



Nature Alliance Family Day Care Service

Application for Registration & Membership



This form is to apply for Registration and Membership with Nature Alliance Family Day Care Service. If Nature Alliance is able to progress your application, a non-refundable registration fee of \$400(inc GST) (“Registration Fee”) is to be paid. An orientation package will follow. The registration and orientation process is expected to be completed within three months of you receiving it. If your Application is successful, a membership fee of \$350 (incl GST) will be paid in addition to the Registration Fee on a financial year basis. By completing this Application, you acknowledge that it does not guarantee membership with Nature Alliance Family Day Care Service.

Attach your
Passport
photo here

Personal details			
Names:		Surname:	
Address:			
Town / Suburb:		State:	Postcode:
Centrelink Customer Reference Number (CRN):		PRODA Number:	
Mobile:	Home Phone / Back up Communication Device:		
Email:			
Date of birth:		Sex: F <input type="checkbox"/> M <input type="checkbox"/>	
Country of birth:		Nationality:	
Language(s) spoken (other than English):			
Next of Kin Details (in emergency)			
Given names:		Surname:	
Mobile:		Home Phone:	
Email:			

Are you an Australian Citizen? Yes No Country of Citizenship: _____

How well do you Speak English? Fluent Good Fair Poor

How well do you read English? Fluent Good Fair Poor

Do you currently have your own children enrolled in Family Day Care? Yes No

Does your partner currently have their children enrolled in Family Day Care? Yes No

If you work as a Family Day Care Educator, your children, or your partner’s children, will no longer qualify for subsidy payments if they attend a Family Day Care in the same 24hour period that you are providing care, exceptional circumstances may apply.

Medical Statement

You are required to make a statement stipulating that you are physically and mentally able to look after a group of children 0 – 12 years, and the effect of any medication you are taking will have on your ability to care for the children. Please answer the following questions:

Are you taking any medication that could affect your ability to make quick judgments? Yes No

Are you suffering from any condition that would affect your mobility? Yes No

In your opinion, are you physically, emotionally and mentally able to care for young children in your home unsupervised? Yes No

Are you suffering or being treated for any alcohol or substance related illness? Yes No

Have you ever engaged in any alcohol or substance abuse? If YES, please attach a Statutory Declaration regarding any alcohol or substance abuse and your current lifestyle. Yes No

Are you fully aware of the recommended immunizations for adults working with children? Yes No

Do you have any further information or considerations that you would like to comment on? Yes No

Financial Statement

You are required to make a statement, declaring that you are financially able to operate a Family Day Care business. Please answer the following questions.

Have you ever been declared bankrupt? Yes No

Have any default judgements been made against you in court? Yes No

Are there any outstanding writs against you? Yes No

(Note: If you have answered YES to any of these questions, you will be asked to provide additional details before your application can be assessed.)

Do you believe you will be able to financially operate this service? Yes No

Your home (Not applicable to Educators intending to operate in a relief capacity)

What type of home do you live in? House Unit Rural Other

If other, please describe: _____

Do you? Own Rent Landlord consented to use: Yes No Strata: Yes No

If the property is rented, a letter from the property owner or landlord approving use of the rental property as a family day care residence or venue is required.

If the property is a Strata lot, will your insurance cover you if you operate a business from there? Yes No

Does your residence have a swimming pool or spa? Yes No ***If yes, membership may not proceed***

Your Family (Not applicable to Educators intending to operate in a relief capacity)

Your Partner's details (if applicable)	
Given names:	Surname:
Mobile:	Home phone:
Email:	
Date of birth:	Sex: F <input type="checkbox"/> M <input type="checkbox"/>
Country of birth:	Nationality:
Language(s) spoken (other than English):	

Will your partner be active in running the business? Yes No If yes, Please provide details:

Residents at Your Home (Not applicable to Educators intending to operate in a relief capacity)

Please provide the names and birth dates of all adults and children who usually live at, or are likely to be present, at your residence when the business is operating.

For each person listed, who is over the age of 18 years, is to provide a National Police Certificate, not more than 6 months old at time of the Application, and a current Working with Children Check to Nature Alliance.

Details of Residents at Your Home			
Given Names	Surname	Date of Birth	Sex
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>
			F <input type="checkbox"/> M <input type="checkbox"/>

Do you have any pets? Yes No If yes, please list type (incl breed): _____

Are your pets able to be housed in an area that is secured separately from the area to be used for FDC? Yes No

Qualifications

Do you have any formal training qualifications? Yes No

Please attach certified copies of any Childcare or equivalent qualifications.

Please list your formal qualifications: _____

Please list any skills you believe will support your application:

Business experience / Employment history

A current Curriculum Vitae is required with your application.

Attached: Yes No

Current employment (if applicable)

Present occupation:

Current employer:

Date commenced:

Address:

Town / Suburb:

State:

Postcode:

Describe duties and responsibilities: _____

Previous employment (if applicable) for past 3 years

Occupation:

Employer:

Date commenced:

Address:

Town / Suburb:

State:

Postcode:

Describe duties and responsibilities: _____

Have you lived or worked overseas in the past three years? Yes No If Yes, please provide an overseas criminal history statement.

