# Appendix D | CRES Registration Form template

### About this template

This template is a registration form for families and carers to register their interest in a kindergarten place for their child. It can be used as a **paper form and a digital form**.

Use this form in *Stage 2: Registration* (see the **CRES Practice Guide** for information about this stage).

### To complete this template:

1. All template content *can* be tailored, but content highlighted in yellow **must** be updated to be relevant to your CRES. Consider your location and context, whether your CRES charges fees and whether you have additional local priority criteria. For example, “[council name]” must be replaced with the name of your council for content to make sense.
2. Change this form to CRES Provider branding

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| Refer to the instructions listed in each section in these purple boxes. Once the form is complete, **delete all instruction boxes.** |

### How to use this form when completed:

1. Remove the first two pages of this document.
2. This registration form template works as both a printable paper form and a digital form.
3. for a paper form, keep all red text and change it to black.
4. for a digital form, use your organisation’s online form capabilities and **delete red text as needed**.
5. Send the form to all CRES Partners and local organisations who have contact with families and carers.

**KINDERGARTEN REGISTRATION FORM**

**[CRES provider]**

**CENTRAL REGISTRATION AND ENROLMENT SCHEME (CRES)**

This registration form is the first step to get your child into kindergarten in 20XX. [CRES Provider] manages registration for [number] kindergartens in [LGA]. These are listed on our website: [insert link to full list of providers participating in CRES] or on page XX. Use this form to register for any of the kindergartens on the list. To enrol at a kindergarten that is **not** on this list, contact the kindergarten directly.

[CRES Provider]will use the information you provide to find your child a place in a kindergarten. Once you have been offered and accepted a place, we will also share your child’s information with the kindergarten.

If you have the internet and an email address you check regularly, you can do this form online at [link to online form].

**Help with this form**

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| Edit this section to reflect help available to support families and carers to fill in this form.  We recommend translating your registration form into all commonly spoken first languages in your LGA and including a ‘listen’ link in any online registration form. You can confirm the commonly spoken first languages in your LGA via ABS Census data at www.abs.gov.au/census. |

[Describe how a family or carer can get help with filling out this form. This could be providing the contact details for a support person in your organisation; or contact details of support services who can assist. Provide information on any support available in languages other than English, for example how to organise an interpreter. This section should help families and carers to know how and where they can get help if they have difficulty filling in this form.]

**Priority places**

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| If your CRES includes local prioritisation criteria beyond the Department of Education’s (DE) Priority of Access guidelines, provide a link to information about these local criteria. |

We prioritise kindergarten places for children most in need. This form asks for information we need to decide if your child should have priority. For more information about priority criteria and how places are given out, visit [www.education.vic.gov.au/childhood/providers/funding/Pages/Priority-of-Access-Criteria.aspx](http://www.education.vic.gov.au/childhood/providers/funding/Pages/Priority-of-Access-Criteria.aspx) and [name of and link to Council’s webpage with criteria].

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| During development of your CRES, you should have decided whether to charge a registration fee. If you **are** charging a registration fee:   * include and tailor the section below * attach your organisation’s standard credit charge form with any paper forms.   A registration fee **should not** be charged for children who meet the Department’s Priority of Access criteria.  Having any fee at all will be a barrier to some families and carers not considered a “high priority” by the DE Priority of Access criteria. This can be mitigated by providing a partial waiver for families and carers that can demonstrate extenuating circumstances.  If you are not charging any registration fee, delete the section below.  For an online form, review the payment option text and delete any options that do not apply. |

**Fees**

The registration fee is [$fee amount]. This one-time non-refundable fee can be paid:

* online by credit card
* at a [CRES Provider] service desk
* by completing the credit card charge authorisation with this form, or
* by bank cheque with this form.

You do **not** have to pay the registration fee if your child meets the priority criteria.

