

# Gippsland Grammar Early Learning Centre St Anne's Campus



## APPLICATION FOR ENROLMENT

**I/We wish to enrol the following child at the Gippsland Grammar Early Learning Centre, St Anne's Campus.**

Child's Surname .....		Preferred Name .....	
Given Name/s .....		Date of Birth ...../...../.....	
Male <input type="checkbox"/>	Female <input type="checkbox"/>		
Is the child of Aboriginal/Torres Strait Islander origin? <input type="checkbox"/> Yes <input type="checkbox"/> No			

<b>PARENT INFORMATION</b>	
Father/Parent 1/Guardian 1 ..... Surname and Title ..... Given Name/s ..... Residential Address ..... ..... ..... Postcode ..... Home Telephone ..... Mobile Telephone ..... Email ..... Postal Address (if different to residential address) ..... ..... Postcode ..... Occupation ..... Employer ..... Business Telephone.....	Mother/Parent 2/Guardian 2 ..... Surname and Title ..... Given Name/s ..... Residential Address ..... ..... ..... Postcode ..... Home Telephone ..... Mobile Telephone ..... Email ..... Postal Address (if different to residential address) ..... ..... Postcode ..... Occupation ..... Employer ..... Business Telephone .....
<b>Email address to which enrolment offer can be sent:</b> .....	

<b>I would like to apply for a place in the following program:</b> If applying for the Reception Program, please ensure to enrol for Pre-Prep on this form (if required). Acceptance into the Reception Program <u>does not</u> constitute automatic acceptance into Pre-Prep the following year.	
a) <b>Pre-Prep Program</b> (for 4 year olds) Three day program (8.45am – 3.15pm)	Year of admission ..... Mon/Wed/Fri or Tues/Thurs/Fri
b) <b>Reception Program</b> (for 3 year olds) (Operates Monday to Thursday only)	Year of admission ..... <input type="checkbox"/> One morning (8.45am – 11.45am) <input type="checkbox"/> One full day (8.45am – 3.15pm) <input type="checkbox"/> Two full days
<b>Please note:</b> Offers for places and confirmation of days will be made via email in June the year prior to entry in accordance with the School's enrolment policy.	
<b>PLEASE TURN OVER</b>	

Are siblings currently attending Gippsland Grammar? Yes  No

Name: ..... Year Level: .....

Name: ..... Year Level: .....

Name: ..... Year Level: .....

Are siblings currently enrolled to attend Gippsland Grammar? Yes  No

Is either parent/guardian a past student of this school? Yes  No

Does your child have any special needs? Yes  No

If yes, please outline

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Submission of this form will place your child on a waiting list for enrolment at Gippsland Grammar Early Learning Centre. Offers of places will be made via email in the year prior to entry according to the enrolment criteria determined by the School and Early Learning Centre.

I/We acknowledge responsibility for the payment of all Early Learning Centre fees and charges.

**Both Parents or Guardians to Sign**

Signed ..... Print Name .....

Signed ..... Print Name .....

Date .....

Where only one parent/guardian has signed the form they must satisfy the School that they are the sole parent or guardian and will be responsible for all fees and charges.

**Please forward completed application to:**

The Director  
Gippsland Grammar Early Learning Centre  
PO Box 465  
SALE VIC 3850

**Gippsland Grammar Early Learning Centre**  
59 York Street  
SALE VIC 3850

**Telephone:**  
**(03) 5143 7123**

**OFFICE USE ONLY**

<i>Date application received</i>	<i>Database</i>	<i>Parent Code</i>	<i>Student Code</i>	<i>Action</i>