



Waiting List Application fee of \$11.00 must be paid upon submission of this application

** Payment methods accepted; Cheque, EFTPOS, Direct Banking Deposit and Credit Card*

Please note that the completion of this form does NOT secure a place; your child's name will be added to our waiting list and placed in accordance with the priority of access, as outlined below:

Places will be offered according to date received and age of child, in accordance with our policies and guidelines.

Priority age group for Kindergarten will be children who are 3.5 to 4.5 years of age as at 31st December of the year prior to enrolment in kindergarten. These are the children who will be Prep eligible the year after kindergarten.

Child's Name	<input type="text"/>	Year for enrolment	<input type="text"/>
Child's DOB	<input type="text"/>	Enrolment preferences <i>Please indicate the days you would like your child to attend, confirmation of your enrolment will be sent to you once availability is confirmed.</i>	
Parent/Guardian Name	<input type="text"/>	Days	Arrival and Departure Times
Address	<input type="text"/>	Monday	<input type="checkbox"/> <input type="text"/> <input type="text"/>
		Tuesday	<input type="checkbox"/> <input type="text"/> <input type="text"/>
		Wednesday	<input type="checkbox"/> <input type="text"/> <input type="text"/>
		Thursday	<input type="checkbox"/> <input type="text"/> <input type="text"/>
		Friday	<input type="checkbox"/> <input type="text"/> <input type="text"/>
Contact number	<input type="text"/>		
Email	<input type="text"/>		

Priority of access Guidelines as set out by the Office of Early Childhood Education and Care for Approved Child Care Services

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| <input type="checkbox"/> Priority 1 - A child at risk of serious abuse and neglect | Studio 1 | <input type="checkbox"/> |
| <input type="checkbox"/> Priority 2 - A child of two parents or single parent working/training/studying | Studio 2 | <input type="checkbox"/> |
| <input type="checkbox"/> Priority 3 - Any other child | Studio 3 | <input type="checkbox"/> |

Further details required, please tick any options that apply

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|---|--|
| <input type="checkbox"/> Aboriginal or Torres Straight Islander | <input type="checkbox"/> Family that includes a disabled person |
| <input type="checkbox"/> Single Parent family | <input type="checkbox"/> Culturally and/or linguistically diverse background |

Parent/Guardian signature	<input type="text"/>	Date	<input type="text"/>
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Please return your form to the address below:

***Office use only**

Pacific Lutheran College
 Attention: Early Learning Centre
 Woodlands Blvd, Meridan Plains Q 4551
 PO Box 992, Caloundra Q 4551

Date application received:	<input type="text"/>
Waiting list fee \$11 paid	<input type="checkbox"/>