



Name of student _____

Date of Birth _____

INTEGRATED SERVICES ENROLMENT FORM

For services offering preschool and long day care

Please complete the details on this form to enrol your child in the preschool program (for eligible children according to the Department for Education and Child Development (DECD) Preschool Enrolment Policy) or the long day care service.

- If your child is not yet eligible to be enrolled in the preschool program, please let the director/principal know if you wish to place your child's name on the waiting list to attend preschool at this centre when she/he is eligible. The number of vacancies available in the preschool program depends on the preschool's physical capacity and the number of children leaving to go to school and therefore will vary at each intake.
- You will be notified if a preschool place is available prior to your child's anticipated commencement date.

Indicates information required to process Child Care Benefit claims for children enrolled in the long day care service.

INFORMATION PRIVACY STATEMENT

The Department for Education and Child Development (DECD) is committed to respecting the confidentiality of information provided by children/students and parents, for example, information requested on child/student enrolment forms.

The information in this form is requested to enable DECD to:

- undertake administration and care responsibilities including maintaining emergency contact information
- communicate with you about important matters
- provide first aid and plan for child/student health support requirements
- provide all information required for resource entitlements
- collect necessary statistical information and undertake analysis of the composition and performance of the child/student population
- meet reporting requirements, including to other government authorities and funding agencies.

If organisations are contracted on behalf of DECD to undertake tasks that require access to enrolment data, the contract(s) between DECD and those organisations will include strict confidentiality and disposal provisions.

The Education and Care Services National Regulations require enrolment records to include the information marked with an asterisk (*) for each child. Although some items on the enrolment form are not mandatory to complete under the national regulations, provision of this information will be beneficial to your child's school/preschool for planning and resourcing decisions.

The information provided in enrolment forms is stored securely in local school/preschool and DECD databases. Information from your enrolment form may be transferred electronically from one site to another as your child moves locations between levels of education. Any such transferred information will be updated by information provided on the current enrolment form. While your child is enrolled in a DECD site, other information will be gathered relating to your child's education and wellbeing, for example, records of learning progress, absences from preschool, behaviour, health and social development reports, observations and assessments. The management of this information is governed by Australian, State and DECD policies to ensure the information is used only for the purposes stated above and is secure, private and confidential. Only unidentifiable data is reported to the Commonwealth and DECD may also provide de-identified student information for research, where appropriate, based on DECD operating principles and ethics guidelines. The disclosure of personal information held by Government is regulated by the information privacy principles (see http://dpc.sa.gov.au/sites/default/files/pubimages/Circulars/PC012_Privacy_0.pdf). Unless required to do so by a law of the State or Commonwealth, as permitted by the information privacy principles or in accordance with the Information Sharing Guidelines (see below) DECD will not otherwise disclose the information to others without your consent.

INFORMATION SHARING STATEMENT

There will be occasions where sharing information with others outside DECD will be important to your child's educational progress, safety or wellbeing. In these circumstances, DECD follows the SA Government's *Information Sharing: Guidelines for promoting the safety and wellbeing of children, young people and families (ISG)* www.gcyp.sa.gov.au. Under the ISG your consent for the sharing of personal information about your child will be sought and respected in all situations unless:

- it is unsafe / impossible to gain consent or consent has been refused *and*
- without information being shared, a child or children will be at increased risk of serious harm.

The aim of information sharing under the ISG is to protect and promote the safety and wellbeing of children, young people and their families. This site works with parents/guardians and other agencies/services to achieve that aim. Parents/guardians are strongly encouraged to share all information relevant to their child's capacity to enjoy and benefit from education:

- by using the 'any other information' section of this form, and/or
- in discussion with staff at the time of enrolment, and/or
- in discussion with staff at any time in the future.

Has the person conducting the interview explained the Information Privacy Statement and Information Sharing Statement? Parent/Guardian signature

Refer to the occupation groups listed below when completing the questions on pages 5 and 6.

