

Preschool registration of interest form



Complete this form to register your interest to enrol your child in a government preschool. Once completed, save the form and email or deliver in person to all nominated preschools.

This form does not confirm enrolment. If a place is available, you will be notified of an enrolment offer before your child's expected preschool starting date. At this time, you will be given a preschool enrolment form to complete.

Section 1: Child details

Family name (surname) _____ Given name/s (first name) _____

Date of birth (dd/mm/yyyy) _____ Gender Girl Boy Not disclosed

Calendar year your child will attend preschool _____

Residential address

Number and street _____

Suburb _____ Post code _____

Postal address (if different to residential address)

Number and street _____

Suburb _____ Post code _____

Does your child identify as Aboriginal? Yes No Child's cultural background _____

Does your child speak English? Yes No

Other languages spoken at home, including Aboriginal _____

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

If yes, provide details:

Section 2: Parent or carer details

Family name (surname) _____ Given name/s (first name) _____

Mobile number _____ Home phone number _____

Email _____ Relationship to child _____

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

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Section 3: Placement preferences

You can find out your local preschool at www.education.sa.gov.au/findaschool.

Preference 1

I want my child to attend (choose 1 option):

my local preschool _____ (name of preschool)

a non-local preschool. My first preference is: _____ (name of preschool)

Add other choices in order of preference (optional).

Preference 2

My second preference is: _____ (name of preschool)

Preference 3

My third preference is: _____ (name of preschool)

Which days are your preferred attendance days? (tick up to 2)

Monday

Tuesday

Wednesday

Thursday

Friday

You'll need to email or give a copy of this form to each of your preschool preferences. Your preferred preschools and days cannot be guaranteed.

Section 4: Request for placement at a non-local preschool

Only complete this section if your first preference is a non-local preschool. Indicate why you're seeking placement.

Sibling attending the school (name and year level) _____

Social or family links to the preschool _____

Child care arrangements _____

Distance of your home to the preschool _____

Compelling or extenuating reasons _____

Any additional information you'd like to include:

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 I have provided immunisation records at the time of enrolment that indicate my child meets the immunisation requirements.

Parent or carer signature _____ Date (dd/mm/yyyy) _____