
**Nunawading
Christian College**



Enrolment



Nunawading Christian College Enrolment Application

This enrolment application is for early learning applications.

Part A Details of child

Surname Given names

Preferred name

Address

Suburb Postcode

Gender Date of birth / /

Country of birth

First language spoken at home Second language spoken at home

Cultural Background of child Cultural Background of parent

Any special considerations for the child

Year to start ELC

Expected year to start school

Child lives with Both Parents Mother/Father Other

Child's CRN

Religion

Aboriginal or Torres Strait Islander Yes No

I understand that by enrolling my child at NCC ELC the service will receive 4 year old kindergarten funding.

Yes No ***my child will attend another Kindergarten and receive funding from this service.***

Part B Court orders relating to the child

Are there any court orders relating to the powers and responsibilities of the parents in relation to the child or access to the child?

No, go to the next section

Yes, please complete the following:

1. Bring the original court order/s for staff to see and a copy attached to this enrolment form

2. If these orders:

a) change the powers of a parent/guardian to:

– authorise the taking of the child outside the service by a staff member of the service

– consent to medical treatment of the child

– request or permit the administration of medication to the child

– collect the child AND/OR

b) give these powers to someone else.

Please describe these changes and provide the contact details of any person given these powers.



Part C Child's Medical Information

Does the child have any special needs? Yes No

If yes, please provide details and any relevant Medical Management Plans.

Medical Management
Plan attached
and verified
by a staff member

Staff signature _____ Position _____

Part D Allergies & sensitivities

Does the child have any allergies or sensitivities? Yes No

Severity Mild Moderate Severe

Please provide details of medication/s on child's first day and include an Allergy Management Plan.

Allergy Management
Plan attached
and verified
by a staff member

Staff signature _____ Position _____

Part E Anaphylaxis

Has your child been diagnosed at risk of anaphylaxis? Yes No If no, go to next section

Does your child have an auto injection device (e.g EpiPen/Anapen)? Yes No

Has the anaphylaxis Medical Management Plan been provided to the service? Yes No

Has a risk management plan been completed by the service in consultation with you? Yes No

Anaphylaxis
Management Plan
attached and verified
by a staff member

Staff signature _____ Position _____

Part F Other medical conditions

Does your child have any other medical conditions (e.g asthma, epilepsy, diabetes, etc)? Yes No

If yes, please provide details and Medical Management Plan

Medical Management
Plan attached
and verified
by staff member

Staff signature _____ Position _____

Part G Dietary restrictions

Does the child have any dietary restrictions? Yes No

If yes, please give details

Details of special menu foods parents will supply (e.g gluten-free cupcakes).



Part H Child's Immunisation Record

Has the child been immunised? Yes No

If yes, please provide details by

- Attaching a copy of the Immunisation Record from the Child Health Record book, or
- Attaching a copy of the Immunisation Record printout from local government, or
- Attaching the Child History Statement from the Australian Childhood Immunisation Register from Medicare

*Immunisation record
attached and verified
by a staff member*

Staff signature _____ Position _____

Part I Child's Health Information

Name doctor/medical service _____

Address medical service _____ Phone _____

Private health insurance? Yes No

Fund name _____ Membership number _____

Ambulance cover? Yes No

Membership number _____

Medicare number _____ Expiry date _____

Maternal & child health centre _____

Does the child have a child health record? Yes No

If Yes, please provide to the service for sighting. Sighted? Yes No

Staff signature _____ Position _____

Part J Special Considerations

*When any of the
following are ticked,
DEEWR will be notified
that the child has
'Special Considerations'
but no other details
will be forwarded.*

Does the child have a developmental delay or disability, including intellectual, sensory or physical impairment?

Yes No

Special Considerations

Child at risk Disabled parent

Learning needs Communication needs

Mobility needs Interpersonal needs

Other needs _____

Disability

Has diagnosed disability. _____

Description _____

Please attach referrals from Specialists _____ Date Centre Advised _____



Part K Other Information

Is there anything else that the children's service should know about the child?
(e.g Cultural, religious or additional needs)

Part L Family Details

Mother/Guardian

Surname _____ Given names _____ Preferred name _____

Address _____

Suburb _____ Postcode _____

Work Phone _____ Mobile _____

Email _____ Date of birth ____ / ____ / ____

Language/s spoken at home _____

Religion _____

CRN _____

Father/Guardian

Surname _____ Given names _____ Preferred name _____

Address _____

Suburb _____ Postcode _____

Work Phone _____ Mobile _____

Email _____ Date of birth ____ / ____ / ____

Language/s spoken at home _____

Religion _____

CRN _____

What prompted you to contact Nunawading Christian College Early Learning Centre?

