

Name of student	T
Date of Birth	▗▐

Form

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											

Group 4 Group 3 Group 2 Group 1 Senior management in large business organisation, government administration and Other business managers, Other Occupations Trades and advanced/ intermediate clerical, sales and service staff arts/media/sportspersons and associate professionals defence, and qualified professionals Drivers Tradesmen/women Owner/manager Senior executive/ manager/ department mobile plant, Generally have completed a 4 year head in industry, commerce, media or farm production/processing Trade Certificate, usually by construction other large organisation. machinery other machinery operators. apprenticeship import/export All tradesmen/women are included in Public service manager wholesale this group manufacturing (Section head or above), regional director Hospitality staff health/education/police/fire services transport hotel service supervisor Clerks real estate business receptionist bookkeeper Specialist manager waiter bank/PO clerk Other administrator bar attendant statistical/actuarial finance school principal kitchenhand clerk,accounting/claims/audit clerk Engineering faculty head/dean payroll clerk Production library/museum/gallery director porter research facility director housekeeper recording/registry/filing clerk Personnel betting clerk industrial relations Office assistants stores/inventory clerk sales/marketing **Defence Forces** purchasing/order clerk Commissioned Officer Financial services manager word processing freight/ transport/shipping clerk bank branch manager data entry bond clerk **Professionals** business machine operator finance/investment/insurance broker generally have degree or higher customs agent customer services clerk, admissions credit/loans officer qualifications and experience in applying receptionist office assistant knowledge to Retail sales/services manager • design, develop or operate complex Sales assistants Skilled office staff shop petrol station secretary sales assistant restaurant club identify, treat and advise on problems; personal assistant motor vehicle/caravan/parts hotel/motel cinema salesperson desktop publishing operator theatre agency switchboard operator checkout operator Health, Education, Law, Social Welfare, cashier Arts/media/sports Engineering, Science, Computing bus/train conductor Skilled sales staff musician professional. ticket seller company sales representative actor service station attendant dancer auctioneer **Business** car rental desk staff street insurance agent/assessor/loss adjuster painter management consultant vendor market researcher potter business analyst sculptor telemarketer accountant Skilled service staff shelf stacker iournalist auditor aged/disabled/refuge/child care worker author policy analyst Assistant/aide nanny media presenter photographer actuary trades' assistant meter reader designer illustrator valuer school/teacher's aide parking inspector proof reader sportsman/woman dental assistant postal worker coach trainer Air/sea transport veterinary nurse courier sports official aircraft/ship's captain/officer/pilot nursing assistant travel agent flight officer museum/gallery attendant tour guide Associate professionals flying instructor flight attendant usher generally have diploma/technical air traffic controller home helper fitness instructor qualifications salon assistant casino dealer/supervisor support managers and animal attendant professionals. Labourers and related Health, Education, Law, Social workers Welfare, Engineering, Science, Computing **Defence Forces** technician/associate professional other ranks below senior NCO not included above **Business/administration** recruitment/employment/ Agriculture, horticulture, forestry, fishing, mining industrial relations/ training officer worker marketing/ advertising specialist farm overseer market research analyst technical sales representative shearer, wool/hide classer retail buyer farm hand office/project manager horse trainer **Defence Forces** nurseryman greenkeeper senior Non-Commissioned officer gardener

Parent's education, qualification and occupation

The questions about each parent/guardian's education, qualifications and employment group are asked on all school enrolment forms.

In South Australia this information is used in determining each school's Index of Educational Disadvantage (IED), which is linked to funding levels.

In the future this information may be used to determine resource allocations to Preschools.

