation Record printout from local government OR <input type="checkbox"/> Attaching the Child History Statement from the Australian Childhood Immunisation Register OR <input type="checkbox"/> Providing the Child Health record to the Education and Care Service to determine their immunisation status (ACIR – Contact: 1800 663 809 or www.humanservices.gov.au)	
<i>Child Health Record means a record that documents a child's health and development assessments and immunisations.</i>	
Immunisation Record (from the Child Health Record) sighted by	
Name:	Position: Date:
If no , provide a letter from a registered medical practitioner stating the parent/guardian is a conscientious objector to immunisation.	
<i>In some cases when there is an outbreak of a vaccine preventable disease, unimmunised children will be excluded from the Education and Care Service as per the period of exclusion of contacts recommended by the National Health and Medical research Council. The exclusion periods table can be found at http://ideas.health.vic.gov.au/school-exclusion-table.asp</i>	
OTHER MEDICAL CONDITIONS	
Does the child have any other medical conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes , please specify, including symptoms:	
Does the child take medication for the above medical condition?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name and dosage of medication taken:	
AUTHORISATION AND DECLARATION	
I,	
<i>(Print Full Name)</i>	
A person with parental responsibility of the child referred to in this enrolment form	
<ul style="list-style-type: none"> • authorise the Approved Provider, Nominated Supervisor, or an educator to seek <ul style="list-style-type: none"> ○ medical treatment for the child from a registered medical practitioner, hospital or ambulance service; and ○ transportation of the child by an ambulance service; and ○ if relevant, an authorisation given under regulation 102 for the Education and Care Service to take the child on regular outings • agree that I am responsible for any expenses incurred during a medical emergency in relation to the child; • agree to collect or make arrangements for the collection of the child if he or she becomes unwell; • understand that in an emergency situation or where evacuation is necessary that the child may need to leave the Education and Care Service under the direction and supervision of the approved provider, nominated supervisor or educator; • have read and understood the Education and Care Service's policies including the "Payment of Fees"; • Declare that the information in this enrolment form is true and correct and undertake to immediately inform the Education and Care Service in the event of any change to this information. 	
.....
Signature of person with parental responsibility of the child	Date

How do I enrol?

- ✓ Complete the above Enrolment form
- ✓ Enclose a copy of the Birth Certificate or suitable evidence of the Child's birth
- ✓ Forward completed Enrolment Application Form, with attachments to Black Hill Kindergarten Enrolments officer, 602 Sherrard Street, Black Hill 3350
- ✓ Please notify the kindergarten of any changes to your address or other relevant information on 5332 7849
- ✓ Enclose a copy of your child's immunisation history

Last updated 27th July 2015

