

Application for Kindy 2026 Baynton West



Please ensure that you include the following with the application

- Birth Certificate
- · Immunisation that has been printed from MyGov within the past two months
- Proof of address. Baynton West Primary requests two forms to prove that you are within our local intake area. One being a - Rental Agreement, Proof of Purchase, Letter from Employer - only if they provide the housing Second one - Drivers License, Contents Insurance, Utility Bill

For a school with a local intake area, the principal will give enrolment priority in the following order:

- First priority A child residing in the local intake area who will have a sibling enrolled at the school for that year, and
- who lives nearest to the school.
- Second priority A child residing in the local intake area who will not have a sibling enrolled at the school for that year, and who lives nearest to the school.
 - Third Priority A child residing outside the local intake area who will have a sibling enrolled at the school for that year, and who lives nearest to the school.
 - Fourth priority A child residing outside the local who will not have a sibling enrolled at the school for that year, and who lives nearest to the school.

SCHOOL NAME School name **Baynton West Primary School** PERSONAL DETAILS (Please complete all details below) Child's surname Legal surname (if different) **Given names** Date of birth (dd/mm/yy) Gender Male Female Not Specified **Parent Surname Parent First Name** Other Title () Mrs **Residential Address** (must be completed) Postcode Postal Address (if different from residential address) Postcode Telephone (Work) **Telephone (Home)** (If convenient) Mobile Phone No. **Email**

PRIMARY SCHOOL

PERSONAL DETAILS (Continued)

Year Level enrolling in Kindy 2026

Children accepted into a Kindy program in 2026 will:

- Recieve a letter of acceptance will be sent out at the beginning of Term 4
 Parents/Caregiver and Children will be invited to an orientation during Term 4

Are there any Family Court O	rders regarding the day to day or long term care, we	lfare and d	levelopmen	t of your child?
YES NO				
Does vour child have an Austr	ralian Immunisation Register (AIR) Immunisation Hi	istorv Stat	ement?	
YES NO				
preventable diseases. Your child must be up-to-date When you enrol your child in long day Australian Immunisation Register (AI	s enrolling a child tion laws that will help to better protect our children and the wide r care, family day care, pre-kindergarten or kindergarten, you will R) immunisation history statement, which shows your child is up- onal Immunisation Program) for their age. This statement must b	need to prov	ide your child's all the schedu	s current led
How do I get a copy of my child's AIR A copy of your child's AIR immunisati schedule. You can also get a copy of t	ion history statement is posted to you when your child completes	the childhoo	d immunisatio	n
 logging into Medicare online via using the Medicare Express Plu visiting a Medicare or Centrelin calling the AIR General Enquiri 	us app			
Will there be any brothers or	sisters attending this school?	YES	NO	
Name/s and year levels				
Have you attended our Waia	of Torres Straight Islander origin? Guma Aboriginal Early Learning Centre? es, please provide the name of the Corporation.	YES YES	NO NO	
Is your child a temporary resid	dent?	YES	NO	
Date entered Australia if born over	erseas.	O 1-1		
Visa Sub Class No.		Visa ex	cpiry date	1 1
	age other than English at home? s, Aboriginal English Yes, other language - please	specify		
(If more than one language, in What was the first language spok Does the student mainly speak		ooken most (often)	
Does your child have a health o	r medical condition, disability or additional needs ?	YES	○NO	*You must tick one, and if yes provide more details
	l principal in planning to provide the best educational program fo	or your child. I	Please provide	
details:				

DECLARATION				
The information and statements	provided in this application for enrolment are true and accurate in relation to:			
Name of person enrolling child				
Title	Mr Mrs Ms Other			
Relationship to child (Independent minors and those aged 18 years or older may apply on their own behalf)				
Telephone (Home)	Telephone (Work)			
Mobile Phone No.				
Signature Date / / If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.				
DOCUMENTS TO BE PROVID	ED			
The school will advise you of any additional documentation required. Checklist: Check the box to indicate documents you can provide to support this application. 1. Birth Certificate or extract or other identity documents 2. Copies of Family Court or any other court orders (if applicable) 3. Proof of address - We require two documents 4. Australian Immunisation Register (AIR) Immunisation History Statement - printed off within the past two months 5. Information relating to health or medical condition, disability or additional needs (if applicable) 6. If your child is not a permanent resident of Australia, you must provide evidence of current visa subclass and previous visa subclass (if applicable, such as if current visa is a bridging visa) Please provide any other relevant information.				
OFFICE USE ONLY				
Documents provided: 1 Birth Certificate or extract or other identity documents Copies of Family Court or any other court orders Proof of address Information relating to health or medical condition, disability or additional needs Test No YES NO N				
Principal's approval	Application for Enrolment approved YES NO			
Name	TES TO			
Signature of principal/delegate	Date / /			