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| Gathering documents is difficult for many families and carers. To make accessing kindergarten as easy as possible, it is strongly recommended that you **do not collect** documents proving the child’s birth date, address, visa status, concession card status or similar at registration. Instead, the form allows families and carers to certify that the information they have provided is true.  After registration, the CRES Provider, kindergarten, Maternal and Child Health nurse or support service staff can help the family or carer to gather documentation for enrolment.  However, if you decide this documentation **is** needed at registration, you may wish to include below paragraph. |

**Before you start, make sure you have:**

* **Proof of identity**: your child's birth certificate, birth notice, or passport (please speak to us if these are not available as a doctor’s note and/or Medicare card and/or Immunisation History Statement may be used in some cases)
* **Proof of address**: a utilities bill, rental agreement or rates notice with your family name and address (this must be where your child lives most of the time)
* **Any concession cards**
* **Any evidence of Australian visas including ImmiCards**
* **Any evidence of additional needs:** such documents from Family Support Services or a Maternal and Child Health nurse confirming high support needs and/or disability, or a letter from a doctor for complex medical needs.
* [other proof required to verify the child meets local criteria]

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| If implementing this form digitally, consider which fields need to be mandatory to ensure people cannot submit the form without completing all relevant sections. |

I am registering my child for:

☐ Three-Year-Old Kindergarten to start in 20XX (child must turn three by April 30 20XX)

☐ Four-Year-Old Kindergarten to start in 20XX (child must turn four by April 30 20XX)

Please check the box that applies:

☐ This is the first registration form I am completing for this child this year  
☐ I am re-submitting a child’s registration form to change my preferences or details (only complete the **child’s name** and **any changed details**)

**Child details**

We have added the information that you provided in the registration form. Please correct any details that need to be changed.

|  |  |
| --- | --- |
| Child’s given name/s |  |
| Child’s family name |  |
| Gender | ☐ Male ☐ Female ☐ \_\_\_\_\_\_\_\_\_\_ |
| Date of birth | DD / MM / YYYY |
| What is the main language spoken at home? |  |
| Has the child already been to kindergarten? | ☐ Yes, Three-Year-Old kindergarten  ☐ Yes, Four-Year-Old kindergarten ☐ No |
| Are the child’s immunisations up to date?  The child must be fully vaccinated to go to kindergarten. You will be asked to provide your child’s Immunisation History Statement when they enrol at kindergarten. | ☐ Yes ☐ No  *If you have answered no, please talk to your doctor or Maternal and Child Health nurse to organise your immunisations before kindergarten starts.* |
| Is your child of Aboriginal  and/or Torres Strait Islander origin? | * No * Yes, is Aboriginal * Yes, is Torres Strait Islander * Yes, both Aboriginal and Torres Strait Islander |
| Does the child meet any of the following criteria? | * Is a triplet or quadruplet * Attends a Three-Year-Old program through Early Start Kindergarten or Access to Early Learning * Your family has had contact with child protection * Been referred by a Maternal and Child Health nurse, support service or Out of Home Care provider * Has additional needs * You or your child: * hold, have previously held or are applying for a Refugee or Asylum Seeker visa, * or have had refugee experiences prior to arriving in Australia (can be many years ago). * [Local criteria 1] * [Local criteria 2] * [Local criteria 3] * None of these |
| Does the child need extra support because of a disability including intellectual, sensory or physical impairment? | ☐ No ☐ Yes If yes, please give brief details: |
| Do you or the child have any of these cards? (pictured below) | * Commonwealth Health Care Card * Commonwealth Pensioner Concession Card * Department of Veterans’ Affairs Gold Card or White Card * Refugee visa * ImmiCard * None of these |

A picture containing diagram

Description automatically generated

**Parent or guardian details**

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| If you are using a paper form, use the template below.  If you are also creating a digital form, you may want to ask:  ‘Would you like to enter the details of a second parent or guardian?’ You **must** do this if there is a court order that says the person should be told about the registration and enrolment process.  If ‘Yes’ is chosen, the digital form logic should then open the fields for details of the second parent or guardian. |

Please fill out your contact details below. Add contact details for a second parent or guardian if you would like to do so, or if a court order says that they **must** be told about decisions about your child’s education.

We have added the information that you provided in the registration form. Please correct any details that need to be changed.

|  |  |  |
| --- | --- | --- |
|  | First parent or guardian (required) | Second parent or guardian (optional) |
| Name | Given name  Family name | Given name  Family name |
| Relationship to child |  |  |
| Home address | Street address  Suburb  State  Postcode | Street address  Suburb  State  Postcode |
| Mobile phone number (for text message updates) |  |  |
| Other phone number |  |  | |
| Email address (for email updates) |  |  |
| Main language spoken (if not English) |  |  |
| Interpreter needed? | ☐ Yes ☐ No | ☐ Yes ☐ No |

