2019 eKindy Queensland – Waiting List Form

THIS IS NOT A REGISTRATION FORM FOR eKINDY.

Completing this form enables the Brisbane School of Distance Education to:

- contact you when registrations for eKindy in 2019 open
- plan staffing and resourcing for eKindy in 2019

Eligibility for eKindy in 2019

- Your child turns **4** by **June 30 2019** (a birth certificate is required at time of registration)
- Your child or a parent is an Australian citizen/permanent resident
- The family/child fits one of the legislated eligibility categories – Distance, Medical or Travelling/itinerant.

Note: Your child's eligibility for eKindy will be assessed when you submit a registration form.

Complete and return the form electronically or complete a printed copy and:

- scan and email to: eKindy@brisbanesde.eq.edu.au
- scan and fax to: **07 3324 0671**
- mail to (mark envelope as): **Attention: eKindy Queensland Administration Officer**
  Brisbane School of Distance Education
  GPO Box 1308, Brisbane Q 4001

Note: Please save the completed form before sending it and keep an electronic/printed copy.

I wish to add our child's name to the contact list for eKindy Queensland registrations in 2019.	
Child's name:	**Date of Birth:** / / **Male** **Female**
Parent name:	**Parent name:**
Residential address:	**Postal address:**
Email address:	**Phone contact number/s:**
Category for eligibility: We live at least 16 km from the nearest early childhood service We will be travelling for at least 10 weeks This child has a medical condition	**Do you have a preference for/link to a School of distance education.** Yes (list) No

Privacy statement for eKindy contact list

The Department of Education, Training and Employment (the department) is collecting personal information on this form in accordance with Chapter 19, Part 1A of the Education (General Provisions) Act 2006. The information will be used to:

- *administer and plan for the provision of appropriate education and support services to children and families;*
- *communicate with families and children.*

The information will be accessed by authorised employees within the department. De-identified information may be supplied to the Commonwealth Department of Education, Employment and Workplace Relations in compliance with Commonwealth/State funding agreements. Personal information will not be disclosed to any other person or agency unless you consent or the disclosure is authorised or required by law. Personal information will be stored securely. If you wish to access or correct any of the information on this form or discuss how it has been dealt with, please contact the school with which you have registered in the first instance. If you have a concern or complaint about the way your personal information has been collected, used, stored or disclosed, please also contact the school with which you have registered in the first instance.

Parent/guardian signature:_____ **Date:** _____/_____/_____