



St Michael's School

(Established 1914)

4 James Street, Bassendean WA 6054
Phone: (08) 6278 9888
Email: admin@stmichaelsbass.wa.edu.au

Expression of Interest for Enrolment in THREE-YEAR-OLD PROGRAM

Thank you for your expression of interest to seek enrolment for your child in the Three-Year-Old Program at St Michael's School.

*Please be aware that this is not an automatic enrolment,
but an expression of interest to be considered for enrolment only.*

Please also be aware of the following:

- Acceptance of enrolment in the Three-Year-Old Program **does not guarantee enrolment in Kindergarten** at St Michael's School.
- Enrolment in the Three-Year-Old Program is on a first come, first served basis.
- For information about our enrolment priority for K-6, please see our website: www.stmichaelsbass.wa.edu.au/enrolment

TO SUBMIT AN APPLICATION FOR YOUR CHILD, PLEASE RETURN THE FOLLOWING:

- Expression of interest form
- Copy of Birth Certificate
- Copy of Australian Immunisation Registry Statement (AIRS) dated within 2 months of application date.
 - A child's current AIR statement can be accessed by the parent/guardian through:*
 - MyGov, by logging in to your Medicare online account
 - Medicare Express Plus App, by logging in to the Medicare account
 - Visiting a Medicare or Centrelink office, or
 - Calling the AIR General Enquiries Line on 1800 653 809 for the Statement to be posted.

Please note the following:

1. Students are not eligible to commence the Three-Year-Old Program until on or after their third birthday.
2. **Students must be toilet trained** prior to commencing the Three-Year-Old Program.
3. Parents of students in the St Michael's School Three-Year-Old Program are **not eligible to claim the child care rebate.**

Thank you for your interest in St Michael's School.



ST MICHAEL'S SCHOOL

4 James Street (P.O. Box 428), Bassendean WA 6934
Telephone: (08) 6278 9888 Fax: (08) 9377 3149
Email: admin@stmichaelsbass.wa.edu.au

EXPRESSION OF INTEREST : THREE-YEAR-OLD PROGRAM

Please note, applications are NOT a guarantee of enrolment; and acceptance of enrolment into the Three-Year-Old Program does not guarantee future K-6 enrolment.

PLEASE COMPLETE ALL QUESTIONS. PLEASE PRINT CAREFULLY.

Student's Surname: _____ **First Name:** _____

Date of Birth: _____ Female Male (please tick)

Home Address: _____ Postcode: _____

Postal Address: _____ Postcode: _____

Home phone: _____ Mobile: _____

What is your child's religion? _____

Indigenous: YES NO (please tick) Main language spoken at home: _____

Special Needs/Medical Conditions: _____

DAYS REQUIRED (please tick): TUESDAY THURSDAY BOTH DAYS

Children are eligible to commence Three-Year-Old Program on or after their 3rd birthday.

What is the preferred commencement date for your child: _____

Mother's Full Name: _____ **Title:** _____

Home Address: _____ Postcode: _____

Postal Address: _____ Postcode: _____

Home phone: _____ Mobile: _____

Email: _____

Father's Full Name: _____ **Title:** _____

Home Address: _____ Postcode: _____

Postal Address: _____ Postcode: _____

Home phone: _____ Mobile: _____

Email: _____

Siblings currently attending St Michael's: _____

Extra information you think is relevant for the school to know: _____

Parent's Signature: _____ **Date:** _____