Please add contact details for anyone else who supports the child and who you would like to receive updates (such as a case worker, grandparent, aunt or uncle). We will update them on the child’s registration and enrolment, but they will not be able to make decisions about it.

|  |  |
| --- | --- |
|  | Support person |
| Name | Given name Family name |
| Relationship to child |  |
| Agency (if applicable) |  |
| Residential address (if known) | Street address  Suburb  State  Post Code |
| Phone number |  |
| Email address |  |

**Kindergarten session preferences**

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| Different CRES Providers have different allocation models, which affects the registration form. The three models are:   1. **(Kindergarten nominations) Families and carers choose kindergartens only** – Approximate session times should be published in the registration form or on a website, with the caveat that the times could change. Once children are allocated, the registration list is provided to the service provider. Service providers then collect session time preferences directly from families and carers and create their own schedules. 2. **(Preference driven) Families and carers choose preferred kindergartens and times** – Families and carers choose preferred kindergartens and session times. The CRES Provider drafts a schedule for all service providers in the LGA that maximises family and carers preferences and minimises the number of empty spaces in kindergartens. 3. **(Specific session times) Families and carers choose specific sessions** – Each April, service providers tell the CRES Provider what sessions they will be running for the coming year. The CRES Provider collates this information and publishes the schedule in the registration form so families and carers can see each kindergarten and their specific session times.   Draft text for each allocation model is included below. Select the model used by your CRES and delete the other two models. |

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| **Option 1: Families and carers choose kindergartens only**  Delete the below text if this allocation model is not used in your CRES. |

Please list, in order, the top three kindergartens you would like your child to go to.

1. First choice
2. Second choice
3. Third choice

A list of kindergartens and their likely session times is at [link to full list of providers participating in CRES] or on page XX.

We will do our best to place your child at one of the kindergartens you choose.

We **strongly** encourage you to nominate **three** kindergartens.

You can list one or two kindergartens only, but choosing three kindergartens makes it more likely that your child will be offered a place. If you only list **one** kindergarten, your child will only be given a place **after** places have been given to children with second and third choices.

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| **Option 2: Families and carers choose preferred kindergartens and times**  Delete the below text if this allocation model is not used in your CRES. |

You can choose **session days and times** and three preferred **kindergartens**.

If there is a kindergarten that you prefer, you may want to contact them to check that their session times suit you.

Session days and times

What length sessions do you prefer? Choose **all** that apply:

☐ 5-hour sessions for 3 days per week

☐ 6-hour sessions for 5 days per fortnight

☐ 7.5-hour sessions for 2 days per week

☐ No preference

What days do you prefer? Choose **all** that apply:

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

Kindergartens

Please list, in order, the top three kindergartens you would like your child to go to.

1. First choice
2. Second choice
3. Third choice

You can list one or two kindergartens only, but choosing three kindergartens makes it more likely that your child will be offered a place. If you only list **one** kindergarten, your child will only be given a place **after** places have been given to children with second and third choices.

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| **Option 3: Families and carers choose specific sessions**  Delete the below text if this allocation model is not used in your CRES.  The table below with session times is a sample. Collect information to complete the table between December and February, before registrations start. |

Please choose up to **four** preferences. **Number (do not tick)** your preferences from 1 to 4, starting with number 1 for your most preferred group. **Do not** number groups you are not willing to accept.

Here are some examples of how to fill out your preferences:

[screenshots of a sample form filled out correctly]

20xx session times

Four-Year Old Kindergarten sessions are in grey and Three-Year-Old Kindergarten sessions are highlighted in blue.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Kindergarten | Preference (1 to 4 – choose up to four) | Group | Monday | Tuesday | Wednesday | Thursday | Friday |
| **SUBURB X** |  |  |  |  |  |  |  |
| Kindergarten1 name Kindergarten1 address  4 y/o kinder sessions |  | A | 9am – 2pm |  | 9am – 2pm |  | 9am – 2pm |
|  | B |  | 8.30am – 4pm |  | 8.30am – 4pm |  |
|  | C |  | 9am – 4.30pm |  | 9am – 4.30pm |  |
| 3 y/o kinder sessions |  | D |  |  | 2pm – 5pm |  |  |
| Kindergarten2 name Kindergarten2 address  4 y/o kinder sessions |  | A | 8am – 1pm |  | 8am – 1pm |  | 8am – 1pm |
|  | B | 8.30am – 4pm |  |  | 8.30am – 4pm |  |
| **SUBURB Y** |  |  |  |  |  |  |  |
| Kindergarten3 name Kindergarten3 address  4 y/o kinder sessions |  | A | 9am – 2pm |  | 9am – 2pm |  | 9am – 2pm |
| 3 y/o kinder sessions |  | B |  | 2pm – 5pm |  |  |  |
|  | C | 1.30pm – 4pm |  | 1.30pm – 4pm |  |  |

