

Giant Steps Sydney Ltd



PLAY STEPS

Located at
Caringbah Baptist Church Centre
76 Captain Cook Drive, Caringbah

Application Form

PLEASE
ATTACH
PHOTOGRAPH

Child's Full Name:		
Child's Address:		
Post Code:		
Date of Birth: <i>Please attach a copy of the child's Birth Certificate</i>	Age:	Sex: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
Place of Birth:	Child's Nationality:	
Resident Status:	<input type="checkbox"/> Australian Citizen	<input type="checkbox"/> Resident <input type="checkbox"/> Overseas
Is the child Aboriginal or Torres Strait Islander?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Would you like this Application to be used for entry to our Early Learning Program? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Would you like this Application to be used for entry to our K-6 Program? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Giant Steps Sydney Ltd
ABN 51 087 759 984

"Step House"
23 Punt Road
Gladesville NSW 1675

PO Box 209
Gladesville NSW 1675

Ph: 02 9879 4971
Fx: 02 9879 4974 |

Em: admin@giantsteps.net.au

This form may collect personal information about you or another person. Where you provide information about another person, you should obtain that person's consent to you providing this information to Stepping Stones Early Learning. You and the other person have a right to access personal information that Stepping Stones Early Learning holds about you. Giant Steps handles all personal information in accordance with its Privacy Policy. For more information or to obtain a copy of our Privacy Policy please contact Giant Steps.

Child Profile

Diagnosis:

Must be accompanied by a written diagnosis from a Paediatrician AND a Psychiatrist or Clinical Psychologist

Family Practitioner:

Address:

Phone No.

Paediatrician:

Address:

Phone No.

Neurologist:

Address:

Phone No.

Other:

Address:

Phone No.

Are there any other special circumstances that we need to be aware of?

Offer of Place in Play Steps

This document does not constitute an offer of enrolment. Places will be offered according to availability and student's eligibility and suitability.

Declaration

The information provided in this form and attached documents is true and correct.

Wherever possible, both parents to sign.

Signature of Mother

Signature of Father

Full Name

Full Name

Address

Address

Date

Date

Checklist:

- Completed Application Form
- Full reports of diagnosis from a Paediatrician **AND** a Paediatric Psychiatrist or Clinical Psychologist. Other accompanying documentation may include occupational therapy, speech therapy or psychology reports.
- Immunisation Records
- Read information relating to Offer of Place
- Signed Declaration (above)

Return completed Application Form to:

Jenny Delaney
Giant Steps Sydney
PO Box 209
Gladesville NSW 1675

Office Use:

Date Received: _____