



Please attach a copy of your child's **immunisation records** from the Australian Standard Vaccination Program. This application **WILL NOT BE PROCESSED** without proof of immunisation.

APPLICATION PAYMENT DETAILS

PLEASE NOTE

In celebration of Little Oxford Montessori's opening, we are temporarily waiving our \$75 Waiting List Application Fee*.

Families who apply to our Waiting List up to mid-April, 2019 will not be charged a fee. This offer is valid up to and including **15th April, 2019**.

If you are submitting this application after 15th April, 2019 please visit www.samontessori.com.au to download an updated copy of the Waiting List Form containing fee and payment information.

**This offer is available only at Little Oxford Montessori, and not at our other SA Montessori centres. If you also wish to apply to the waiting list of any of our sister centres, you will need to lodge a separate Waiting List application at each centre of choice, and forward payment and immunisation directly to the relevant centre/s as per the instructions on each centre's Waiting List Application form. A \$75 Waiting List fee will be payable for the first centre you apply to with a discounted \$25 fee for any subsequent applications.*

Forms are available at www.samontessori.com.au.

CHILD'S BOOKING DETAILS

Family name: _____ Given names: _____

Date of birth: / / Gender of child: _____

Does your child have additional care needs or require medical management? *Please detail:*

When would you like your child to begin? Month _____ Year _____

Please nominate your preferred entry level:

- Nido:** 6 months - 12 months
- Piccolo:** 12 months - 2 years
- Bambini:** 2-3 years
- Pre-school:** 3 years - school age

Please circle preferred days: **M T W Th F**

Hours of Operation: M-F 8:00 am – 5:30 pm
Please refer to Prospectus for Nido hours.

PRIORITY ACCESS

We abide by the Priority of Access Guidelines set by the Department of Family and Community Services (Refer <http://www.education.gov.au/priority-allocating-places>). To help us equitably fill vacancies, please tick the appropriate boxes below if you fit the circumstances listed, and attach further details.

- a child at risk of serious abuse or neglect
- a child of a single parent who satisfies, or of parents who both satisfy, the work, training, study test

DETAILS OF PARENT/GUARDIAN APPLYING

Family Name: _____ Given Name: _____ Relationship to child: _____

Phone (1): _____ Phone (2): _____

Email: _____

Address: _____

Town/Suburb: _____ P/Code: _____

APPLICATION AGREEMENT

- I wish to apply for a placement at Little Oxford Montessori Pre-school.
- I understand that this application **does not guarantee** an offer of placement.
- I accept that placements are at the discretion of the Centre Director and can be influenced by Priority of Access Guidelines.
- I have attached a copy of my child's immunisation records.
- I have included the ~~\$75 Application Fee (or \$25 Sister Centre Fee)~~. **I understand that this processing fee is non-refundable.** (Fee waived for applications prior to 15/4/19).
- I understand that I must apply directly to Centrelink for child care entitlements if I intend to claim them.

Signature: _____ Date: / /

Please return this form to Little Oxford Montessori Pre-school:
18 Trimmer Tce, UNLEY SA 5061, or email to oxford@samontessori.com.au

OFFICE USE ONLY

Date Received: / /

Date Payment Received: / /

Immunisation Record Attached? YES / NO (If NO, date received: / /)

Date of original Waiting List application: / /

Date visited: / /

Date of Contact	Details	Name of staff member