

Bush Babes Application

For future placement opportunities



Applicant (Child) Details

First Name (As per ID)

Middle Name (As per ID)

Surname (As per ID)

Preferred First Name

Preferred Middle Name

Preferred Surname

Date of Birth

Gender

☐

Male

☐

Female

☐

Other:

Preferred pronouns

Citizenship

☐

Australian

☐

Permanent Resident

☐

New Zealand Citizen

☐

Other:

Visa sub class

Aboriginal, Torres Strait Islander Status:

☐

Neither

☐

Aboriginal

☐

Torres Strait Islander

☐

Both

Language/s Spoken and fluency (Please list in order of most used at home)

Requested Entry Term

Requested Entry Year

Requested attendance Day:

☐

Tuesday

☐

Wednesday

☐

Either Day

Current Day Care/Playgroup/Program

Does your child have any known medical conditions, allergies or intensive health care needs?

☐

Asthma

☐

Diabetes

☐

Allergies/Intolerances

☐

Hearing Impairment

☐

Vision Impairment

☐

Speech Language Impairment/Delay/Disorder

☐

Mental Health - Anxiety/Depression/OCD etc

☐

Diagnosed Neurodiversity - ADD/ADHD/ASD

☐

Undiagnosed/Under Assessment for
Neurodiversity - ASD/ADD/ADHD

☐

Intellectual Disability

☐

Intensive Health Care Needs (eg Tube Feeding)

☐

Specific Learning Disorder

☐

Autoimmune Conditions

☐

Seizure Disorder (eg epilepsy)

☐

Diagnosed Migraine/Headaches

☐

Physical Disability

☐

Other - detailed below

☐

None - my child has no known or suspected
conditions or health care needs

Tell us more about your above selections or if you feel there is something we should know about your child's current or historical health?

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Parent/Guardian, Sibling & Family Structure Details

Mother/Parent 1/ Carer 1 Details

First Name (As per ID)

Surname (As per ID)

Relationship to student

Preferred First Name

Gender

☐ Male ☐ Female ☐ Other:

Preferred pronouns

Mobile Phone

Work/Home Phone

Email Address

Residential Address (in full including post code)

Mother/Parent 1/ Carer 1 Details

First Name (As per ID)

Surname (As per ID)

Relationship to student

Preferred First Name

Gender

☐ Male ☐ Female ☐ Other:

Preferred pronouns

Mobile Phone

Work/Home Phone

Email Address

Residential Address (in full including post code)

Family Structure

Child Resides with: ☐ Both Parents ☐ Mother Only ☐ Father Only ☐ Shared Custody - including separated parents in shared housing

Are there any relevant Court Orders: ☐ No ☐ Pending ☐ Yes, please attach a copy

Sibling Information

Sibling 1 - Full Name

Gender

Date of Birth

Current School/Day Care /Program

Year Level

Sibling 2 - Full Name

Gender

Date of Birth

Current School/Day Care /Program

Year Level

Sibling 3 - Full Name

Gender

Date of Birth

Current School/Day Care /Program

Year Level

Will you or have you applied for the above siblings to join us (in Bush Babes, Primary School or Adolescent Program)? Do you have plans to grow your family? Please provide further detail below

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Montessori Engagement & Commitment

How did you hear about Margaret River Montessori School? What is your experience with Montessori education or 'The Montessori Method'? Where does your understanding come from?

For example; research, social media, if you know any students or staff at our school, kindly advise us of their names and your relationship to them, you or your child may have previously attended a Montessori program, you might be new to the Montessori Method (which is perfectly fine).

Why have you chosen a Montessori playgroup?

Margaret River Montessori is a 0-18 program, what are your intentions (at this current time) for your child's future education? Have you already applied for the Primary School or do you intend to?

Is there anything else you would like us to know about your child, family or any other information that you might want to provide or think we should know when considering your child's application?

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Parent/Guardian Acknowledgement & Agreement

By signing and/or submitting this application, I/we acknowledge and agree that:

- This application is a request for my/our child to join the Bush Babes waitlist for future placement consideration. It is not an offer or guarantee of placement, and preferred commencement terms or attendance days cannot be guaranteed.
- Bush Babes places are subject to availability and the ongoing planning and composition of each group. The waitlist is not a numbered or strictly chronological queue, and placement considerations may include the child's age, group composition, the family's intentions for future Primary School application, and relevant enrolment criteria and placement considerations outlined in the Enrolments Guide.
- Bush Babes operates on a term-by-term basis. Places are offered for a nominated term and participation does not automatically guarantee a place in subsequent terms. Families will be advised of the applicable arrangements for continuing participation and/or future terms.
- Remaining on the waitlist does not guarantee that a place will become available before my/our child 'ages out' of the participation age range for Bush Babes. Where a requested placement is unavailable, the School may offer an alternative opportunity or continue to consider the application for a future term.
- Bush Babes is separate from application and admission to Margaret River Montessori School. A separate School application is required for future admission, and applying for or participating in Bush Babes does not guarantee, reserve or automatically provide a future School place.
- I/we confirm that I/we have read and understood the current Bush Babes Information Guide, Enrolments Guide and Bush Babes Fee Structure, including relevant program arrangements, eligibility, fees, waitlist and placement information. I/we understand that these may be reviewed or amended by the School from time to time.
- I/we confirm that the information provided in this application is true and complete to the best of my/our knowledge and agree to advise the School of relevant changes while the application remains active. I/we understand that the School may request updated information where required and that I/we may update or withdraw the application at any time.

By signing below, I/we confirm that I/we have read, understood and agree to the above and wish for the child named in this application to be considered for placement in the Bush Babes program.

Mother/ Parent 1/Carer 1 Signature

Parent/Carer 1 Name

Date

Father / Parent 2/Carer 2 Signature

Parent/Carer 2 Name

Date



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