

Loreto College Early Learning Centre

Application for Admission



CHILD DETAILS

| | | |
|-----------------------|------------------------|----------------|
| Given name(s) | Surname | Preferred name |
| Date of birth | Gender Female Male | |
| Religion/Denomination | Residential address | |
| | Postcode | |

Student lives with:

Both parents Mother (permanently, balanced, occasionally) - please specify
 Carers (permanently, balanced, occasionally) - please specify Father (permanently, balanced, occasionally) - please specify

Nationality Country of birth Main language spoken at home

Is your child of Aboriginal or Torres Strait Islander origin? | Neither | Aboriginal | Torres Strait Islander

CUSTODY INFORMATION

Are there any custody arrangements, orders, parenting orders or parenting plans in relation to your child? | No | Yes

Please provide details:

MEDICAL INFORMATION

Is your child fully immunised according to their age and the National Immunisation Programme? | Yes | No

Does your child have any additional needs that may require support within the ELC? | Physical | Social/Emotional | Medical | Academic

If yes, please give further details and/or attach relevant documentation.

OTHER CHILDREN IN THE FAMILY

| | | |
|------------------|---------------|--------------------|
| Full name | Male Female | Date of birth |
| School attending | | Current year level |
| Full name | Male Female | Date of birth |
| School attending | | Current year level |

RELATIVES

Are there close relatives who are past students of a Loreto school?

| | | |
|--|-------------|--------------|
| Full name | Maiden name | Relationship |
| If a Loreto College other than Loreto Marryatville, please specify | | Year left |
| Full name | Maiden name | Relationship |
| If a Loreto College other than Loreto Marryatville, please specify | | Year left |

PARENT/CARER DETAILS

MOTHER/CARER

| Miss | Ms | Mrs | Dr | Prof

Full name

Email

Address

Postcode

Phone (home) (work)

(mobile)

Occupation

Employer name and address

Parents' marital status

FATHER/CARER

| Mr | Dr | Prof

Full name

Email

Address

Postcode

Phone (home) (work)

(mobile)

Occupation

Employer name and address

ADMISSION DETAILS

Proposed calendar year of ELC entry: 20 _____ Month _____ Age of child on ELC commencement: _____
Preferred days (please tick all that apply) | Monday | Tuesday | Wednesday | Thursday | Friday | _____ Number of days per week _____

PROGRAM OF INTEREST

| **Gumnut** (6 weeks-18 months) | | **Wattle** (18 months - 3 years) | | **Banksia** (3-4 years) | | **Preschool** (4-5 years)
I would like to enrol my daughter for entry to Reception at Loreto College. She will commence in the year **20** _____ and in **Term** _____

SIGNATURES

APPLICATION CHECKLIST

- | A photocopy of my child's birth certificate is enclosed
- | A photocopy of my child's passport and Visa (if not an Australian citizen) is enclosed
- | A copy of my child's immunisation records is enclosed (Medicare Immunisation History Statement)
- | Copies of any relevant medical reports or assessments are enclosed
- | Payment of the non-refundable \$95 Application Fee is enclosed or has been made

Both parents' signatures are required, unless one parent is sole custodian.

Mother/Carer Signature _____ **Date** _____

Father/Carer Signature _____ **Date** _____

APPLICATION FEE PAYMENT

Please return the completed Application Form, together with a non-refundable application fee of \$95. *No application fee for playgroup.

Credit Card, Cheque (Payable to Loreto Marryatville Limited), Electronic Transfer

Enrolments Manager
Loreto College
316 Portrush Road
Marryatville SA 5068

Electronic Transfer
Account Name Loreto College Marryatville
BSB Number 015 310
Account Number 777 010 398
Reference Your name

Please charge my credit card: | Mastercard | | Visa
Card Number _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _
Expiry Date _____ / _____ CVV _____

Email: enrolments@loreto.sa.edu.au

Cardholder's Name _____
Cardholder's Signature _____

We/I advise that the application fee of \$95 has been paid by

| **Credit card** | **EFT** | **Cheque**

FEEDBACK

To assist us with the development of future initiatives and to continue cultivating our environment of academic excellence for our students, we welcome your feedback below:

| How did you hear about Loreto College: | Which factors influenced your decision to enrol your child at Loreto ELC? |
|---|--|
| Current Loreto College parent | Old Scholar or family connections to the College |
| Parent or grandparent is a Loreto Old Scholar | Location or geographic convenience |
| Family/friends recommendation | Other (please specify): |
| Internet search/Loreto website | |
| Reputation or community profile | |
| Print advertisements | |
| Radio | |
| Social media (please specify): | |
| Digital advertising | |
| College signage | |
| College tour | |
| Other (please specify): | |

Educating strong, passionate and confident girls and young women.