



PRE-KINDERGARTEN EDUCATION PROGRAM

Dear Parents/Guardians

Thank you for your interest in St John Bosco College. This package of information will guide you through the application process for students wishing to attend St John Bosco College's Pre-Kindergarten Education Program.

- Complete all sections in the "*Application for Enrolment Form*". Please return the application with a copy of birth certificate and immunisation records to

"The Principal, Mr Kevin Sheehy St John Bosco College, PO Box 4110, HARRISDALE WA 6112.

- Please note that lodging an application does not automatically result in enrolment. Class sizes are limited, and children may have to be placed on waiting lists.

ENROLMENT INFORMATION

The St John Bosco College Pre-Kindergarten Education Program allows young students to become one in the '**Joy in Learning**'. The aim of the program is to develop the *whole child*. In doing this we not only target cognitive and language goals, but physical and social wellbeing, social competence, emotional intelligence and communication skills.

St John Bosco College prides itself on delivering child centered, meaningful, play-based experiences. The qualified Early Childhood Educators will facilitate the children in all areas of their College day, fostering independence, school readiness and a safe, nurturing environment.

St John Bosco College staff encourages parent participation in their child's learning and believes that parents are first educators. We also believe that early intervention is a key indicator in the success of all children. Working collaboratively with parents is a key goal for this Pre-Kindergarten Education Program.

St John Bosco Pre-Kindergarten Education Program will provide opportunities for all children to achieve success and build a strong foundation of self which will build as they grow and change over their time at the College.

The Pre-Kindergarten Program will operate on a Thursday from 8.45am to 2.45pm in one of the Kindergarten studios. Mrs Justine Bennett is the Classroom Teacher and Mrs Angela Jackson is the Education Assistant.

PRIVACY ACT

- St John Bosco College collects personal information, including sensitive information about students and parents or guardians before and during the course of a student's enrolment at the College. The primary purpose of collecting this information is to provide schooling for your son/daughter.
- Some of the information we collect is to satisfy the College's legal obligations, particularly to enable the College to discharge its duty of care.
- Further information regarding the Privacy Collection Notice are available on College's website. If you have any concerns or questions please contact the Principal.



ST JOHN BOSCO
COLLEGE
JOY IN LEARNING

APPLICATION FOR PRE-KINDERGARTEN EDUCATION PROGRAM

STUDENT INFORMATION

Student surname: _____ First name: _____
Preferred name: _____ Male/Female: _____
Address: _____
State: _____ Postcode: _____
Date of Birth: _____ Birthplace: _____ Birth Certificate Attached: Yes/No
Aboriginal/Torres Strait Islander: Yes/No
If yes to Aboriginal/Torres Strait Islander, then Group of Origin: _____
Religious Denomination: _____

FAMILY INFORMATION

Female Parent or Guardian

Title: _____ Surname: _____ First Name: _____
Address: _____
State: _____ Postcode: _____
Contact Numbers: (H) _____ (M) _____ (W) _____
Email Address: _____ Religious Denomination: _____

Male Parent or Guardian

Title: _____ Surname: _____ First Name: _____
Address: _____
State: _____ Postcode: _____
Contact Numbers: (H) _____ (M) _____ (W) _____
Email Address: _____ Religious Denomination: _____

Custody/Guardianship

Name of person(s) with legal guardianship of the student: _____
If applicable a copy of any Parenting or Restraint Order is attached. Yes/No
Any other conditions enforced at law? _____

INDIVIDUAL NEEDS

The *School Education Act 1999* requires the provision of:

"Details of any condition of the enrollee that may call for special steps to be taken for the benefit or protection of the enrollee or other persons in the school" (16G).

To assist the College to respond to individual requirements please detail any special needs your child has in the following area(s) that may affect his/her learning, participation or welfare during College hours.

Medical/Health Care: _____ Medication: _____
Physical: _____ Orthoses/Prostheses: _____
Psychological/Cognitive: _____ Sensory (eg Vision/Hearing): _____
Behavioural or Safety: _____ Communication: _____
Allergies: _____

If medication or medical/health care services are required during College hours please provide full details, name, contact number and signed authorisation by the relevant practitioner.

EMERGENCY CONTACTS (OTHER THAN A PARENT/GUARDIAN)

Name: _____ Relation to Student: _____

Contact Numbers: _____

Name: _____ Relation to Student: _____

Contact Numbers: _____

MEDICAL INFORMATION & IMMUNISATION RECORD

F - fully immunised N – not immunised I – incomplete immunisation P – personal objections

Measles Mumps Rubella Diphtheria Tetanus
Hepatitis B Pertussis Polio (OPV) Immunisation Record Attached
(Whooping Cough) Yes / No

Family Doctor/Medical Clinic: _____

Address: _____ Contact Numbers: _____

Dentist/Dental Clinic: _____

Address: _____ Contact Numbers: _____

Medicare Number: _____ Private Health Fund: _____ Blood Group: _____ (If known)

MEDICAL EMERGENCY AUTHORISATION

I authorise the College to seek medical/dental attention, call an ambulance or to hospitalise my son/daughter when considered necessary. If an emergency occurs requiring surgery, anaesthetic, oxygen, blood transfusion, medication and I/we are unable to be contacted within a reasonable time, I/we authorise the College to agree to medically recommended treatment by an accredited medical practitioner on my/our behalf.

Signature of Parent(s)/Guardian(s): _____ Date: _____

FEMALE PARENT OR GUARDIAN

Date: _____

MALE PARENT OR GUARDIAN

AGREEMENT

I/we understand and accept that the completion of this application/enrolment form does not guarantee a place at SJBC's Pre-Kindergarten education program. Successful applicants will be determined in accordance with the college's enrolment criteria.

I/we understand that enrolment of a student in one Catholic school/college does not guarantee the enrolment of that student in any other Catholic school/college.

I/we have completed this application form fully and to the best of my/our knowledge. Further, I/we acknowledge and accept that if it can be demonstrated that I/we have withheld information relevant to the application/enrolment process, especially in relation to this student's individual needs, medical conditions, health care requirements and/or Parenting Orders, then the enrolment may be refused or terminated on this ground.

I/we have read and fully understand and agree that enrolment in a Catholic school/college means that we and our child will participate fully in all required aspects of the educational program of the school/college including the Religious Education program of the school/college.

I/we agree to abide by the policies and directions of the College and the Catholic Education Commission of Western Australia as they are enacted from time to time.

I/we accept the following:

- **SJBC's Pre-Kindergarten Education Program is a full day service. Billing will reflect this.**
- **The Fee Schedule is \$2754 per student per year.**
- **\$688.50 per student per term (When a student misses a day for sickness or other reason there is no refund.)**
- **Enrolment at SJBC's Pre-Kindergarten Education Program does not guarantee a position in Kindergarten.**
- **A child must have turned 3, before attending SJBC's Pre-Kindergarten Education Program.**

Signature of Parent(s)/Guardian(s): _____ Date: _____

FEMALE PARENT OR GUARDIAN

Date: _____

MALE PARENT OR GUARDIAN