

**APPLICATION FOR A PLACE IN THE WPS  
KINDERGARTEN PROGRAM IN 2022**  
(For children born between 1<sup>st</sup> July 2017 and 30<sup>th</sup>  
June 2018)

**Applications should be made ASAP**

Name of child: \_\_\_\_\_ (First Name) \_\_\_\_\_ (Surname) MALE  FEMALE

Childs date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Aboriginal / Torres S.I YES  NO

Address: \_\_\_\_\_  
(Wickham PS is a local intake area school to residents of Wickham, Point Samson and Cossack)

Name of parent/guardian completing application: \_\_\_\_\_ (First Name) \_\_\_\_\_ (Surname)

Phone number : (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Mob) \_\_\_\_\_

Name(s) and year level of older brothers and sisters who are attending Wickham PS in **2021**

\_\_\_\_\_

Permanent resident of Australia? YES  NO

If no, please indicate date entered Australia \_\_\_\_\_ Visa Sub Class No \_\_\_\_\_

Can your child speak/understand English? YES  NO

If your child's main language is not English, please specify language mainly spoken at home:

\_\_\_\_\_

**Disability/ Medical Condition?**

This information will assist the school principal with considering whether any specific or additional resources are required and available to assist the school with providing the best educational program for your child.

Physical  Intellectual  Other  Medical Condition

Please outline the nature of disability/medical condition: \_\_\_\_\_

Are there any Family Court or any other Court Orders relating to this student Yes  No

I declare that this is the only application for a Kindergarten place that I have made for my child.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Required Documentation :**

**Please email or provide copies of the following documents to proceed with enrolment – office use below**

**Proof of Address**

**Childs Birth Certificate**

**Immunisation History Statement**  
(no more than 2 months old)