Group 4 Other Occupations	Group 3 Trades and advanced/ intermediate clerical, sales and service staff	Group 2 Other business managers, arts/media/sportspersons and associate professionals	Group 1 Senior management in large business organisation, government administration and defence, and qualified professionals
<p>Drivers mobile plant, production/processing machinery other machinery operators.</p> <p>Hospitality staff hotel service supervisor receptionist waiter bar attendant kitchenhand porter housekeeper</p> <p>Office assistants typist word processing data entry business machine operator receptionist office assistant</p> <p>Sales assistants sales assistant motor vehicle/caravan/parts salesperson checkout operator cashier bus/train conductor ticket seller service station attendant car rental desk staff street vendor telemarketer shelf stacker</p> <p>Assistant/aide trades' assistant school/teacher's aide dental assistant veterinary nurse nursing assistant museum/gallery attendant usher home helper salon assistant animal attendant</p> <p>Labourers and related workers</p> <p>Defence Forces other ranks below senior NCO not included above</p> <p>Agriculture, horticulture, forestry, fishing, mining worker farm overseer shearer, wool/hide classer farm hand horse trainer nurseryman greenkeeper gardener tree surgeon forestry/logging worker miner seafarer/fishing hand</p>	<p>Tradesmen/women Generally have completed a 4 year Trade Certificate, usually by apprenticeship All tradesmen/women are included in this group</p> <p>Clerks bookkeeper bank/PO clerk statistical/actuarial clerk,accounting/claims/audit clerk payroll clerk recording/registry/filing clerk betting clerk stores/inventory clerk purchasing/order clerk freight/ transport/shipping clerk bond clerk customs agent customer services clerk, admissions clerk</p> <p>Skilled office staff secretary personal assistant desktop publishing operator switchboard operator</p> <p>Skilled sales staff company sales representative auctioneer insurance agent/assessor/loss adjuster market researcher</p> <p>Skilled service staff aged/disabled/refugee/child care worker nanny meter reader parking inspector postal worker courier travel agent tour guide flight attendant fitness instructor casino dealer/supervisor</p>	<p>Owner/manager farm construction import/export wholesale manufacturing transport real estate business</p> <p>Specialist manager finance Engineering Production Personnel industrial relations sales/marketing</p> <p>Financial services manager bank branch manager finance/investment/insurance broker credit/loans officer</p> <p>Retail sales/services manager shop petrol station restaurant club hotel/motel cinema theatre agency</p> <p>Arts/media/sports musician actor dancer painter potter sculptor journalist author media presenter photographer designer illustrator proof reader sportsman/woman coach trainer sports official</p> <p>Associate professionals generally have diploma/technical qualifications support managers and professionals.</p> <p>Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional</p> <p>Business/administration recruitment/employment/ industrial relations/ training officer marketing/ advertising specialist market research analyst technical sales representative retail buyer office/project manager</p> <p>Defence Forces senior Non-Commissioned officer</p>	<p>Senior executive/ manager/ department head in industry, commerce, media or other large organisation.</p> <p>Public service manager (Section head or above), regional director health/education/police/fire services administrator</p> <p>Other administrator school principal faculty head/dean library/museum/gallery director research facility director</p> <p>Defence Forces Commissioned Officer</p> <p>Professionals generally have degree or higher qualifications and experience in applying knowledge to</p> <ul style="list-style-type: none"> design, develop or operate complex systems; identify, treat and advise on problems; and teach others. <p>Health,Education,Law,Social Welfare, Engineering,Science,Computing professional.</p> <p>Business management consultant business analyst accountant auditor policy analyst actuary valuer</p> <p>Air/sea transport aircraft/ship's captain/officer/pilot flight officer flying instructor air traffic controller</p>
<p>Parent's education, qualification and occupation</p> <p>The questions about each parent/guardian's education, qualifications and employment group are asked on all school enrolment forms.</p> <p>In South Australia this information is used in determining each school's Index of Educational Disadvantage (IED), which is linked to funding levels.</p> <p>In the future this information may be used to determine resource allocations to Preschools.</p>			

