

Loddon Shire Council EYM Kindergartens

(Kindergarten name)	(Program)

Help with this form

If you require any assistance completing this form please contact the Early Years Team on (03) 5494 1200 or email earlyyears@loddon.vic.gov.au

GENERAL DETAILS

Child details						
Surname:		Date of birth:				
First name:			Gender: ☐ Female			Male
Preferred name (if different)		Birth ☐ Single child ☐ details: ☐ Triplet or more		☐ Twin		
Street:			Town:			
State:			Postcode:			
Child lives with:		□ Parent/s □ Informal Kinship Care □ Formal Kinship Care			al Kinship Care	
NA-:-		☐ Foster Care	☐ Other			
Main language(s) s	spoken at nome:					
Child's first langua	ge:					
Child's country of b	oirth:					
Are there any court orders or parenting the child?		□ No □ Yes (p	olease attach	a copy)		
If yes, please desc	ribe:					
Is the child of Abor Torres Strait Island		 □ No □ Yes, is Aboriginal □ Yes, is Torres Strait Islander □ Yes, both Aboriginal and Torres Strait Islander 				
Do you or does the the following cards		of ☐ Commonwealth Health Care Card ☐ Commonwealth Pensioner Concession Card ☐ Department of Veterans' Affairs Gold Card or White Card ☐ Refugee visa ☐ ImmiCard ☐ None of these			Card	
Please provide the primary school the attending (if known	child will be					



Loddon Shire Council EYM Kindergartens

Parent or Guardian details

	First parent or guardian (required)	Second parent or guardian (required if known)
Name	Given name:	Given name:
	Family name:	Family name:
Relationship to child		
	Street	Street
	Suburb/Town	Suburb/Town
Home address	State	State
	Postcode	Postcode
Mobile phone number		
Email address		
Main language spoken (if not English)		
Country of birth		
Year of arrival in Australia (if born overseas)		
Interpreter needed?	□ Yes □ No	□ Yes □ No

Parent Helpers

Volunteers who attend kindergartens during session times are required to have a Victorian Working with Children's Check (WWCC) or Victorian Teachers Registration (VIT) and adhere to child safe standards and policies.

For parents who participate in the program with their child (activities such as reading, fruit duty, excursions etc) no more than once per term, no WWCC is required.

Please tick if any parents/guardians have a WWCC or VIT.

First Parent or Gu	ardian	Second parent of	r guardian
☐ has WWCC	□ has VIT	☐ has WWCC	□ has VIT



Loddon Shire Council EYM Kindergartens

Emergency Contacts

Please provide contact details for at least one person (if possible) who has your permission to make decisions about the child if there is an emergency and we cannot contact the child's parent or guardian/s. For any contacts that will be given permission to collect the child, we recommend choosing people who live in the local area, and give us the best phone number for contacting them during kindergarten hours.

Emergency contact 1	•	ŭ ŭ		
Name	Given name	Family name		
Best phone number				
	Street Suburb/Town			
Address	State			
	Postcode			
Relationship to child				
Areas of authority	□ be contacted in an contacted□ pick up the child from the chil	emergency if the parent or guardian cannot be immediately		
(Please choose all the things you give permission for the emergency contact to do. Make sure that you choose at	☐ agree to an early of doctor, hospital or am ☐ agree to medicine	hildhood educator seeking medical treatment for the child from a bulance service being given to the child		
least one emergency contact for each area of authority.)				
Emergency contact 2 (
Name	Given name	Family name		
Best phone number				
	Street			
Address	Suburb/Town			
Address	State			
	Postcode			
Relationship to child				
Areas of Authority	☐ be contacted in an contacted	emergency if the parent or guardian cannot be immediately		
(Please choose all the things you give permission for the emergency contact to do. Make sure that you choose at	doctor, hospital or am	hildhood educator seeking medical treatment for the child from a		
least one emergency contact for each area of authority.)		hildhood educator taking the child outside the kindergarten grounds y Trauma and Illness Records and Medication Records		



Loddon Shire Council EYM Kindergartens

Δι	uth	orise	Pα	NΩ	mın	22

An **authorised nominee** is someone who has your permission to pick up the child from Kindergarten. Your authorised nominee(s) can be the same as your emergency contact(s).