\$50 Enrolment Fee - ELC Only \$150 Enrolment Fee - ELC and NCCP

Payment required at time application is submitted

Part M Authorised Nominee

I, _____ (parent/guardian), give consent for the following person _____
of _____ (address) to be an **authorised nominee** to _____ (child's name).

This consent allows the **authorised nominee** to act on the parents behalf and be able to:

- Deliver and collect the child to/from Nunawading Christian College Early Learning Centre;
- Sign for excursions on behalf of the parent/guardian;
- Consent to Nunawading Christian College Early Learning Centre seeking, or where appropriate, administering emergency medical treatment;
- Consent to another person, not listed on the enrolment form, to collect the child. OR

I, _____ (parent/guardian), **do not give** permission for anyone to be an Authorised Nominee of the above child.

Signatures (parent/guardian) _____ Date _____

Signatures (authorised nominee) _____ Date _____



Part N Lawful Authority

Parent

All parents have the powers and responsibilities in relation to their child that can only be changed by a court order. The Children's Services Regulations 1998 refer to these powers and responsibilities as "lawful authority". It is not affected by the relationship between the parents, such as whether or not they have lived together or are married.

A court order, such as under the Family Law Act, may take away the authority of a parent to do something, or may give it to another person.

Guardian

A guardian of a child also has lawful authority. A legal guardian is given lawful authority by a court order. The definition of "guardian" under the Children's Services Act 1996 also covers situations where a child does not live with his or her parents and there are no court orders. In these cases, the guardian is the person the child lives with who has day-to-day care and control of the child.

Part O Confidentiality of Enrolment Records

The proprietor of the children's service must ensure that information in the child's enrolment record is not divulged to another person unless necessary for the care or education of the child, to manage medical treatment of the child, where expressly authorised by the parent or prescribed in the Children's Services Regulations 2009, Regulation 35 (1) (d-e).

Part P Declaration and Consent to Emergency Medical Treatment

I, _____ (parent/guardians' full name) am a person with lawful authority over the child referred to in this enrolment form.

I declare that the information in this enrolment form is true and correct and undertake to immediately inform the children's service in the event of any change to this information;

I agree to collect or make arrangements for the collection of the child referred to in this enrolment form if she/he becomes unwell whilst at the service;

I consent to the staff of the child's service seeking, or where appropriate, administering, such emergency medical treatment as is reasonably necessary (from either a registered medical practitioner, hospital or ambulance service) and that I will reimburse any necessary expenses incurred by the children's service (such as but not exclusive to transportation of the child by an ambulance service).

I give consent to regular excursions as organised by the child's service.

Signatures (parent/guardian)

Date

Part Q Booking Preferences

Preference given to working parents. Are you working on these booked days

	Long Day Care(Inc. Kinder Program)	Working Parents	
		Yes	No
	3/4 Year Old		
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			



Part R Disclaimer Information

Parents/Guardians are required to complete the following section, giving consent to the Centre in specific situations. I, _____ (parent/guardian's full name) give permission for my child (named on this enrolment form) to:

Please tick the following options for which you give permission to the Centre:

- Sun Screen - Have Centre supplied/personally supplied sun screen applied by the Centre staff
- Head Lice Check - Have my child's head checked for lice when there is a concern that head lice are present
- Head Lice Pre-Treatment - Have a non-toxic pre-treatment applied at the Centre at the price of \$20, if head lice are present.
- Wider Campus - Be taken onto the wider campus of NCC (Primary and Secondary campuses) under the supervision of the Centre's staff.
- Educational Photography & Name Publication - Have my child's photography taken or be videoed, with other children for use within the Centre only. It may also be given to other families in the context of the particular child's learning experience. (eg Copies of these observations will be gounf in your child's portfolio.
- Publications - Have my child's image and/or name (first name only) published in the following publications. Please list areas where you **do not** want your child's image published:

- Contact Directory - I give permission for my contact details to appear in a NCC directory that will be circulated to all family members (if there is enough interest). Contact details to appear as follows:
Parent/Guardian's name _____
Child'a name/photo _____
Phone number and/or address and/or email _____
- Antiseptic Cream (Bepanthen Cream) - I give permission for Bepanthen cream to be applied to nappy rash and/or skin irritations by a NCC ELC staff member.