Site details	
Name of site: <input style="width:90%;" type="text"/>	Previously / also enrolled at: <input style="width:90%;" type="text"/>
Child personal details	
<p>*Surname/ Family name: <input style="width:95%;" type="text"/></p> <p>*First name: <input style="width:95%;" type="text"/></p> <p>Middle name: <input style="width:95%;" type="text"/></p> <p>Preferred name: <input style="width:95%;" type="text"/></p> <p>Main Contact Number: <input style="width:150px;" type="text"/> Contact Type: <input type="checkbox"/> Mobile <input type="checkbox"/> Home Phone <input type="checkbox"/> Work Phone</p>	<p>*Gender: Male <input type="checkbox"/> Female <input type="checkbox"/></p> <p>*Date of birth: <input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/></p> <p>Proof of age: <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Centrelink Document <input type="checkbox"/> Passport <input type="checkbox"/> No proof provided (Estimated)</p> <p>eCHIMS : <input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/></p> <p>The eCHIMS number is made up of 8 numerals and is recorded in the child's blue book- 'My Health Record' provided by CAFHS (note: May be labelled as CRN (Crib Reference Number)</p> <p># CRN: <input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/><input type="text" value=""/></p> <p style="font-size: small;">Customer Reference Number (CRN) Provided by Centrelink (9 numerals followed by 1 letter)</p>
Address	
<p>Child's residential address 1</p> <p>*Address: <input style="width:95%;" type="text"/></p> <p>*Suburb/Town: <input style="width:95%;" type="text"/></p> <p>*Postcode: <input style="width:100px;" type="text"/></p>	<p>Child's residential address 2 (If in shared care)</p> <p>*Address: <input style="width:95%;" type="text"/></p> <p>*Suburb/Town: <input style="width:95%;" type="text"/></p> <p>*Postcode: <input style="width:100px;" type="text"/></p>
Cultural background	School details
<p>In which country was the child born? Australia <input type="checkbox"/> Other <input type="checkbox"/></p> <p>Please specify <input style="width:300px;" type="text"/></p> <p>If other, on what date did the child arrive in Australia? <input style="width:100px;" type="text"/></p> <p>If the child speaks a language other than English at home, what languages (including English) does the child speak?</p> <p>*Main language: <input style="width:300px;" type="text"/></p> <p>*Other language/s: <input style="width:300px;" type="text"/></p> <p>*What is the child's cultural background? <input style="width:350px;" type="text"/></p> <p>Does the site need to be aware of any cultural or religious requirement? Yes <input type="checkbox"/> No <input type="checkbox"/> More information can be provided on page 8</p> <p>Details: <input style="width:350px; height:30px;" type="text"/></p> <p>*Is the child of Aboriginal or Torres Strait Islander origin?</p> <p><input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Aboriginal and Torres Strait Islander <input type="checkbox"/> Not Aboriginal or Torres Strait Islander <input type="checkbox"/> Not Stated</p>	<p>When will the child start school?</p> <p>Month/Term: <input style="width:100px;" type="text"/> Year: <input style="width:50px;" type="text"/></p> <p>Or date (if known) <input style="width:200px;" type="text"/></p> <p>Which school do you intend to send the child to? <input style="width:350px;" type="text"/></p>
Custody	
<p>*Is the child under the guardianship of the Minister for Education and Child Development (goM) or in alternative care?</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p><i>If Yes, further details must be obtained from the confidential Families SA-DECD Information sharing form as supplied to the preschool site leader by the child's Families SA caseworker. This form will provide the necessary information for data input.</i></p> <p>*Are there any current court-sanctioned residency, parental responsibility or contact orders relating to the child?</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>If Yes, On what date was the order issued? <input style="width:100px;" type="text"/></p> <p><i>Please attach a copy of the order for the preschool's records. Details: More information can be provided on page 8</i></p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	
Parental status	
<p>Select one option that best describes the child's family type</p> <p><input type="checkbox"/> Two parents home <input type="checkbox"/> Sole Parent / Male <input type="checkbox"/> Guardian(s) <input type="checkbox"/> Shared parenting <input type="checkbox"/> Sole Parent / Female <input type="checkbox"/> Other</p>	

Medical Conditions

***Does the child have a diagnosed medical condition that may require support?** Yes No

If Yes, please tick relevant condition/s and provide details

(eg. inhaler for asthma, blood glucose monitoring for diabetes, Adrenaline auto-injector for anaphylaxis)

- Asthma
- Diabetes
- Continence
- Medication
- Oral drinking/eating
- Other (specify)

Details:

Are there any health related dietary restrictions? Yes No

Details: *More information can be provided on page 8*

Medicine:

Allergies

***Does the child have any allergies?** Yes No

If Yes, please tick relevant allergy and provide details

- Bees
- Dairy Products
- Gluten
- Nuts
- Penicillin
- Yeast
- Other (specify)

Details:

Are there any allergy related dietary restrictions? Yes No

Details: *More information can be provided on page 8*

Medicine (eg. Adrenaline auto-injector for anaphylaxis)

Details of child's Doctor / Clinic

***Doctor /Clinic name**

***Address:**

***Phone number:**

***Suburb/Town:**

***Postcode:**

Immunisations

***Has the child received all scheduled immunisations?** Yes No

(Note: Schedule as determined by Medicare National Immunisation Program, available from <http://www.medicareaustralia.gov.au/provider/patients/acir/schedule.jsp>)

Note: If not, the child may need to be excluded from the site during outbreaks of some infectious diseases.

Health Care / Medical Management / Medication Plan

*** If the child has any individual emergency or routine health care / medical management needs (e.g. seizure management, toilet support, diabetes management, supervision of medication, anaphylaxis first aid) the site will need a health care / medical management / medication plan from the treating doctor / health professional.**

Health care / Medical management plan attached Yes No If not, it **MUST** be provided.