Please provide contact details for at least one authorised nominee, or check the box(es) to name your emergency contact(s) as authorised nominee(s).

☐ Emergency contact 1 is an a			
Authorised nominee 1			
Name	Given name	Family name	
Best phone number			
Address			
Relationship to child			
Authorised nominee 2 (optional)			
Name	Given name:	Family name:	
Best phone number			
Address			
Relationship to child			
Bus Travel			
Do you wish for the child to tra	avel to Kindergarten	l Yes □ No	

Further consent forms will be sent to you to complete the application for bus travel. Bus travel is managed by your local public school and they can be contacted for further information regarding bus stop locations and times.



Loddon Shire Council EYM Kindergartens

MEDICAL INFORMATION

Immunisation Information	
Are the child's immunisations up to date?	☐Yes ☐No You must give us a copy of the child's Immunisation History Statement showing that their vaccinations are up to date. You must provide this at least
	You can print a copy of the child's Immunisation History Statement from your myGov account or:
	 call the Australian Immunisation Register on phone 1800 653 809 visit a Medicare or Centrelink office.
	Letters from GPs or local councils are <u>not</u> accepted as evidence of immunisation. You will need to give us updated copies of the Immunisation History Statement when the child starts kindergarten and when future vaccinations are due.
	NOTE : If the child is eligible for Early Start Kindergarten, they can be enrolled without up-to-date immunisation information while they undertake catch-up immunisations or apply for a medical exemption under the relevant grace periods of:
	 63-days under the Australian Government's No Jab No Pay 16-weeks under the Victorian Government's No Jab No Play
Have you attached an Immunisation History Statement to this form?	☐ Yes ☐ No If no, you may be eligible for extra time to provide the Immunisation History Statement. Loddon Shire Council will contact you to discuss your enrolment and help you to get the child's vaccinations up to date.
When is the child due for their next immunisation? (if applicable)	
Medical Care Information	
When was the child's last Maternal and Child Health Key Age and Stage visit?	☐ 18 month visit ☐ 2 year visit ☐ 3&1/2 year visit
Maternal and Child Health centre the child attends.	
Please detail any dietary restrictions or sensitivities (including food sensitivities).	
Please detail any diagnosed allergies (including food allergies).	•



Loddon Shire Council EYM Kindergartens

Has the child been diagnosed as at risk of anaphylaxis?*	□ Yes □ No
Does the child have an auto injection device e.g. EpiPen?	□ Yes □ No
Does the child have asthma?*	□ Yes □ No
Please detail any other health needs or medical conditions that the child has, including information about how we can support the child with their medical needs.	
Medical care contact in case of emo	ergency
Does the child have ambulance cover?	☐ Yes ☐ No If yes, please provide the ambulance subscription number:
(registered medical practitioner or medical service)	Name Street Suburb/town Postcode Phone Number
Child's medicare number	THORE HUMBO
 the child starts kindergarten you very start of the child start of the child start of the child start of the child st	th care need (such as asthma, anaphylaxis or an allergy), before will need to: eted Medical, Asthma, Anaphylaxis or Allergy Management plan. teacher with any listed medications with the child's name and dosage isk Minimisation Plan that you complete together with your early earten's Medical Conditions Policy.
Additional Support Information	
Does the child have any additional needs we should know about?	
What is the cultural background of the child and, if applicable, the child's parents?	
Are there any special	

considerations?

