

WAITING LIST APPLICATION

Child's Surname			Male []	Female []	
Child's Given Name			DOB		
Home Address					
Home Phone Number	Email				
Does the child have any	additional healt	th care needs?			
Parent/Guardian 1:					
Name					
Employer's Name					
Business Address			Suburb		
Phone Numbers	(W)		(M)		
Parent/Guardian 2:					
Name					
Employer's Name					
Business Address	Suburb				
Phone Numbers	(W)		(M)		
Days care required (pl	ease circle)				
Full week	Monday	Tuesday Wednesday	Thursday	Friday	
Hours required:					
Desired Entry Date:					
Childcare places are alle The categories of priorit		Family Assistance" legislation. are as follows:			
First priority - Second priority Third priority -	A child at risk of serious abuse or neglect A child of a single parent who satisfies, or of parents who both Satisfy, the work/training/study test under section 14 of the Family Assistance Legislation any other child				
 Childre Childre Childre Childre Childre Childre Childre Childre Childre 	en in Aboriginal and en in families which en in families whose en in families with a en in socially isolated en of single parents				
		third priority category may ne weeks' notice of this would be			
Signature		Date			