tree surgeon forestry/logging worker miner seafarer/fishing hand

Other worker

storeman

caretaker laundry worker

trolley collector

car park attendant crossing supervisor

guard cleaner

labourer factory hand

Site details												
Name of site:			Previous	sly / also enr	rolled at:							
Child persor	nal details											
*Surname/ Family name:				* Gend * Date	ler: of birth:	Male Female d d m m y y y y						
*First name: Middle name: Preferred name: Main Contact		Contact		Proof	of age:	Birth Certificate Centrelink Document Passport No proof provided (Estimated)						
Number:	Type: Mobile eCHI Home Phone The e Work Phone R # CR		# CRN:	IMS number is r ord' provided by	made up of 8 numerals and is recorded in the child's blue book- 'My Health / CAFHS (note: May be labelled as CRN (Crib Reference Number)							
Address												
Child's residential *Address: *Suburb/Town: *Postcode:	address 1			* Addr	ress: urb/Town:	al address 2 (If in shared care)						
Cultural bac	kground				School	details						
Ī	was the child born?	Australia	Othe	<u> </u>	When will th Month/Term	ne child start school?						
If other, on what date did the child arrive in Australia?				Or date (if known)								
If the child speaks a language other than English at home, what languages (including English) does the child speak?				Which school do you intend to send the child to?								
* Main language:					Custody	/						
*Other language/s:					*Is the child under the guardianship of the Minister for							
*What is the child	d's cultural backgroui	nd?			Education and Child Development (goM) or in alternative care?							
Does the site nee	ed to be aware of any	cultural or relig	-	8	Families SA preschool s	No No No No No Note that the confidential A-DECD Information sharing form as supplied to the site leader by the child's Families SA caseworker.						
	havisisal as Tassa CA	unit lalan dan arii	rin 2		*Are the	ere any current court-sanctioned residency,						
*Is the child of Aboriginal or Torres Strait Islander origin?					responsibility or contact orders relating to the child?							
☐ Aboriginal ☐ Torres Strait Islander					No[
☐ Aboriginal and Torres Strait Islander					If Yes, On w	what date was the order issued?						
☐ Not Aboriginal or Torres Strait Islander☐ Not Stated					Pease attach a copy of the order for the preschool's records. Details: More information can be provided on page 8							
Parental stat												
Two	n that best describes parents home	the child's fami										
<u> </u>	ardian(s)	Shared parenti										

Medical Conditions								
	nosed medical condition that may require	Are there any hea	alth related dietary restrictions?	Yes No No				
<pre>support? If Yes, please tick relevant cor</pre>	Yes No ndition/s and provide details	Details: More infor	rmation can be provided on page 8					
	cose monitoring for diabetes, Adrenaline auto-injector							
Asthma	Details:	Madiaina.						
Diabetes		Medicine:						
Continence								
Medication								
Oral drinking/eating								
Other (specify)								
Allergies								
*Does the child have any al			ergy related dietary restrictions?	Yes No No				
If Yes, please tick relevant alle	ergy and provide details	Details: More Infor	rmation can be provided on page 8					
Dairy Products	Details:							
Gluten								
Nuts		Medicine (eg. Adre	enaline auto-injector for anaphylaxis)					
Penicillin								
Yeast								
Other (specify)								
Details of child's D	octor / Clinic							
*Doctor /Clinic name		*Address:						
		L						
*Phone number:		* Suburb/Town:	*Pos	tcode:				
Immunisations								
* Have the child's parents or	guardians provided evidence of their child's imm	nunisation status?	Yes No No					
Has the child received all sche	om preventable diseases procedure) eduled immunisations? Yes No	1						
		-		ahadula ian)				
Note: If not, the child may nee	Medicare National Immunisation Program, available fid to be excluded from the site during outbreaks	of some infectious d		cneduie. _[SD]				
	cal Management / Medication							
-	dual emergency or routine health care / medi rvision of medication, anaphylaxis first aid) alth professional.	-		• • •				
Health care / Medical manage		If not , it MUST be	e provided.					
Additional Needs 8	k Diagnosed Disabilities							
*Does the child have an ad	ditional need or diagnosed disability? Yes	s No If Ye	es, please provide details					
Autistic Disorder	Significant challenging behaviour De	tails:	More information can be p	provided on page 8				
Global developmental dela	y Speech and language impairment							
Hearing impairment	Visual impairment							
Physical impairment	Undiagnosed significant need							
Agencies involved:								
Contact person:								
Phone number:								
Email address:								
Support received:								
Do you have any concerns a	bout the child's development? Yes	No (eg, behaviou	ur, personal care needs, language skills)					
If Yes, please provide details.	More information can be provided on page 8							
i .								

	Guardian 1 doptive parent)
Relationship to child:	
Account payee If someone other than Parent 1/ Guardian 1 or Palt will be presumed that persons listed as parents/guardians will be also be Emergence.	
Name	Employment
#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: 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 parener wiches to receive:	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.
type of correspondence this person wishes to receive: Child reports Site information (e.g. newsletters)	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 last12 months, enter '8' above
Preferred method of receiving this correspondence In writing Email (provide email address)	
Contact Details	Education
*Mobile phone: *Home phone: *Work phone : Email address: Address	What is the highest year of primary or secondary school Parent 1 / Guardian 1 has completed? Year 12 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
Address	Languages spoken & Cultural background
*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:	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?
Postcode:	

