

20 WAITING LIST APPLICATION

Private and Confidential

This is an Application Form only and does not guarantee a place for your child. Vacancies at the Centre are filled according to the Priority of Access guidelines set by the Government and by the length of time your child's name has been on our Waiting List.

Name of Centre: _____

Date of Application: _____

<u>Details of Child:</u>	
Surname: _____ Given Name/s: _____	
Gender: male / female (circle one)	Primary Language Spoken:
Religion:	Nationality:
Date of Birth:	Age: years- months-
Address: _____ <div style="text-align: center;">P/C</div>	
Marital Status of Parents: (please circle one) married/ defacto/ divorced/ separated/ widow/ single	
Child Lives With: (please circle one) both parents/ mother/ father/ other relative/ guardian	
<u>Primary Guardian/Parent</u> Name:	<u>Other Guardian/Parent:</u> Name:
Address: (if different from child's address)	Address: (if different from child's address)
Telephone: Home: Work: Mobile:	Home: Work: Mobile:
Occupation:	
Employer:	
Employer Address:	
Employer Phone:	

