



Kids in the Sky

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Berowra Heights NSW 2080
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ABN 78 114 220 165

APPLICATION FOR WAITING LIST

Please note that this is an *application* for enrolment and **does not** guarantee your child a place. Your child's name will be placed on the Waiting List for entry in the appropriate year.

Please return this form fully completed together with

- A *copy* of the child's birth certificate or front page of passport verifying birth date – an offer of placement cannot be made without verification of the child's birth date.
- Payment of \$20 (non-refundable / includes GST) by cheque made out to Kids in the Sky Pty Ltd. If you need to make a cash payment please make sure that you have the right money as no change is available at the child care centre.
- You can pay by Direct Deposit clearly marking your name and that it is a wait list payment.

Bank Account Details: BSB 633000 Account No: 125122028

A confirmation receipt will be sent to you when the application is complete and processed.

Children can be offered a place from the time they are 18months old.

Priority for allocating places in child care services

Every Child Care Benefit approved child care service has to abide by the guidelines and tell you about them when you enrol your child into care

.Priorities

- **First Priority:** a child at risk of serious abuse or neglect;
- **Second Priority:** a child of a single parent who satisfies, or of parents who both satisfy, the work/training/study test under Section 14 of the 'A New Tax System (Family Assistance) Act 1999';
- **Third Priority:** any other child. Kids in the sky gives priority to siblings of enrolled children within this category.

Within these main categories priority should also be given to the following children:

- children in Aboriginal and Torres Strait Islander families;
- children in families which include a disabled person;
- children in families with lower incomes;
- children in families from a non-English speaking background;
- children in socially isolated families; and
- children of single parents.

A child care service may require a Priority 3 child to vacate a place to make room for a child with a higher priority. They can only do so if you:

- are notified when your child first entered care that your service follows this policy
- are given at least 14 days notice of the need for your child to vacate.

Reference: Australian Government, Department of Education and Training 2016

Please contact Kids in the Sky if there are any future changes to the information provided in the application. Kids in the Sky cannot accept responsibility for failing to contact you in matters pertaining to the placement of the child if the information is incorrect or outdated. Please let us know if you do not require a place on the waiting list.

OFFICE USE ONLY

Date Applied _____ Date Data Entered _____ Desired Start _____
Fee Paid _____ Rcpt No _____ Birth Cert Seen Y / N
Immunisation Records seen Y / N

WAITING LIST APPLICATION FORM

Child's Name *(please underline family name)* _____

Child's Date of Birth _____ Child's sex (male or female) _____

Home Address _____

Home Phone _____

Parent 1: Name _____ Home phone _____

Address _____

Mobile Phone _____ Business Phone _____

Email Address _____

Are you currently working seeking work unemployed studying at home *(please circle)*

Parent 2: Name _____ Home phone _____

Address _____

Mobile Phone _____ Business Phone _____

Email Address _____

Are you currently working seeking work unemployed studying at home *(please circle)*

The following information is required for staff planning

Days and hours required _____
(please note when we contact you to offer a place, you are not committed to the days you nominate here)

Desired commencement date _____

Does the child have any special or additional needs *(eg language delay, behavioural problems)*? **Yes** **No**

If **Yes**, please list any support services your child is attending *(eg speech pathologists, specialists, OT)* and include copies of documentation that support this

Is your child from a non-English speaking background? **Yes** **No**

Does your child speak English? **Yes** **No** Does the child understand English? **Yes** **No**

Is there anything else we need to know about your child _____

Is a child from the same immediate family on the waiting list? **Yes** **No**

If "**Yes**", please list the name/s of the child/ren and the year/s for which they are waitlisted.

Name _____ Year _____ Name _____ Year _____

Signed by Parent / Guardian _____ Date _____

CHECKLIST *(have you included with this form ...)*

Cash or Cheque for \$20 payable to Kids in the Sky Pty Ltd *(Waiting List Fee)*

OR

Internet transfer \$20 to Kids in the Sky – Ensure you add Childs name as Reference for our receipting:

BSB:633000

Acc: 125122028

Copy of Birth Certificate/Passport verifying date of birth *(no offer can be made without verification)*

Immunisation Records

You are required to provide us with an **Immunisation History Statement** which can be obtained online from My.gov.au or from the Australian Immunisation Register on 1800 653 809.

Copies of Special Needs documentation *(if required)*