

EXPRESSION OF INTEREST FORM

3 YEAR OLD KINDERGARTEN | 2021



Thank you for choosing a Uniting Early Learning Program for your child. Please **scan and email your completed form to LentaraEnrolments@vt.uniting.org** or mail to PO Box 3217, Broadmeadows, VIC 3047.

Our Parent Handbook and Early Learning Policies can be found at: <https://earlylearning.vt.uniting.org/resources/>

KINDERGARTEN PROGRAM - please tick preference <input checked="" type="checkbox"/> or number in order of preference if interested in more than one program					
St Andrews Sunbury Kindergarten			Kent Road Uniting Church Kindergarten		
Ivanhoe Uniting Church Kindergarten			Roxburgh Park Community House & Children's Centre		
CHILD'S DETAILS					
Family Name:		Given Name:		Preferred Name:	
Date of Birth:		Attach a copy of your child's birth certificate		Male <input checked="" type="checkbox"/>	Female <input checked="" type="checkbox"/>
Residential Address:			Suburb:		Postcode:
ADDITIONAL INFORMATION					
Is your child of Aboriginal and/or Torres Strait Islander descent?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Do you or your child currently have refugee or asylum seeker status?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have you or your child ever had refugee or asylum seeker status in Australia?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
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>	
Does your child currently attend the service, or has their sibling attended the service?		<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>If Yes, please provide details</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 <input type="checkbox"/>					
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 LentaraEnrolments@vt.uniting.org					
<input type="checkbox"/>	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:	