Lake Macquarie Family Day Care A Quality Education and Care Option for Our Community Ph: 02 4921 0156

Email: familydaycare@lakemac.nsw.gov.au





Please complete this information and share with your Educator on or before your child's first day of care.						
Parent name Child name						
Trim File F20/ Enrolment information to be aware of						
☐ Medical condition/health care need - Management Plan form has been completed						
☐ Additional learning and support needs - Physical, cognitive, sensory, communication, social/emotional needs - noted in enrolment						
□child is being supported through a NDIS plan or the NDIS Early Childhood Early Intervention Gateway Learning strategies/equipment/environmental supports to assist child + copy of supporting information/specialist forms/NDIS plan supplied with enrolment						
☐ Parenting plans / court orders - supplied with enrolment						
☐ Other agencies involved with the child's care and permission to release and share information - noted and consent given within child enrolment form						
Comments/information on any of the above:						
Family and cultural context						
 □ My child□ family□ identify as Aboriginal□ Torres Strait Islander□						
My child□ family□ connects to cultural land eg, Awabakal country						
My shild anadys language/s other than English						
☐ My child speaks language/s other than English	(name and relationship to child)					
Other important people in my child's life are who live in the household, are social supports, involved in activities outside of FDC, pets etc	(name and relationship to child)					
Important celebrations, rituals, practices, customs,						
observances in our family						
Things you'd like us to know about your child						
What is your child's favourite thing to do?						
What types of things are they learning and developing at the moment? - development strengths, emerging skills						
How does your child learn new things or approach new experiences and situations?						

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Is there anything	g your child might find upsetti	ng or distressing?			
What help	os them settle and calm?				
How do you thin	k they will respond to being i	n care?			
What is importa	nt for you, for their time in FD	102			
vviiat is iiriporta	int for you, for their time in FD	.C :			
Sleep/rest routing	nes and rituals (including any	particular precautio	ns) - when sleep/rest, for how long, how	best settle,	habits etc
☐ I understand	that educators may only imp	lement practices tha	at align with safe sleep recomme	ndations	Red
			ust be supplied to support any e		
circumstance	es that allow for alternate pra	ctices.			
E . C t I.					
Eating/meals –	routines, feeding ability, any habits, like	es/dislikes, favourite foods	, foods to avoid etc		
Toileting / nappy	/ change — ability, what assistance	needed, routines, particula	r names/words used etc		
Self-heln — drossi	ng, managing belongings, seeking help i	fnoodod			
Geli-Heip — diessi	ing, managing belongings, seeking help i	i needed,			
Communicating	/ interacting / engaging — abi	lities, special words, prefer	ences		
Arrival and departure / transportation arrangements — how will the child travel to and from care					
□ Lunderstand	the educator is not responsib	le for my child until	in the direct care of the educator	rea on s	arrival at
\Box I understand the educator is not responsible for my child until in the direct care of the educator eg, on arrival at the FDC residence/venue or whilst travelling with the educator					
the residence vertee or trime, adverting that the educator					
Is there anything else that is important for us to know?					
I understand separate consent/permissions will be discussed and completed for:					
☐ Administering medication					
☐ Using lotions and preparations					
☐ Participating in water activities					
☐ Interactions between children and household pets/animals - if applicable					
☐ Going on regular outings, or non-regular excursions, or being transported during care - if applicable☐ Releasing or exchanging information with other agencies (not noted with my enrolment record) — if applicable					
☐ Media consent					
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Parent sign		Educator sign		date	

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