Have you ever been subjected to a formal disciplinary proceeding or action under any education or child care law in any jurisdiction? Yes No If Yes, please attach a statutory declaration regarding the disciplinary proceeding.

Referee 1			
Surname:		Given names:	
Address:			
Town / Suburb:		State:	Postcode:
Mobile:		Home phone:	
Occupation:		Years known:	

Referee 2			
Surname:		Given names:	
Address:			
Town / Suburb:		State:	Postcode:
Mobile:		Home phone:	
Occupation:		Years known:	

General information

To assist Nature Alliance in servicing the community, please indicate how you heard about us.

Existing Educator _____ Friend / Family Existing Service user
 (Please provide their name)

Website Other advertising _____
 (Please provide details)

Compliance History Statement

Are you or have you ever been subjected to a prohibition or suspension notice under the Education and Care Service National Law? No Yes Please provided details: _____

Please provide information about any compliance action or disciplinary proceedings to which you have been subject under:

- The Education & Care Services National Law, including the Education & Care Services National Regulations, and
- Any of the laws listed in Table 1 at the end of this document, in any Australian state or territory.

Have you ever held or applied for a license, approval, registration, certification or other authorisation under the National Law which the regulatory authority refused, refused to renew, suspended or cancelled (for example as a nominated supervisor, a person in day to day charge, a person with management or control)? No Yes *If yes, please provide details:*

Were you formerly registered with another approved provider? If so, please list service details and the reason(s) you left your previous role. No Yes *If yes, please provide details:*

Declaration

In completing this application to be registered with Nature Alliance Family Day Care Service, I acknowledge that Family Day Care WA does maintain a register of denials, revocations and suspensions relating to Educators. This register will be checked prior to the application being considered. In the event of any Educator being in breach, receiving a prohibition notice or suspension their name may be added to this register.

I agree to notify Nature Alliance Family Day Care Service if my children or my partner's children attend a Family Day Care Service while I am providing Family Day care in the same 24 hour period.

I (Insert Full Name) _____ of (Insert Address) _____
_____ and born on (insert date of birth) _____

Declare that all information is true and complete at the time of completing this form and agree to advise of any changes as they occur in the future. I am aware that I may be subject to penalties under a Commonwealth or State or Territory Act if I provide false or misleading information. I understand this application does not guarantee membership to become an Educator with Nature Alliance Family Day Care Service.

Signature of person making the declaration: _____ Date: _____

Registration and Membership Fees and Payment options

Once the Application for Registration and Membership form is accepted, a fee of \$400 (incl. GST) will need to be paid before the application can progress. Nature Alliance will advise you when to pay if your preference is Direct Deposit or process the credit card payment at this time. This fee is non-refundable.

I wish to pay by:

Direct Deposit:

Account Name: **MR Holdings Pty Ltd trading as Nature Alliance Family Day Care Service**

BSB: **016-580** Account Number: **209837864** Reference: **"your name"**

Credit Card:

Card Details: Number: _____ Expiry: / CRV:

Name on Card: _____

If your application is accepted the remaining membership fee of \$350 must be paid prior to membership being granted.

Documentation to be forwarded with application

TO:

Nature Alliance Family Day Care Service

PO Box 505, Dunsborough WA 6281

or

Email : info@naturealliancefdc.com.au

<i>Office Use only:</i>	<i>Documents received</i>	<i>Date</i>	<i>Actioned by</i>
	<i>Payment Received</i>	<i>Date</i>	<i>Actioned by</i>
	<i>Receipt Issued</i>	<i>Date</i>	<i>Actioned by</i>

Notes:

TABLE 1**Other relevant laws, including children's services laws, education laws, and former education and care services laws in any Australian state or territory**

Australian Capital Territory	Children and Young People Act 2008 Education Act 2004 Working with Vulnerable People (Background checking) Act 2011
New South Wales	Children and Young Persons (Care & Protection) Act 1998 Education Act 1990 Institute of Teachers Act 2004 Teaching Services Act 1980 Commission for Children & Young People Act 1998
Northern Territory	Care & Protection of Children Act Care & protection of Children (Children's Services) Regulations Education Act Teacher Registration (Northern Territory) Act and Regulations
Queensland	Child Care Act 2002 Child Care Act 1991 Education (Accreditation of Non-State Schools) Act 2001 Education (General Provisions) Act 2006 Education (Overseas Students) Act 1996 Education (Queensland College of Teachers) Act 2005 Higher Education (General Provisions) Act 2008 Family & Child Commission Act 2014
South Australia	Children's Protection Act 1993 Children's Services Act 1985 Education Act 1972
Tasmania	Child Care Act 2001 Education Act 1994 Education Act 2016 Teachers Registration Act 2000 Registration to Work with Vulnerable People Act 2013 Children, Young Persons and their Families Act 1997
Victoria	Children's Services Act 1996 Education & Training Reform Act 2006 Working with Children Act 2005
Western Australia	Education and Care Services National Law (WA) Act 2012 Education and Care Services National Regulations 2012 School Education Act 1999 Western Australian College of Teaching Act 2004 Working with Children (Criminal Record Checking) Act 2004