



Early Childhood  
Management Services  
PO Box 182  
Northcote Vic 3070  
Ph: 8481 1117

## CAULFIELD PRIMARY EARLY CHILDHOOD CENTRE

### ENROLMENT APPLICATION

**3 YEAR OLD**



Caulfield Primary Early  
Children's Centre  
724 A Glenhuntly Road  
Caulfield South Vic 3162  
Ph: 9523 1473

#### Eligibility

- Parents may apply for enrolment from the 31<sup>st</sup> January two years prior to the year attending.
- Children are eligible to attend three year old kindergarten if they turn three years of age by 30<sup>th</sup> April in the year of attendance.
- If your child turns three (3) between **February 1<sup>st</sup> and April 30<sup>th</sup>** in the year of attendance they **will be** allocated a place but **will not** be able to attend until they turn **3**.
- Parents accepting a position for a child who has not yet turned **3** will need to **pay the full term fees to secure the place**.

#### Procedures

- All applications will be date stamped and entered into the system in **date** order.
- No forms will be dated earlier than 31<sup>st</sup> January two years prior to the year attending.
- Forms received prior to this will be returned to sender for re-posting.
- You will receive confirmation of your application within 14 days.
- Places will be allocated on the basis of date of application. When you apply, a corresponding application number is allocated to you to indicate the date of application.
- All applicants who have been unsuccessful will be informed and placed on a waiting list and notified.

#### Deferrals

- If a parent defers once their child has **started** then they will receive an automatic reserve place the following year.
- Parents who are offered a place for their child and defer prior to attendance will be added to the reserve places for the following year.
- Parents wanting to delay their child's attendance until the following year need to enrol for that year as per usual process.

#### Steps

- Complete the attached enrolment application form.
- Enclose a copy of Birth Certificate or suitable evidence of child's date of birth (a certified copy is not required).
- A non-refundable \$15.00 registration fee in the form of a **cheque** or **money order (made payable to ECMS)** or **Credit Card** is required to place a child on the enrolment list

Return your application to:-

**The Enrolment Officer  
ECMS  
P.O. Box 182  
NORTHCOTE VIC 3070**

#### Vacancies

- Where vacancies exist/arise during the year and there are no eligible children on the waiting list, children who turn **3 after 30<sup>th</sup> April** may be offered a position. **NB: These children will not be eligible for 4 year old kindergarten the following year.**

*4 year old enrolments for Caulfield Kindergarten are managed by the City of Glen Eira. Enrolment forms must be completed and submitted to the City of Glen Eira. Enrolment forms can be obtained from the Kindergarten, or downloaded from the council website. [www.gleneira.vic.gov.au](http://www.gleneira.vic.gov.au)*

**Entry into 3 year old kindergarten does not guarantee a place in the 4 year old kindergarten program.**

**Please phone Early Childhood Management Services (ECMS) on 8481 1100 for further queries**



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***Please return your form to:  
ECMS Enrolment officer  
PO Box 182***

Application No: _____
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Year requested for attendance: \_\_\_\_\_

Child's family name: \_\_\_\_\_

Given names: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Date of birth: \_\_\_/\_\_\_/\_\_\_ Male  Female  (Proof of child's D.O.B.)

Parents/guardians names: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Business: \_\_\_\_\_

Mobile number: \_\_\_\_\_ Email: \_\_\_\_\_

Language spoken at home: \_\_\_\_\_

Is the child of Aboriginal and / or Torres Strait Islander descent?  Yes  No

Does your child have any special needs / allergies / other medical condition? <input type="checkbox"/> Yes <input type="checkbox"/> No Please give details: _____
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Please notify ECMS of any changes to your address or other relevant information on Ph: 8481 1117 Fax: 9445 0346 or email: [ecms@ecms.org.au](mailto:ecms@ecms.org.au)

Print name of parent/guardian: \_\_\_\_\_

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

**Payment of Administration fees.**

Payment can be made by either:- Cheque  No. \_\_\_\_\_ Bank \_\_\_\_\_  
Money order  No. \_\_\_\_\_

Or

Credit card details :-

Expiry Date \_\_\_/\_\_\_/\_\_\_ Card holders signature: \_\_\_\_\_