Parent 2 / Gu (Birth or Adopti									
Relationship to child:									
Main caregiver Contact priority Contact details mu Account payee If someone other than Parent 1/ Guardian 1 or Parent 2 It will be presumed that persons listed as parents/quardians will be also be Emergency Con	/ Guardian 2 is the account payee, please complete the section on page 7								
Name	Employment								
Mr/Mrs/Ms/Other	Current Employment Status								
*First name:	Employed (casual)								
*Surname/ Family name: # Date of Birth:	☐ Employed (full-time) ☐ Employed (parental leave) ☐ Employed (part-time) ☐ Homemaker (not employed in paid workforce)								
Gender: Male Female	Other Pension or benefit recipient								
# Will parent 2/guardian 2 be claiming CCB? Yes No If yes, CRN must be provided.	Self-employed Student								
# CRN:	Unemployed								
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.	What is the occupation group of Parent 2 / Guardian 2? Please select the appropriate parental occupation group from the list on page 2.								
Correspondence	If the person is not currently in paid work but has had a job in the last 12 months or								
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)	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.								
Preferred method of receiving this correspondence									
In writing Email (provide email address)									
Contact Details	Education								
	What is the highest year of primary or secondary school Parent 2 / Guardian 2 has completed?								
*Mobile phone:	Year 12 or equivalent								
*Home phone:	Year 11 or equivalent Year 10 or equivalent								
*Work phone :	Year 9 or equivalent or below								
Email address:	(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	Languages spoken & Cultural background								
*Residential address Same as child's residential address 1 recorded on page 3	If Parent 2 / Guardian 2 speaks a language other than English at home, what is the main language spoken?								
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:	Does Parent 2 / Guardian 2 require an interpreter? No Yes								
*Suburb/Town:	*What is the cultural background of Parent 2 / Guardian 2?								
*Postcode:									
Mailing address (if different from residential address) Address:									
Suburb/Town:									

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: Relationship: Contact priority: First Name: Surname: First Name: Surname: Gender: Male Female Gender: Male Female Mobile phone: Mobile phone: Home phone: Home phone: Work phone: Work phone: Address: Address: Suburb/Town: Postcode: Suburb/Town: Postcode: Relationship: Contact priority: Relationship: Contact priority: Surname: Surname: First Name: First Name: Male Female Gender: Male Female Gender: Mobile phone: Mobile phone: Home phone: Home phone: Work phone: Work phone: Address: Address: Postcode: Suburb/Town: Suburb/Town: Postcode: Relationship: Contact priority: Relationship: Contact priority: First Name: Surname: First Name: Surname: Male Female Male Female Gender: Gender: Mobile phone: Mobile phone: Home phone: Home phone: Work phone: Work phone: Address: Address: Suburb/Town: Postcode: Suburb/Town: Postcode: Account payee Authority to collect child only If other than Parent 1/ Guardian 1 or Parent 2 / Guardian 2 Note: Authorised to collect the child but not to be contacted in an emergency (e.g. child care centre staff) Relationship: Relationship: Contact priority: First Name: Surname: First Name: Surname: Gender: Male Female Gender: Male Female Mobile phone: Mobile phone: Home phone: Home phone: Work phone: Work phone: Address: Address: Suburb/Town: Postcode: Suburb/Town: Postcode:

Other relevant information														
Additional Details – 1														
This information relates to: Cultural or religious requirements Custody	☐ Medical cor	nditions		Additional need										
Additional Details – 2														
This information relates to: Cultural or religious requirements Custody	☐ Medical con☐ Allergies	ditions	_	dditional needs evelopmental c										
Any other information														
Parent/Guardian Signatures														
I / We understand that the entitlem	ent to DECD fur	nded preschool	is for an a	average of 15	hours per	week	over 4	10 we	eks of	the ye	ear.			
:														
If the child is accessing another proplease provide details about the sit	e and number o	that is funded for thours booked	by DECD), which may	be a child o	care c	entre,	privat	e sch	ool or	DECE) presc	hool,	
This site: Number	er of hours booke	ed												
Other site: Number	er of hours booke	ed	Nan	me of site:										
If unsure whether the other service	e is a DECD Gra	ant Funded Pres		ntact the DE0 nation.	CD Prescho	ol Po	licy an	d pro	grams	Unit o	on 822	6 368	1 for n	nore
I / We authorise education and car medical treatment for the transportation of the child	child from a reg		practition	ner, hospital	or ambulan	ce ser	vice							
I / We certify that all information given	en is true and a	ccurate.												
Signature of Parent 1 / Guardian 1:] [ate:							
Signature of Parent 2 / Guardian 2:						<u>ן</u> נ	ate: [
Interviewed/enrolment accepted by Name						╡	Role:							
Signatur	ə: <u> </u>						oate:							
Office Use only														
Date enrolment details entered in EYS:	2018	29/1-12/4	2020	to	М	т	Week w	1 TH	F	М	т	Week 2 w	2 TH	F
T 2	29/1-13/4	29/4-5/7	27/4-3/7											
EDID: T 3		22/7-27/9	20/7-25/9											
Т 4	15/10-14/12	14/10-13/12	12/10-11/	12										
Anticipated start dates Enrol in				from		1	Week	1				Veek 2		
Early entry start: term year Long day care (if eligible and capacity permits) Preschool				to	М	Т	W	TH	F	M	Т	w	TH	F
Pre-Entry start: term year □ Enter on Preschool Preschool start: term year waiting list														
School start: term year waiting list														