

Bathurst Early Learning Centre

E enquiries@bathurstelc.com.au / W www.bathurstelcc.com.au



First Name:	Family Name:	DOB: / /
First Name:	Family Name:	DOB: / /

PARENT/GUARDIAN DETAILS

Parent/Guardian Name #1:	Parent/Guardian Name #2:
Address:	Address:
Mobile:	Mobile:
Email:	Email:
Employer:	Employer:

DAYS OF ATTENDANCE YOU REQUIRE

Mon: AM ()	Tues: AM ()	Wed: AM ()	Thurs: AM ()	Fri: AM ()
Mon: PM ()	Tues: PM ()	Wed: PM ()	Thurs: PM ()	Fri: PM ()

PRIORITY OF CARE

Permanent child care places are allocated to families based on the Australian Government Department of Education Guidelines. Please indicate your current family situation:

Two parents - working, seeking employment, studying

One parent - working, seeking employment, studying

One / Two parents not working

Explanation of family circumstances:

This waiting list form is only for permanent BELC places only. It is not a guarantee that you have a place at the centre. The FAO priority of access conditions apply and then further priority is for current BELC families and siblings. You will be notified by the centre if a place becomes available on the day you require.

Name: _____

Signature: _____

Date of Application: ____/____/____

Office use only :

Date received: ____/____/____

Received by: _____ Entered by: _____