Additional Needs & Diagnosed Disabilities

***Does the child have an additional need or diagnosed disability?** Yes No If Yes, please provide details

- Autistic Disorder
- Global developmental delay
- Hearing impairment
- Physical impairment
- Significant challenging behaviour
- Speech and language impairment
- Visual impairment
- Undiagnosed significant need

Details:

More information can be provided on page 8

Agencies involved:

Contact person:

Phone number:

Email address:

Support received:

Do you have any concerns about the child's development? Yes No (eg, behaviour, personal care needs, language skills)

If Yes, please provide details. *More information can be provided on page 8*

Parent 1 / Guardian 1

(Birth or Adoptive parent)

Relationship to child:

Main caregiver

Contact priority

Contact details must be provided

Account payee

If someone other than Parent 1/ Guardian 1 or Parent 2 / Guardian 2 is the account payee, please complete the section on page 7

It will be presumed that persons listed as parents/guardians will be also be Emergency Contacts and are Authorised to collect the child unless otherwise stated.

Name	Employment
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Mr/Mrs/Ms/Other

*First name:

*Surname/

Family name:

Date of Birth:

Gender:

Male

Female

Will parent 1/guardian 1 be claiming CCB? Yes

No

If yes, CRN must be provided.

CRN:

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Customer Reference Number (CRN) Provided by Centrelink (9 numerals followed by 1 letter

Indicate how many (if any) children you are claiming

CCB for at another approved childcare service.

Correspondence

If Parent 1/ Guardian 1 does not reside with the child, please indicate the type of correspondence this person wishes to receive:

Child reports

Site information (e.g. newsletters)

Preferred method of receiving this correspondence

In writing

Email (provide email address)

Contact Details

*Mobile phone:

*Home phone:

*Work phone :

Email address:

Address

*Residential address

Same as child's residential address 1 recorded on page 3

Same as child's residential address 2 recorded on page 3

If Parent 1/ Guardian 1 does not reside with the child please provide Residential address

*Address:

*Suburb/Town:

*Postcode:

Mailing address (if different from residential address)

Address:

Suburb/Town:

Postcode:

Employment

Current Employment Status

Employed (casual)

Employed (full-time)

Employed (parental leave)

Employed (part-time)

Homemaker (not employed in paid workforce)

Other

Pension or benefit recipient

Self-employed

Student

Unemployed

What is the occupation group of Parent 1 / Guardian 1?

Please select the appropriate parental occupation group from the list on page 2.

If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation.

If the person has not been in paid work in the last 12 months, enter '8' above

Education

What is the highest year of primary or secondary school Parent 1 / Guardian 1 has completed?

Year 12 or equivalent

Year 11 or equivalent

Year 10 or equivalent

Year 9 or equivalent or below

(For persons who have never attended school, select 'Year 9 or equivalent or below')

What is the level of the highest qualification Parent 1/ Guardian 1 has completed?

Bachelor Degree or above

Advanced Diploma / Diploma

Certificate I to IV (including trade certificate)

No non-school qualification

Refer to page 2 for more information about these questions and how the information is used.

Languages spoken & Cultural background

If Parent 1 / Guardian 1 speaks a language other than English at home, what is the main language spoken?

Does Parent 1 / Guardian 1 require an interpreter? No Yes

*What is the cultural background of Parent 1/ Guardian 1?

Parent 2 / Guardian 2

(Birth or Adoptive parent)

Relationship to child:

Main caregiver

Contact priority

Contact details must be provided

Account payee

If someone other than Parent 1/ Guardian 1 or Parent 2 / Guardian 2 is the account payee, please complete the section on page 7

It will be presumed that persons listed as parents/guardians will be also be Emergency Contacts and are Authorised to collect the child unless otherwise stated

Name	Employment
------	------------

Mr/Mrs/Ms/Other

*First name:

*Surname/
Family name:

Date of Birth:

Gender:

Male

Female

Will parent 2/guardian 2 be claiming CCB? Yes

No

If yes, CRN must be provided.

CRN:

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Customer Reference Number (CRN) Provided by Centrelink (9 numerals followed by 1 letter)

Indicate how many (if any) children you are claiming

CCB for at another approved childcare service.

Current Employment Status

- Employed (casual)
- Employed (full-time)
- Employed (parental leave)
- Employed (part-time)
- Homemaker (not employed in paid workforce)
- Other
- Pension or benefit recipient
- Self-employed
- Student
- Unemployed

What is the occupation group of Parent 2 / Guardian 2?

Please select the appropriate parental occupation group from the list on page 2.