considerations for the child? For example any cultural or religious



Loddon Shire Council EYM Kindergartens

		Requires some	Requires high level of
		assistance	assistance
	Speech or language		
	Hearing		
	Sight		
Dear the shill as a since a sisteman	Toileting		
Does the child require assistance with any of the following:	ADHD		
with any of the following.	Behaviour		
	Autism		
	Coordination		П
	difficulties		
	Hyperactivity		
	Other		
If other, please specify			
le the shild receiving (or an a weitlie	_ Speech Therapy	☐ Occupational Thera	py □NDIS
Is the child receiving (or on a waitlis for) support from any of the following support services?	^t □Pediatrician	•	her, Please specify
Additional Services			
Has the child at present or in the pa support from The Orange Door/ Chi		es 🗆 No	
Caseworker's Name			
Agency			
Phone			
PERMISSIONS			
Photography			
Sometimes we take photographs or activities. We will not take or publisl (below).			
Do you give permission for the child videoed at the kindergarten?	to be photographed ar	nd/or ☐ Yes ☐ No	
Do you give permission for the child professional photographer for kinde yearly photos?			
Can the child's photograph be displakindergarten?	ayed inside the	□ Yes □ No	
Can the child's photograph be share of the kindergarten (e.g. in portfolios	ers		



Loddon Shire Council EYM Kindergartens

photos when multiple children are in the photo)?		
Can the child's photograph be published in a newspaper, on the Loddon Shire website, Loddon Shire Facebook page or other publications outside the kindergarten?	□ Yes	□ No
Can the child's photograph be included in group stories on Storypark to be shared with other families?	□ Yes	□ No
Permissions continued		
Staff to support the child to apply sunscreen in accordance with policy/procedure?	□ Yes	□ No
Staff to support the child to apply insect repellant?	□ Yes	□ No
Staff to conduct head lice inspections on the child?	□ Yes	□ No
Staff to communicate with local primary schools in regards to my child and their transition into school?	□ Yes	□ No
Key Pad Code		
The kindergarten entrance is fitted with a coded door handle to p times.	provide se	ecurity to the premises at all
I agree to, discuss with the adults permitted to collect the child from code, the requirement to keep the code confidential and unders in administrative action and loss of knowledge to future confidence.	stand any	
\square By ticking this box, you agree to following the procedure	s around	the use of the door code.
Name of person consenting:		

Parent education and occupation details form

The form and information attached at the end of this document will be used to make sure your kindergarten receives School Readiness Funding. School Readiness Funding funds programs and supports that benefit all children, and builds the knowledge and skills of educators and families.

The information you provide in this section will **not** be used for any other purpose. For further information on the Department's Privacy Policy, visit www.education.vic.gov.au/pages/privacypolicy.aspx



Loddon Shire Council EYM Kindergartens

Communication Agreement

Communication between families and kindergarten educators is vital in ensuring a safe and positive kindergarten experience.

I agree,

- to notify the kindergarten of the child's absence from kindergarten prior to 8.45am on the day of (or prior to the day of) the child not attending the kindergarten service by phone, text or in person.
- to ensure communication with educators is based at the service or via phone or email. Facebook or other social media platforms are not to be used as a method of communication with educators under any circumstances.

 to contact educators if I have any concerns about my child's health and development. to update educators if any of the above information changes, any further health reports are obtained about my child or any updates are made to court orders etc.
$\hfill\Box$ By ticking this box you agree to ensuring open communication between yourself and the kindergarten educators.
Name of person consenting:
Consent
 Agree to collect or arrange for someone to collect the child if they become unwell. Agree that I am responsible to pay any costs incurred if my child has a medical emergency. Agree that I will not share or post on electronic media (e.g. Facebook) any photographs given to me / us by the kindergarten or taken by me that contain other children. I give permission for the Approved Provider, Nominated Supervisor or an Early Childhood Educator to: Seek medical treatment for the child from a doctor, hospital or ambulance service. Take the child outside the kindergarten for emergency situations or emergency evacuation drills
under the supervision of the approved provider, nominated supervisor or early childhood educator.
Declaration
□ By ticking this box, you declare that all information provided throughout this enrolment form is
true and correct.
Name of person consenting:



Loddon Shire Council EYM Kindergartens

Loddon Shire Council is committed to protecting your privacy. The personal information you provide on this form is being collected for the primary purpose of enrolling your child in kindergarten, documenting your child's kindergarten attendance and providing a kindergarten program.

