



Mawson Lakes Preschool - Registration of Interest



Please complete the details on this form to register your interest enrol your child in a government preschool. Once completed, submit a registration of interest form to each nominated preschool including your local preschool. This form is not confirmation of enrolment. If a place is available, you will be notified of an enrolment offer prior to your child's anticipated preschool starting date. At this time you will be given a preschool enrolment form to complete.

Child details

Family Name _____ Date of birth / /

Given Name/s _____ Calendar year will attend preschool _____

Residential address _____

Does your child identify as Aboriginal or Torres Strait Islander? Yes No

Does your child speak English? Yes No

Languages including Aboriginal spoken at home _____

Your child's cultural background _____

Is your child in care of has been in care (subject to a custody or guardianship order under the *Children and Young People (Safety) Act 2017 (SA)*)? Yes No

Does your child have any additional needs, disabilities or medical conditions that may require support? Yes No

Details

Parent/Guardian 1

Family Name/Surname _____

Given Name _____

Relationship to child _____

Contact Phone Number _____ email address _____

Parent/Guardian 2

Family Name/Surname _____

Given Name _____

Relationship to child _____

Contact Phone Number _____ email address _____

Placement Preferences

My local preschool is _____
Refer to www.education.sa.gov.au/findaschool to determine your local preschool catchment area.

Do you wish your child to attend this preschool? Yes No

Intended school _____

Siblings attending the school (name and year level) _____

Additional Information (eg preferred group)

If you have more than one preschool choice you wish your child to attend, please list preschools in order of preference;

Preschool 1 _____

Preschool 2 _____

Preschool 3 _____

Please submit a registration of interest form to each nominated preschool including your local preschool.

Request for placement at a non-local preschool

Only complete this section if this is not your local preschool. Please indicate the reason/s for seeking placement at this non local preschool.

- Sibling attending the school/a local school
- Name and year level _____
- Social or family links to the service _____
- Childcare arrangements _____
- Transport and convenience _____
- Distance of your home to the preschool _____
- Compelling or extenuating circumstances _____

Additional Information

I declare that the information provided in this Registration of Interest is, to the best of my knowledge, accurate and complete. I understand that any enrolment following this process will be subject to consideration and acceptance of a completed preschool enrolment form.

I acknowledge that my child's enrolment will only be accepted in a Department preschool if at the time of enrolment I have provided immunisation records that indicate my child meets the immunisation requirements.

Parent/Guardian Signature _____

Date / /