If the person is not currently in paid work but has had a job in the last 12 months or has retired in the last 12 months, please use the person's last occupation. If the person has not been in paid work in the last 12 months, enter '8' above.

Correspondence

If Parent 2 / Guardian 2 does not reside with the child, please indicate the type of correspondence this person wishes to receive:

Child reports Site information (e.g. newsletters)

Preferred method of receiving this correspondence

In writing Email (provide email address)

Contact Details

*Mobile phone:

*Home phone:

*Work phone :

Email address:

Education

What is the highest year of primary or secondary school Parent 2 / Guardian 2 has completed?

- Year 12 or equivalent
- Year 11 or equivalent
- Year 10 or equivalent
- Year 9 or equivalent or below

(For persons who have never attended school, select 'Year 9 or equivalent or below')

What is the level of the highest qualification Parent 2/ Guardian 2 has completed?

- Bachelor Degree or above
- Advanced Diploma / Diploma
- Certificate I to IV (including trade certificate)
- No non-school qualification

Refer to page 2 for more information about these questions and how the information is used.

Address

*Residential address

Same as child's residential address 1 recorded on page 3

Same as child's residential address 2 recorded on page 3

If Parent 2/ Guardian 2 does not reside with the child please provide

Residential address

*Address:

*Suburb/Town:

*Postcode:

Mailing address (if different from residential address)

Address:

Suburb/Town:

Postcode:

Languages spoken & Cultural background

If Parent 2 / Guardian 2 speaks a language other than English at home, what is the main language spoken?

Does Parent 2 / Guardian 2 require an interpreter? No

Yes

*What is the cultural background of Parent 2 / Guardian 2?

Emergency contacts if parent or guardian cannot be contacted

Note: Includes authority to collect the child and permission to provide overnight care
(at least one emergency contact must be provided)

Relationship: Contact priority:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Relationship: Contact priority:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Relationship: Contact priority:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Relationship: Contact priority:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Relationship: Contact priority:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Relationship: Contact priority:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Account payee

If other than Parent 1/ Guardian 1 or Parent 2 / Guardian 2

Relationship: Contact priority:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Authority to collect child only

Note: Authorised to collect the child but not to be contacted in an emergency (e.g. child care centre staff)

Relationship:

First Name: Surname:

Gender: Male Female

Mobile phone:

Home phone:

Work phone:

Address:

Suburb/Town: Postcode:

Other relevant information

Additional Details – 1

This information relates to:

- Cultural or religious requirements
 Medical conditions
 Additional needs
 Custody
 Allergies
 Developmental concerns

Additional Details – 2

This information relates to:

- Cultural or religious requirements
 Medical conditions
 Additional needs
 Custody
 Allergies
 Developmental concerns

Any other information

Parent/Guardian Signatures

I / We understand that the entitlement to DECD funded preschool is for an average of 15 hours per week over 40 weeks of the year.

I / We declare that the child I am / we are enrolling is not already accessing a DECD funded preschool program with an entitlement of 15 hours per week from another service provider.

If the child is accessing another preschool program that is funded by DECD, which may be a child care centre, private school or DECD preschool, please provide details about the site and number of hours enrolled.

This site: Number of hours enrolled

Other site: Number of hours enrolled Name of site:

If unsure whether the other service is a DECD Grant Funded Preschool contact the DECD Universal Access team on 8226 3681 for more information.

I / We authorise education and care staff to seek

- medical treatment for the child from a registered medical practitioner, hospital or ambulance service
- transportation of the child by ambulance service.

I / We certify that all information given is true and accurate.

Signature of Parent 1 / Guardian 1: Date:

Signature of Parent 2 / Guardian 2: Date:

Interviewed/enrolment accepted by Name: Role:

Signature: Date:

Office Use only

Date enrolment details entered in		2014	2015	2016	from	Week 1					Week 2							
EYS:	<input type="text"/>	T 1	28/1-11/4	27/1-10/4	1/2-15/4	to	M	T	W	TH	F	M	T	W	TH	F		
EDID:	<input type="text"/>	T 2	28/4-4/7	27/4-3/7	2/5-8/7													
		T 3	21/7-26/9	20/7-25/9	25/7-30/9													
		T 4	13/10-12/12	12/10-11/12	17/10-16/12													

Anticipated start dates

Early entry start: term year
(if eligible and capacity permits)
 Pre-Entry start: term year
 Preschool start: term year
 School start: term year

Enrol in

- Long day care
 Preschool
 Enter on Preschool waiting list

from	Week 1					Week 2				
to	M	T	W	TH	F	M	T	W	TH	F