

Expression of interest to enrol in a NSW public preschool

Thank you for your interest in enrolling your child in a NSW public preschool. Children are eligible to enrol in preschool classes from the beginning of the school year if they turn 4 years of age on or before 31 July in that year.

Please complete all sections of the form. The information you provide will help the school principal implement the department's preschool enrolment procedure. The procedure outlines the order of priority for enrolment in a public preschool. If your child is offered a position, you will be required to complete an application to enrol in a public preschool and provide all required documentation.

A. Child's details

Child's name:						
Gender:	Date of birth:					
Home address:						
Residency s	status					
What is your child	l's residency sta	atus?				
Australian cit	tizen	🗌 New Zeala	nd citizen	Norfolk Islander		
Permanent r	esident	Temporary	visa holder			
Current visa sub-	class:		Visa expiry date:			

A child born in Australia is only automatically an Australian citizen if at least one parent was an Australian citizen or permanent resident when the child was born.

Aborig	ginality		
Is your ch	ild of Aboriginal or	Torres Strait Islander origin?	
🗌 No	Aboriginal	Torres Strait Islander	Both Aboriginal and Torres Strait Islander
Langu	ages spoker	n at home	
Does you	r child speak a lan	guage other than English at h	ome? 🗌 Yes 📃 No
lf yes, wh	at language(s) oth	er than English are spoken at	home by your child?
Main lang	uage:		
Other lang	guage(s):		
Child's	additional l	earning and suppor	rt needs, including
disabil	lity		

Does your child require support for learning because of disability?

Legislation and NSW Department of Education policy recognise that adjustments may be required for children with special needs, including children with disability, so that they can participate at preschool. Preschool personnel and parents work together to identify the adjustments that may be needed to meet your child's learning and support needs.

Child's medical details and health conditions

Does your child have any allergies or medical conditions?
Yes No

If yes, please identify and provide details below of any medical and health conditions for which your child is being treated:



B. Family details

Parent/carer's name: _			
Phone Home:	Work:	Mobile:	
Email:			

Do you intend to, or have you already, expressed interest in enrolling at another public preschool?

🗌 Yes 🗌 No

Information relating to assessment for priority placement

This information is being collected to assess if the family meets the criteria for priority placement on the basis of financial disadvantage.

Do you have a Low Income Health Care Card?

Yes No

Declaration of accuracy and signature

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete. I am aware that if information I have given is false or misleading, any decision made as a result of this application may be changed.

Signature of parent/carer: _____ Date: _____

The personal information provided on this expression of interest form is being obtained for the purposes of assessing eligibility for enrolment in the preschool class. It will be used by the Department of Education for general student administration and communication purposes and other matters relating to the education and welfare of the child. Whilst the provision of this information is voluntary, if you do not provide all or any of this information it may delay or prevent the process of an application for enrolment. This information will be stored securely. You may access or correct any personal information provided by contacting the school.

Office use only

Date received:

