STUDENT RESOURCE LEVY 2014
PREP STUDENTS
BOOKLET

Please complete and return to office staff..
• Participation agreement forms.
• Centrepay form if chosen as a method of payment.
PAYMENT OPTIONS

PAYING BY INTERNET BANKING:

Direct Payment into School Bank Account

School’s Bank Account Name:
CURRUMBINVALLEYSTATESCHOOL General A/C

BSB Number:
064-404 (CBA Branch BURLIEGH HEADS QLD)

Account Number:
00090557

Reference/Details:
Please record both Student name & Reference for this payment in the reference/details section so that your payment can be recorded correctly. If insufficient details are supplied, payments will be applied to the oldest debt for that Family/Customer.

PAYING BY PHONE:

Payment by Credit Card ONLY

- Call the school on 07 5507 1333, Monday and Friday between 9am to 12md. Please have the account and your credit card details with you when you call. VISA, Mastercard and Bankcard accepted.

PAYING IN PERSON:

Payment by Credit Card, Debit Card, Cash, Cheque is accepted. Payment can be made at the school office on MONDAY AND FRIDAYS between 8.30am –12md. Please be aware we do not have a float, so may not have change for large denominations.

CENTREPAY DEDUCTIONS

Please fill out enclosed form and return to the office at school. Do not hesitate to contact Carina if you would like any help with this method.

PART PAYMENTS

Part payments can be made and it is important to fill out the Payment Arrangement part of the agreement form and return it to the office.
STUDENT RESOURCE SCHEME 2014

(PREP BOOK PACK LEVY)

Prep students are not issued with a booklist, instead a Student Resource Scheme Levy of $180 will cover all classroom resources needed to deliver the early childhood curriculum program for your child. We have found that a listed book pack was not suited to the needs of Prep students using the Early Years Curriculum Guidelines. Please fill in and sign the “Student Resource Scheme” form attached and return to the office. This is a compulsory levy.

Payments made by cash, EFTPOS or credit card can be made to the office on Monday or Friday before 12:30pm. Internet banking and Bpay are also available. Payment plans can be arranged by contacting the office.

Thankyou in anticipation of your support for the school you have chosen for your child.
# Participation Agreement Form

## Student Resource Scheme

### Privacy Statement:
The Department of Education and Training through the school is collecting your personal information in accordance with section 51 of the Education (General Provisions) Act 2006 in order to administer the Student Resource Scheme in an efficient, ethical and secure manner. The information will only be accessed by school employees conducting the scheme. Some of this information may be given to departmental employees for the purpose of debt recovery. Your information will not be given to any other person or agency unless you have given permission or the Department of Education and Training is authorised or required by law to make the disclosure.

### Participation
- **Yes**: I wish to participate in the Student Resource Scheme in ______ (Year). I have read and understand the Terms and Conditions of the scheme (see reverse) and agree to abide by them and to pay the participation fee in accordance with the selected payment arrangement below.
- **No**: I do not wish to participate in the Student Resource Scheme in ______. I have read and understand the Terms and Conditions of the scheme (see reverse) and agree to abide by them, particularly paragraphs 12 and 36.

Please refer to the accompanying Subject Requirements List and/or Year Level Requirements List for fee details.

<table>
<thead>
<tr>
<th>Student Given Name</th>
<th>Student Surname</th>
<th>Yr Level in 2011</th>
<th>Participation Fee</th>
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<td>$</td>
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<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td><strong>$</strong></td>
</tr>
</tbody>
</table>

### Parent/Carer Details
- **Given Names**: 
- **Surname**: 
- **Address**: 
- **Contact Numbers**:  
  - Home:  
  - Work:  
  - Fax:  
  - Mobile: 
  - Email: 
- **Parent/Carer Signature**:  
- **Date**: 

### Payment Arrangement
- **Now**: I wish to make full payment now as a single payment of the total amount below.
- **Instalments**: I wish to make instalment payments, during the first two weeks of the first three terms, in the following proportion of the total amount: Term 1: $______; Term 2: $______; Term 3: $______; or as negotiated with the school.
- I agree to make payments by the due dates and I understand that any failure to make payments by these dates may result in debt recovery action being undertaken including, where warranted, referral to an external debt collection agency at my expense.

**School Use Only: Negotiated Instalments Approved:**  
**Position:**

### Payment Method
- I wish to make payment by:  
  - [ ] Centrelink Deduction*  
  - [ ] EFT  
  - [ ] EFTPOS Credit/Debit Card  
  - [ ] Cheque  
  - [ ] Cash  

*Payment by Centrelink deduction can be arranged through the school administration.

**Payment by EFT can be made to the school bank account BSB: ___ Account Number: ___ To ensure correct identification of the payment, please ensure that the EFT payment reference clearly includes the STUDENT NUMBER, along with the characters SRS, e.g., 001451SRS.
For payment by EFTPOS (Credit/Debit Card), I hereby authorise the school to debit my:

- [ ] MasterCard
- [ ] Visa
- [ ] American Express (where accepted)
- [ ] Other (where accepted)

Card Number: ____________________________

Expiry Date: ____________________________

For [ ] an amount of $________ (total amount above) or [ ] $________ on the first school day of the first three terms (equal instalment payments of the above amount), or [ ] in accordance with the negotiated Payment Arrangement completed above.

Name of cardholder as it appears on the card: ____________________________

Signature of Cardholder: ____________________________

Purpose of the Scheme

1. In accordance with the Education (General Provisions) Act 2006, the cost of providing instruction and administration and facilities for the education of students enrolled at State schools who are Australian citizens or permanent residents, or students of Australian citizens or permanent residents, must be borne by the State.

2. Parents/carers are directly responsible for providing textbooks and other personal resources for their children while attending school, in recognition that these costs are too high for the State to provide these items for all students. This ensures that parents/carers are aware of the value of the study materials provided.

3. A Student Resource Scheme is separate and distinct from a request for a voluntary financial contribution.

Benefits of the Scheme

4. The purpose of the scheme is to provide the parent/carer with a cost-effective alternative to purchasing the prescribed textbooks and resources required by the school, through reduced prices gained from the school’s bulk purchasing practices.

5. The Student Resource Scheme is intended to raise funds for other purposes, and revenue collected through the scheme is applied only to the operation of the scheme.

Participation in the Scheme

7. Participation in the scheme is voluntary, and there is no obligation or requirement to participate in the scheme. A parent/carers decision to participate or not is based on the value of the scheme to their child.

8. Failure to comply with the scheme’s Participation Agreement Form will result in the student being withdrawn from the scheme. The parent/carers decision to participate will also be reviewed

9. A parent/carers choosing to participate in the scheme and complete the Participation Agreement Form will have the opportunity to offer an alternative by providing a signed agreement to the school.

10. An unpaid account will be subject to the school’s debt collection procedures.

11. A parent/carers who does not participate in the textbook and resource scheme will be notified by the school and redirected to the Administration Office. Arrangements will be made for the parent/carers to pay the full cost of textbooks and resources required for each of their child’s education.

12. A parent/carers who chooses not to participate in the scheme is responsible for providing all students with the same level of education, subject to the Student Resource Scheme, to enable the student to engage with the curriculum.

Parental Authority Support of the Scheme

13. The operation of the Student Resource Scheme is discussed annually at a meeting of the Parents’ and Citizens’ Council. Parental consent is required to allow a student to participate in the scheme. A parent/carers decision to participate or not is based on the value of the study materials provided.

14. The Queensland Government provides financial assistance to parents/carers of students who attend non-standard schools, such as schools approved by the Department of Education and Training. Assistance is provided to any student who attains the Year Level Requirements List and Subject Requirements List, to enable students to gain admission to the school.

Textbook and Resource Allowance

15. The Queensland Government provides financial assistance to parents/carers of students who attend non-standard schools, such as schools approved by the Department of Education and Training. Assistance is provided to any student who attains the Year Level Requirements List and Subject Requirements List, to enable students to gain admission to the school.

Purchase Arrangements

16. Payment of the participation fee may be made by EFTPOS, Credit/Debit Card, Visa, American Express, where accepted by the school, cheque, or cash.

17. Payment of the participation fee may be made in instalments by or in instalments by any other method as approved by the Principal.

18. For permits in person by cash, cheque, or credit/debit card, a receipt will be issued. Where to pay by telephone or by other methods, a receipt will be provided on request. All receipts and documentation on the scheme should be retained by the parent/carers for their future reference.

Centrepay is a free direct bill paying service available to customers who receive a Centrelink payment.

**You can arrange your deductions online, using Centrelink Online Services.**
Visit www.centrelink.gov.au to register and to find out more information about Centrepay.

**You can arrange your deductions over the phone:**
Simply call Centrelink who will process your deduction request and assist you with any questions you have concerning Centrepay. Please call your normal Centrelink payment number:

- Newstart/Employment Services: 13 2850
- Family/Parenting Payment: 13 6150
- Disability, Sickness and Carer Services: 13 2717
- Youth and Student Services: 13 2490
- AUSTUDY: 13 2317

**NOTE:** Calls to '13' numbers from a standard phone service can be made from anywhere within Australia for the cost of a local call. Calls from public or mobile phone may be charged at a higher rate. For more information in a language other than English call Centrelink on 13 1202.

