

HOLY EUCHARIST SCHOOL Minimum Age Exemption Application



This application form is informed by the Holy Eucharist School Enrolment Policy and Procedures. Please refer to these documents for further information. This application should be completed by parents/guardians/carers in consultation with relevant professionals and provided to the principal for submission to the MACS Regional General Manager.

Note that a student seeking enrolment in Victoria must turn five by 30 April in the year of starting school and early entry will only be possible where specific criteria are met.

To obtain an exemption, evidence must be provided that the child meets **both** of the following criteria:

- 1. the child possesses suitable academic ability; and
- 2. it is in the child's best interests to be enrolled at or attend school. When considering whether early entry to school is in a child's best interests, the child must be at least 4 years, 6 months on or before 30 April in the year of school commencement.

It is the responsibility of the parent/carer to obtain all relevant cognitive assessment/s and/or other reports and evidence to support their child's application.

Applications based solely on parental observations will not be accepted.

Principal to forward completed application form, parent/guardian/carer letter, and supporting documentation to the relevant MACS Regional General Manager.

Child's surname:		Child's first name:
Male:	Female:	Self Identified /Unspecified/indeterminate/X:
Date of birth:	Age:	Year of intended commencement:
Please attach proof, e.g. to age.	, child's birth certificate, p	assport, ImmiCard or letter from doctor attesting
Parent 1/guardian 1/ carer 1 name:		Relationship to child:
Parent 2/guardian 2/carer 2 name:		Relationship to child:
Address:		
Contact number:		Email:
Please provide full detail authority to enrol the chi		renting orders, contact details for those with

1. Reasons for Early Entry

1. INEASONS TO Larry LI	шу		
SUITABLE ACADEMIC CRITERION	V		
Quotient (FSIQ) 2 130?		☐ Yes	□No
above the mean), preferably using the Fourth Edition, Australian and New 2	must be at least 130 (i.e. two or more s he Wechsler Preschool and Primary So Zealand (WPPSI-IV A&NZ), including the ndex Scales, and conducted after the cl	ale of Intellique ale of Intellique ale	gence, sts required
If yes, FSIQ score:	Please attach a copy of the relevant cognitive assessment by an educational psychologist registered under the Australian Health Practitioner Regulation Agency (AHPRA). Note: It is the responsibility of the parent/guardian to obtain the cognitive assessment.		
INTERSTATE TRANSFER CRITER	ION		
Is your child transferring from another school, either interstate or overseas?		☐ Yes	s 🗌 No
	rolment and attendance for more than o information such as attendance and sc		(3 months) at
Previous school's name:			
Address:			
Suburb:		Postcode:	
Principal's name:			
Contact number:	Date of initial enrolment and year level (e.g. Kinder/Prep/Foundation):		
In addition, please provide evidence t	to support:		
BEST INTERESTS CRITERION			
Is your child at least 4 years, 6 mocommencement?	onths on or before 30 April in the yea	ar of school	
relevant information related to their	e best interests of your child? mic, social and emotional needs of your school readiness. Explain why your chi e if the application for early entry was no	ld would be	

Please attach reports or letters from suitably qualified independent professional childhood educators, educational psychologists or allied health professional observations of the child's development, language and communication, literacademic, social ability and emotional maturity related to their school reading must recommend early entry to formal schooling and note the detrimental in should they not attend.	ls that includ racy, numera ness. The do	le acy, ocumentation
☐ Early childhood educator report addressing developmental criteria ☐ Educational psychologist/allied health professional report addressing de	velopmental	criteria
What would be the impact on your child if an exemption is not granted. Please describe what the consequences would be for your child if early ent		roved.
Declaration I declare that the information I have included in this form is true and correct,	and that all r	elevant
supporting documentation is attached.	and that all i	elevani
By submitting this form, you consent to the information contained within the frelevant MACS employees for the purpose of considering your child's application.		nared with
Parent 1/guardian 1/carer 1 signature:		
orginature.	Date:	
Parent 2/guardian 2/carer 2 signature:	Date:	
2. Receiving Principal Endorsement Documentary evidence checklist		
Birth certificate, passport or ImmiCard indicating that the child will be at least 4 years 6 months of age on or before 30 April in the year of commencing school	☐ Yes	☐ No
Copy of a cognitive assessment detailing a ≥ 130 Full Scale IQ (2 standard deviations or more above the mean) conducted post age 4	Yes	□ No
If relevant, evidence from previous school regarding attendance and academic ability (e.g. full details of the previous school, date of enrolment, and year level, transfer notice, letter from principal)	Yes	□ No
Proof that the academic program at the other school was equivalent to the Foundation (Prep) program offered by Victorian schools, e.g. school report	☐ Yes	□ No
Evidence from an authoritative independent source indicating suitable social, emotional and academic ability to attend school:	Yes	☐ No

observations of academic, language/communication, literacy, numeracy skill	Yes	☐ No
observations of social and emotional development	☐ Yes	☐ No
an assessment indicating risk of long-term academic disadvant the application for early entry is not approved	age if Yes	□No
Do you endorse the child for early entry to school?	☐ Yes	☐ No
Please provide reasons for your answer.		
Principal Declaration I declare that the information I have included in this form is true and supporting documentation is attached. Principal name:	correct, and that a	all relevant
Signature:	Date:	
3. MACS Executive Director (or Delegate)	Decision	
3. MACS Executive Director (or Delegate)	Decision	
3. MACS Executive Director (or Delegate)	Decision	
3. MACS Executive Director (or Delegate) Approved Not approved Comments:	Decision	
3. MACS Executive Director (or Delegate) Approved Not approved Comments: Signature:	Decision	