Signatures (parent/guardian)

Date



Part S Application Process

Please return:

- (i) This completed Application for Enrolment
- (ii) A copy of the child's Birth Certificate or Extract of Entry
- (iii) A copy of the child's Immunisation Certificate
- (iv) The application fee (see pg 4)
- (v) Booked enrolment interview

Date _____

Part T Enrolment Details Last Checked

Name	General	Medical	Immunisation	Contacts	Date	Signature

Part U Collecting the Child from the Children's Service

Your consent is required for other people to collect the child from the Centre on your behalf. Please list in the table below the details of those people whom you authorise to collect the child on your behalf. In the event that the child is not collected from the Centre and the parents or guardians cannot be contacted, this list will also be used to arrange for someone to collect the child.

1. Contact

Name _____

Address _____

Work Phone _____ Mobile Phone _____

Relationship to child _____

2. Contact

Name _____

Address _____

Work Phone _____ Mobile Phone _____

Relationship to child _____

3. Contact

Name _____

Address _____

Work Phone _____ Mobile Phone _____

Relationship to child _____

4. Contact

Name _____

Address _____

Work Phone _____ Mobile Phone _____

Relationship to child _____



Part U Continued

5. Contact

Name

Address

Work Phone

Mobile Phone

Relationship to child

6. Contact

Name

Address

Work Phone

Mobile Phone

Relationship to child

Part V Declaration

I, (print full name) am a person with lawful authority over the child referred to in this enrolment form.

- declare that the information in this enrolment form is true and correct and undertake to immediately inform the Centre in the event of any change to this information;
- agree to make regular fee payments, ensuring that my fees are always paid two (2) weeks in advance;
- agree to give two (2) weeks notice when withdrawing my child from the Centre and when altering my child's regular bookings;
- consent to the staff of the Centre seeking, or where appropriate, administering such emergency medical treatment as is reasonably necessary and that I will reimburse any necessary expenses incurred by the Centre;
- have read and understand the conditions of enrolment and agree to abide by them.

Signature

Date

Conditions of enrolment

1. Parents/Guardians must divulge, with appropriate documentation, all relevant details regarding medical or other conditions that may impact upon the Centre's ability to properly care for the child, and to enable consideration of any extra services and facilities that may be required. Such information must be based on all current information available to the parent or guardian at the time of application.
2. During the period that the child is enrolled at the Centre, parents/guardians must, as soon as practicable, bring to the Centre's attention, with appropriate documentation, any new medical or other conditions affecting the child that may impact upon the Centre's ability to properly care for the child, and to enable consideration of any extra services and facilities that may be required.
3. All children enrolled at the Centre are required to take part in all Centre activities.
4. Fees and charges are subject to amendment by the Centre Management and are payable in advance, ie, within fourteen days of receipt of account.
5. The Centre reserves the right, which may be exercised at any time, to refuse to allow a child to continue their education at the Centre while any fees remain unpaid. Only in exceptional circumstances, at the discretion of the Centre Management, will a child be permitted to enter a new term if the fees of the previous term are unpaid.
6. Two week's notice must be given in writing of the withdrawal of a child from the Centre. If two week's notice is not provided, two week's fees in lieu is chargeable.
7. The Centre Management is authorised to take such steps as he/she may find necessary, on behalf of the Centre, to recover unpaid fees.
8. Where there is more than one parent/guardian of the child at the time of enrolment, all parties must sign the Application for Enrolment form and accept these Conditions. It is understood that all parties to the Application for Enrolment form will be jointly and severally liable for payment of all fees and charges levied by the Centre from time to time.

Privacy policy

1. The Centre collects personal information, including sensitive information, about enrolled children and parents/guardians before and during the course of a child's enrolment at the Centre.
2. "Sensitive Information" includes health information (in the form of medical reports or otherwise) about children within the terms of the Privacy Principles under the Privacy Act 1988.
3. The primary purpose of collecting this personal information and sensitive information is generally to enable the Centre to provide education for your son/daughter/charge, and to enable the Centre to discharge its legal duty of care. The collection of some information by the Centre is required by law, including but not limited to laws regulating public health and child protection.