Information provided will be accessed by Early Years Staff to enable them to process your child's enrolment and provide education and care for your child.

Information provided will be shared with the Department of Education (as regulated) for funding purposes.

Loddon Shire Council will not disclose personal information to a third party without consent, unless Council is required to do so by law or other regulation.

Should you wish to access or modify this information, please contact Council on (03) 5494 1200 or email loddon@loddon.vic.gov.au

Attacl	hments
□ Yo	re submitting this form, make sure that: u have filled out all sections of this form u have completed the Consent and Declaration
And, y	you have attached copies of:
	$\hfill\Box$ the child's \hfill Immunisation History Statement, or have contacted Loddon Shire Council to discuss
	☐ any court orders relevant to the child
	☐ any medical management plans relevant to the child
	\Box proof of identity such as the child's birth certificate, passport or Immunisation History Statement (if birth certificate cannot be provided)
	□ any concession cards
	☐ any evidence of Australian visas including ImmiCards
	☐ any evidence of additional needs , such as a document from Family Support Services or a MCH nurse confirming high support needs and/or disability, or a letter from a doctor for complex medical needs

Send this form and attachments by email to: earlyyears@loddon.vic.gov.au Or by post to:

Kindergarten Coordinator Loddon Shire Council P.O. Box 21, Wedderburn 3518 Telephone: (03) 5494 1200



Loddon Shire Council EYM Kindergartens

Parental education and occup	pation details form		
Please tick this box if there is parent/guardian for the child:			Parent/guardian B (must be completed, except where there is only one parent/guardian for the child)
Education Equivalent overseas education	and qualifications are rec	ognised for the purposes	of this data collection.
 What is the highest year of primary or secondary 	Year 9 equivalent or below		
school the parent/guardian	Year 10 or equivalent		
has completed? (tick one) For persons who have never	Year 11 or equivalent		
attended school, mark 'Year 9 equivalent or below'.			
 What is the level of the highest qualification the 	qualification		
parent/guardian has completed? (tick one)	Certificate I to IV (including trade certificate)		
	Advanced diploma / Diploma		
	Bachelor's degree or above		
Occupation			
What is the occupation	•	□ A	□ A
parent/guardian? (See <u>Paren</u> next page)	· · · · · · · · · · · · · · · · · · ·	□В	□В
If the parent/guardian is not		□ C	□С
but has had a job in the last retired in the last 12 months, occupation		□ D	□ D
If the parent/guardian has no the last 12 months, tick 'N'		□ N	□N
the last 12 months because	If the parent/guardian has not been in paid work for the last 12 months because the person cares for their own children full time, tick 'H'		□Н
Name parent/guardian (print)		Date	



