

Please email celcstanhope@cdpsl.org.au
Ph :98520585

Catholic Early Learning Centre- John XX111- Stanhope Gardens Expression of Interest Form

There is no deposit required to apply for the learning centre's waitlist. You will be charged a \$40.00 non-refundable administration fee upon acceptance of a position. Please complete a new form for each child.

What would your preferred start date be for commencement at our centre: ___/___/___

Child's given name/s _____ Child's family name _____

Gender: Male Female Date of birth ___ / ___ / _____

Address _____

_____ Postcode _____

Name of Parent/Guardian One _____

Other Names by which the Parent/Guardian is known _____

Home phone _____ Mobile _____

Email Address _____

Address _____ Postcode _____

Are you currently working seeking work studying

Days and hours of work (if applicable)

Name of Parent/Guardian Two _____

Other Names by which the Parent/Guardian is known _____

Home phone _____ Mobile _____

Email Address _____

Address _____ Postcode _____

Are you currently working seeking work studying

Days and hours of work (if applicable)

What days do you prefer your child to attend? (Min. 2 days per week) M T W Th F

Are these days flexible? Yes No If yes, which days?

Have you had a child attend the CELC in previous years? Yes No

If 'Yes', which year/s? _____

The following questions relate to priority access:

Is your child of Aboriginal or Torres Strait Islander descent? Yes No

Is your child listed on a Centrelink Concession Card? Yes No

Is your child from a Culturally and Linguistically Diverse background? Yes No

If 'Yes' please identify cultural background _____

Language/s spoken in the home _____

What year are you intending to send your child to primary school? _____

Does your child have any special needs/disabilities? Yes No

If 'Yes', please indicate _____

Any additional information you would like us to know

Name of first parent/guardian _____

Signature of first parent/guardian _____

Date ____ / ____ / ____

Name of second parent/guardian _____

Signature of second parent/guardian _____

Date ____ / ____ / ____

Office Use Only:

Date received and entered into wait list ____ / ____ / ____