

Deadline: 29 April 2022

Early Intervention Centre Application Form

***Please complete in block capitals with a black pen**

Personal Information			
Surname			
First Name(s)			
Sex (Please Tick)	Male <input type="checkbox"/>	Female	<input type="checkbox"/>
Date of Birth (DD/MM/YY)			
PPS No			
Home Address			
Nationality			
Language(s) Spoken (If applicable)			
Toileting (Please Tick)	Yes <input type="checkbox"/>	No	<input type="checkbox"/>
Family Information			
Parent/Guardian 1 Details:			
Name			
Relationship to child			
Occupation			
Mobile No.		Home No.	
Work No.		Email	
Parent/Guardian 2 Details:			
Name			
Relationship to child			
Occupation			
Mobile No.		Home No.	
Work No.		Email	
Has the applicant a sibling already attending Abacas Special School Kilbarrack?			
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Name of Student	

Emergency Contact Details

Relationship to Child	
Name	
Phone No	

Medical/Educational/Other

Family Doctor (Name)	
Family Doctor (No.)	
Medical issues?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide more details	
Previous Education (Preschool/Home tuition etc. Please provide details of each if applicable)	
Service Provider (Beechpark/SMH/DOC etc)	

Any additional factors concerning your child (medical/educational/social)?
Please outline below

Documentation Enclosed

Important: Documents highlighted in bold and marked with an asterisk must be included with application.

Required Documentation <small>*Must be included with application</small>		Additional Documentation <small>(optional)</small>			
Please Tick	Yes	No	Please Tick	Yes	No
*Copy of Birth Cert			SLT Report		
*Utility Bill			OT Report		
*Psych Report			Other <small>(please specify)</small>		

Signed Declaration	Yes	No
I have enclosed the required documentation as listed above		
I have read and agree with the terms and conditions of the enrolment policy		
I am aware that submission of this form doesn't constitute an offer of a place		

Name of Parent Guardian (Print)			
Signature		Date	

OFFICE USE ONLY

Issued:	Date Received:	Entry Year:
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