



# School Family Enrolment Form

---

**At Wyndham Park Primary School we like to get to know your entire family when you enrol a child. This allows us to offer support such as Playgroup, Kindergarten referrals, Maternal Health Check referrals and a range of other tailored services.**

The Family Enrolment Form was developed by the Best Start Community Connections Pilot to support families being linked to the right service at the right time. The Family enrolment enables schools to welcome the whole family to the school community and opens dialogue between the person completing the enrolment and the parent.

The information collected enables us to support links to the age appropriate services for your child/ren. It also helps us identify gaps in access to information about how to support family's access to the right services at the right time.

With your permission personal information will not be shared with other services. Only data (numbers) outlining participation in early year services will be shared with the Wyndham Best Start facilitator.

Best Start is a DET Funded Program and the Facilitator is employed by City of Wyndham. Wyndham Best Start is a collaboration between agencies, which are committed to building a robust early years' service system to improve the outcomes for the most vulnerable children and families in the City of Wyndham.

Wyndham Best Start's 2015-2016 indicators / priorities are:

- Increased participation in kindergarten;
- Increased attendance at Maternal & Child Health.

For further information about Best Start please refer to:

<http://www.education.vic.gov.au/about/programs/health/pages/beststart.aspx>



Name: .....

Signature: .....Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Primary School Name: (if previously enrolled at another school)

\_\_\_\_\_

Please complete for child enrolled into school and siblings (0-12 year olds)

**Child #1**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ D.O.B \_\_\_\_\_

Please tick if this child has or is attended the following

- School?
- Kindergarten?
  - Attendance hours per week? - \_\_\_\_\_ hours per week
  - In 4 year old kindergarten or in LDC setting?
- Long day care (LDC)?
- Occasional Care (OCC)?
- Family Day Care (FDC)?
- Out of School Hours program (VAC / OSH)?
- Playgroup?
- 3 year old kindergarten or activity group?
- Maternal & Health Child Health Centre?
- Language spoken at home?
- Interpreter required?
- Health, learning, wellbeing additional needs or concerns?

**Child # 2**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ D.O.B \_\_\_\_\_

Please tick if this child has or is attended the following

- School?
- Kindergarten?
  - Attendance hours per week? - \_\_\_\_\_ hours per week
  - In 4 year old kindergarten or in LDC setting?
- Long day care (LDC)?
- Occasional Care (OCC)?
- Family Day Care (FDC)?
- Out of School Hours program (VAC / OSH)?
- Playgroup?
- 3 year old kindergarten or activity group?
- Maternal & Health Child Health Centre?
- Language spoken at home?
- Interpreter required?
- Health, learning, wellbeing additional needs or concerns?

**Child #3**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ D.O.B \_\_\_\_\_

Please tick if this child has or is attended the following

- School?
- Kindergarten?
  - Attendance hours per week? - \_\_\_\_\_ hours per week
  - In 4 year old kindergarten or in LDC setting?
- Long day care (LDC)?
- Occasional Care (OCC)?
- Family Day Care (FDC)?
- Out of School Hours program (VAC / OSH)?
- Playgroup?
- 3 year old kindergarten or activity group?
- Maternal & Health Child Health Centre?
- Language spoken at home?
- Interpreter required?
- Health, learning, wellbeing additional needs or concerns?

**Child #4**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ D.O.B \_\_\_\_\_

Please tick if this child has or is attended the following

- School?
- Kindergarten?
  - Attendance hours per week? - \_\_\_\_\_ hours per week
  - In 4 year old kindergarten or in LDC setting?
- Long day care (LDC)?
- Occasional Care (OCC)?
- Family Day Care (FDC)?
- Out of School Hours program (VAC / OSH)?
- Playgroup?
- 3 year old kindergarten or activity group?
- Maternal & Health Child Health Centre?
- Language spoken at home?
- Interpreter required?
- Health, learning, wellbeing additional needs or concerns?



## Opportunities and Services available in your community

(School Use only)

Parent Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

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

*(Enrolled at this school)*

Interpreter required? Yes  / No

I am interested in the following opportunities and services and would like to be contacted by the school with further information about the following:

- School Canteen Volunteer
- Community Kitchen (Social Cooking Group)
- Food – Healthy Food club
- Fitness – Gym – body wellbeing club
- Child – learn another language
- Community involvement (volunteering)
- Parenting Clubs / Support
- Cultural group - Culture? \_\_\_\_\_
- Local community playgroup
- Maternal & Child Health Service
- 4 year old Kindergarten
- Social Supports - Making friends (feeling isolated)
- Homework club
- Learning Club (learning new skills – sewing, knitting etc...)
- Single Parents Support Group
- Parent and Friends Group
- Social Craft / Hobby Group
- Settlement Support (newly arrived family support)
- Access to a computer and printer for developing resumes etc...
- Adult education classes
  - English
  - Computer training
  - Resume Writing

**Information on where you can refer families to or get information about what is available.**

Wyndham Child & Family Directory – [www.wcfd.com.au](http://www.wcfd.com.au)

Wyndham Youth Directory – <http://youth.wyndham.vic.gov.au/ysd>

Wyndham City Council website – [www.wyndham.vic.gov.au](http://www.wyndham.vic.gov.au)