Loddon Shire Council EYM Kindergartens

PARENTAL OCCUPATION INDEX

PARENTAL OCCUPATION	INDEX	
MANAGERS	Object Francisco and Managing Principles Company (10)	^
Chief Executives, General Managers	Chief Executives and Managing Directors, Corporate General Manager, Defence Force Senior	Α
Ind Legislators	Officer, Local Government Legislator, Member of Parliament	^
Farmers and Farm Managers Specialist Managers	Aquaculture Farmers, Crop Farmers, Livestock Farmers, Mixed Crop, Livestock Farmers Advertising, Public Relations and Sales Managers, Business Administration Managers,	A
•	Construction Managers, Education, Health and Welfare Services Managers	
lospitality, Retail and Service Nanagers	Accommodation and Hospitality Managers, Retail Managers	В
ROFESSIONALS generally with a bac		
arts and Media Professionals	Music Professionals, Photographers, Journalists and Other Writers	Α
Business, Human Resource and Marketing	Advisers, Human Resource and Training Professionals, Information and Organisation	Α
Professionals Design, Engineering and Science	Professionals, Sales, Marketing and Public Relations Professionals Architects, Designers, Planners and Surveyors, Engineering Professionals	Α
Professionals Education Professionals	Early Childhood Teachers, School Teachers, Tertiary Education Teachers	Α
lealth Professionals	Health Diagnostic and Promotion Professionals, Health Therapy Professionals, Medical Practitioners, Midwifery and Nursing Professionals	A
CT Professionals	Business and Systems Analysts, and Programmers, Database and Systems Administrators, and ICT Security Specialists	Α
egal, Social and Welfare Professionals	Barristers, Judicial and Other Legal Professionals, Solicitors, Counsellors, Psychologists, Social Workers, Ministers of Religion	Α
ECHNICIANS AND TRADES WORKER		
Ingineering, ICT and Science Technicians	Agricultural, Medical and Science Technicians, Building and Engineering Technicians, ICT and Telecommunications Technicians	В
Automotive and Engineering Trades Vorkers	Automotive Electricians and Mechanics, Mechanical Engineering Trades Workers, Panel beaters, and Vehicle Body Builders, Trimmers and Painters	С
onstruction Trades Workers	Bricklayers, and Carpenters and Joiners, Floor Finishers and Painting Trades Workers	С
electrotechnology and elecommunications rades Workers	Electricians, Electronics and Telecommunications Trades Workers	С
ood Trades Workers	Chefs	В
ood Hudes Workers	Bakers and Pastry cooks, Butchers and Smallgoods Makers, Cooks	C
Skilled Animal and Horticultural Vorkers	Animal Attendants and Trainers, and Shearers, Horticultural Trades Workers	С
Other Technicians and Trades Vorkers	Hairdressers, Textile, Clothing and Footwear Trades Workers	С
COMMUNITY AND PERSONAL SERVICE	E WORKERS	
lealth and Welfare Support Workers	Ambulance Officers and Paramedics, Dental Hygienists, Technicians and Therapists, Health Workers, Massage Therapists	В
Carers and Aides	Child Carers, Education Aides, Personal Carers and Assistants	D
ospitality Workers	Bar Attendants and Baristas, Cafe Workers, Gaming Workers	D
Protective Service Workers	Police	В
	Defence Force Members - Other Ranks, Fire and Emergency Workers	С
Personal Service Workers	Beauty Therapists, Driving Instructors, Travel Attendants	D
Sports	Sports Coaches, Instructors and Officials, Sportspersons	С
	Fitness Instructors, Outdoor Adventure Guides	D
CLERICAL AND ADMINISTRATIVE WO		
Office Managers and Program Administrators	Contract, Program and Project Administrators, Office and Practice Managers	В
Personal Assistants and Secretaries	Personal Assistants, Secretaries, Legal Secretaries	С
General Clerical Workers	General Clerks, Keyboard Operators	D
nquiry Clerks and Receptionists	Call or Contact Centre Information Clerks, Receptionists	D
lumerical Clerks	Bookkeepers, Accounting, Financial and Insurance Clerks, Bank Workers	D
Clerical and Office Support Workers	Couriers and Postal Deliverers, Filing and Registry Clerks, Survey Interviewers	D
Other Clerical and Administrative	Conveyancers and Legal Executives	В
Vorkers	Court and Legal Clerks, Insurance Investigators, Loss Adjusters and Risk Surveyors Purchasing and Supply Logistics Clerks, Debt Collectors, Human Resource Clerks, Inspectors and Regulatory Officers	C D
SALES WORKERS & MACHINERY OPE		
	ERATORS, DRIVERS AND LABOURERS	С
SALES WORKERS & MACHINERY OPE Sales Agents Sales Representatives, Sales Assistants, Salespersons and Sales Support Workers		C ItD