Section 1

Trinity Lutheran College Early Learning Centre Waiting List Application Form

TRINITY
LUTHERAN COLLEGE

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.

A Waiting List Application fee of $55.00 (incl. GST) must accompany this application.

Child/ren name/s (block letters):

Given name: _____ Surname: _____ D.O.B: _____ Male / Female

Given name: _____ Surname: _____ D.O.B: _____ Male / Female

Given name: _____ Surname: _____ D.O.B: _____ Male / Female

Parent/Guardian Details (block letters):

Given name: _____ Surname: _____ Email: _____

Given name: _____ Surname: _____ Email: _____

Phone: _____ Work: _____ Mobile: _____

Address: _____

Commencement date required: child 1: _____   child 2: _____   child 3: _____

Days and Sessions Required (please tick boxes required):

	Sessions 8.45 am to 2.45 pm Kindergarten Program Onlly			Long Day 7.00 am to 5.00 pm Kindergarten and Junior Kindergarten		
	child 1	child 2	child 3	child 1	child 2	child 3
Monday:	☐	☐	☐	☐	☐	☐
Tuesday:	☐	☐	☐	☐	☐	☐
Wednesday:	☐	☐	☐	☐	☐	☐
Thursday:	☐	☐	☐	☐	☐	☐
Friday:	☐	☐	☐	☐	☐	☐

Please nominate your priority group (please tick the boxes that apply)

Child at risk of serious abuse / neglect ☐

Single parent working / training / studying or two parents working / training / studying ☐

All other children ☐

Do you identify with any of these groups? (please tick the boxes that apply)

Aboriginal or Torres Straight Islander ☐

Family member with a disability ☐

Non-English speaking background ☐

Socially isolated family ☐

Signatures

First Parent / Guardian signature: _____

Second Parent / Guardian signature: _____

Please return form and payment to Susan Shaw, Director of The Early Learning Centre:

P: 07 5556 8336   **E:** susan.shaw@tlc.qld.edu.au   **W:** www.tlc.qld.edu.au

Section 2 · Office Use

Check list:

$55 waiting list fee received	YES / NO
Signature of staff member receiving application:	_____
Date application received:	_____
Entered into waiting list	YES / NO
Priority of access: (please circle only one)	1 2 3

Follow up notes:

_____

_____

_____

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Date place offered: _____ Accepted: YES / NO _____

Orientation interview date: _____

First Day: _____ Group: _____