

Dear Parent/Caregiver,

Thank you for your interest to apply to enrol your child at alma Public School Bugdlie Preschool.

**IMPORTANT INFORMATION: Alma Public School Bugdlie Preschool Priority for Enrolment**

Priority for enrolment during Semester One is given to children who can enrol in Kindergarten the following year.

Applications will be considered by:

- Aboriginal or Torres Strait Islander children
- Children in low socioeconomic circumstances
- Children unable to access other early childhood services due to disadvantage or financial hardship

If vacancies exist and there are special circumstances for aboriginal children who are not commencing Kindergarten the following year, these will be considered by the school principal after all other enrolments have been finalised.

**When the required information listed below has been received, if your child is accepted, you will be advised of the next step of the enrolment process.**

To start the enrolment process, please complete the details on the following page and the Department of Education NSW Expression of Interest to Enrol in a NSW Public Preschool.

**The Following documents must also be provided to be copied for our records:**

- Up to date Medicare Immunisation History Statement
- Proof of Address (eg: driver's licence, rates notice, electricity statement HCC etc)
- Health Care/Concession Card (if applicable)  
*(a copy of your Health Care/Concession card must be on file to receive a reduction should fees be applied)*

Documents can be returned by email to [alma-p.school@det.nsw.edu.au](mailto:alma-p.school@det.nsw.edu.au) or dropped to Alma Public School Bugdlie Preschool 8.45am-3.00pm or Alma Public School 8.30am-3.15pm.

Please do not hesitate to contact Alma Public School on 08 8088 2181 if you have any questions about these requirements. All information will be kept strictly confidential.

We look forward to working with you to provide a quality preschool experience for you and your child.

Your sincerely  
Ruby Church  
Relieving Principal

08 80 88 2181

PO Box 5018 Broken Hill NSW 2880

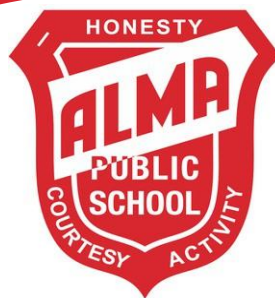
[alma-p.school@det.nsw.edu.au](mailto:alma-p.school@det.nsw.edu.au)

<https://alma-p.schools.nsw.gov.au>

29 Comstock St Broken Hill NSW 2880







Please complete the details below:

Child's Name	Date of Birth

Brothers or sisters currently or previously enrolled at a NSW Public School				
	Family Name	Given Name	M/F	DOB
1				
2				
3				
4				

## Session Preference

Select 1, 2 and 3 in order of preference

☐

**Session One**

(Mon, Tues, alternate Wednesdays)

☐

**Session 2**

(Thurs, Fri, alternate Wednesdays)

☐

**Any**

(No preference)

*Please note: Priority for enrolment will be taken into consideration before placements are offered (see IMPORTANT INFORMATION above)*



## 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 status

What is your child's residency status?

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Australian citizen | <input type="checkbox"/> New Zealand citizen   | <input type="checkbox"/> Norfolk Islander |
| <input type="checkbox"/> Permanent resident | <input type="checkbox"/> 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.

## Aboriginality

Is your child of Aboriginal or Torres Strait Islander origin?

☐ No    ☐ Aboriginal    ☐ Torres Strait Islander    ☐ Both Aboriginal and Torres Strait Islander

## Languages spoken at home

Does your child speak a language other than English at home? ☐ Yes    ☐ No

If yes, what language(s) other than English are spoken at home by your child?

Main language: \_\_\_\_\_

Other language(s): \_\_\_\_\_

## Child's additional learning and support needs, including disability

Does your child require support for learning because of disability? ☐ Yes ☐ No

*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: \_\_\_\_\_