**Declaration**

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| You can insert your council’s own pro-forma data privacy statement here. |

Do you give permission for this information to be shared with the kindergartens and [council name]’s [name of council’s early years education team / department] to improve the service for the future?

* I give permission for this information to be shared with kindergartens participating in the [council name]’s CRES and [council name]’s [name of council’s early years education team / department] for the purposes of:
  + accessing kindergarten and,
  + if applicable, applying for government funding for any additional support that my child needs to participate.
* I give permission for this information to be **anonymised**, **de-identified** and **aggregated** (and shared with identified third parties) to help predict future needs and help to improve the service.
* I declare that all of the information I have provided on this form is true and correct.

Parent or guardian name (please print):

Parent or guardian signature:

**Before submitting this form, please check:**

|  |
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| If implementing this form digitally, simply make all the fields mandatory to ensure people cannot submit the form without completing all relevant sections and included document uploads where required. Then delete the text below. |

* You have filled out all sections of the form.
* You have chosen your preferred kindergartens and / or session times.
* You have given permission for us to share information with kindergartens.
* You have signed the form.

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| If you have decided that collecting documentation is absolutely necessary, you should include the below bullet points that match the ‘Before you start, make sure you have copies of:’ section at the start of the form.  If not, delete the following text. |

* You have enclosed copies of:
* **Proof of identity**: your child's birth certificate, birth notice, or passport (please speak to us if these are not available)
* **Proof of address**: a utilities bill, rental agreement or rates notice with your family name and address (this must be where your child lives most of the time)
* **Any concession cards**
* **Any evidence of Australian visas including ImmiCards**
* **Any evidence of additional needs:** such documents from Family Support Services or a Maternal and Child Health nurse confirming high support needs and/or disability, or a letter from a doctor for complex medical needs.
* [other proof required to verify the child meets local criteria]

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| Only include the below bullet point if your CRES charges a registration fee. For an online form, instead include a payment page which includes the option to pay by credit card or in person at the nearest council office. The form should be built such that if any of the fields which make a child eligible for a fee waiver are selected, the payment page is deactivated or can be skipped. |

* You have paid the registration fee of [$fee amount] [**or** you are eligible for a registration fee waiver].

**Send this form and any attachments by post to:**

CRES registrations  
[insert council PO Box]

You can also drop this form off at the council office at [insert council address]

**Kindergartens and times**

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| Complete the table below that provides a full list of kindergartens in your CRES. For large councils, it may not be practical to provide a complete list of services on paper  use your judgement.  If you are implementing this form in a digital version, you may want to include a Google Maps widget that shows all of the kindergarten services on a map.  Delete this table if your CRES uses a different allocation model. |

20xx session times

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Kindergarten | Group | Places | Monday | Tuesday | Wednesday | Thursday | Friday |
| **SUBURB X** |  |  |  |  |  |  |  |
| Kindergarten1 name Kindergarten1 address | A | 30 | 9am – 2pm |  | 9am – 2pm |  | 9am – 2pm |
| B | 22 |  | 8.30am – 4pm |  | 8.30am – 4pm |  |
| C | 30 |  | 9am – 4.30pm |  | 9am – 4.30pm |  |
| 3 YO | D | 30 |  |  | 2pm – 5pm |  |  |
| Kindergarten2 name Kindergarten2 address | A | 20 | 8am – 1pm |  | 8am – 1pm |  | 8am – 1pm |
| B | 21 | 8.30am – 4pm |  |  | 8.30am – 4pm |  |
| **SUBURB Y** |  |  |  |  |  |  |  |
| Kindergarten3 name Kindergarten3 address | A | 25 | 9am – 2pm |  | 9am – 2pm |  | 9am – 2pm |
| 3YO | B | 28 |  | 2pm – 5pm |  |  |  |
| C | 30 | 1.30pm – 4pm |  | 1.30pm – 4pm |  |  |