**You can arrange your deductions by faxing the completed form to 1300 766 412.**

**You can arrange your deductions by completing and returning this form to Centrelink.**
Please use the reply paid envelope provided or address a stamped envelope to:
Centrepay
GPO Box 689
HOBART TAS 7001

This form cannot be used for government housing authority deductions.

**PART A — Your details**

<table>
<thead>
<tr>
<th>Family name</th>
<th>Given names</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Your date of birth</th>
<th>Phone number</th>
<th>Your Customer Reference Number</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
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</tr>
</tbody>
</table>

**PART B — Type of request** *(For more than one deduction a separate form needs to be completed)*

**Do you want to:**
1. **START** a new deduction: You must complete PARTS C, D and G
2. **CHANGE** a current deduction: You must complete PARTS C, E and G
3. **CANCEL** a current deduction: You must complete PARTS C, F and G

**Note:** Do not attach any bills to the Centrepay form.

**PART C — Service provider's details** *(MUST be completed to start, change or cancel a deduction)*

**Service provider's name**

**Service provider's address**

**Service provider's phone no.**

**Service provider's Centrepay Reference Number**

**NOTE:** You will need to get the Centrepay Reference Number from the service provider you are making payments to. This number always starts with 555. If unsure please contact your service provider.

**Your account number with the service provider**

**Type of bill** *(e.g. private rent, electricity, gas, water)*

**NOTE:** For TELSTRA deductions — you must provide your account number (above) and your bill number (below)

**TELSTRA deductions only**

**NOTE:** If your bill number starts with T311 you cannot use Centrepay. Please contact Telstra about your billing arrangements.

**Telstra bill number**
PART D — to START a new deduction

From which Centrelink payment do you want the deduction to be taken?
E.g. Pension, Newstart Allowance, Family Tax Benefit.

What amount do you want deducted each fortnight?
The minimum amount for most Centrelink deductions is $10 per fortnight. If unsure ask your service provider what their minimum deduction amount is.

Which payment date do you want the deduction to start from?

Your next available payment date

OR A future payment date

Do you want to specify a target amount?
Regular deductions will be made until the total (target) amount is reached or this Centrepay deduction is cancelled.

Now go to PART E

PART E — to CHANGE your current deduction

CHANGE your current deduction permanently
by providing a start payment date, the amount and the Centrelink payment type.

Start payment date

New deduction amount

Payment type

CHANGE your current deduction temporarily
by also providing an end payment date.

End payment date

Your deduction will revert back to your regular amount after the end payment date nominated has been reached.

NOTE: The temporary period you specify can only be for a maximum of 13 weeks.

SUSPEND your current deduction temporarily
You have the option to suspend your regular deduction for a temporary period.

Start payment date

End payment date

Your deduction will restart after the end payment date nominated has been reached.

NOTE: The period you specify can only be for a maximum of 13 weeks.

CHANGE your current TARGET AMOUNT for deductions

Deductions will continue until the amount has been reached, or less than $2 remains. Centrelink will send you a letter to let you know your target amount has been reached and your deductions will stop.

New target amount

Do you want to change your deduction amount?

No □ Yes □ New deduction amount

Now go to PART G

PART F — to CANCEL your current deduction

From which payment date do you want the cancellation to take effect?

Your next available payment date

OR A future payment date

PART G — Authorisation — please read, sign and date the statement (MUST be completed)

I AUTHORISE Centrelink to:
• make the nominated deduction.
I AUTHORISE Centrelink to:
• give permission for:
• the information provided on this form to be given to the relevant service provider stated on this form.
• the service provider I have nominated on this form to provide my correct account or billing number to Centrelink if required.

I understand that:
• if I transfer to another eligible Centrelink payment in the future that my deductions will continue.
• it is my choice to have this amount deducted from my Centrelink payments, and I can end my Centrepay deduction at any time.
• if I stop using the service provider but do not stop my Centrepay deduction, the service provider may instruct Centrelink to stop the deduction.
• if I change service providers, I may also need to advise Centrelink to stop my previous deduction.

Your signature

Date

Privacy
Your personal information is protected by law. Centrelink may give your information to the service provider that you have nominated for the purpose of:
• checking your account number and the amount you want to pay:
• reconciling your payment deduction details.

Limited personal information may be used to conduct customer surveys run by Centrelink, its policy departments or by research organisations on their behalf (see Factsheet Customer Research and You). Centrelink can give your information to someone else in special circumstances where Commonwealth legislation allows or requires or when you give permission. You can get more information from the Factsheet Your Right to Privacy.
Currumbin Valley State School
Prep to Year 7

VOLUNTARY FINANCIAL CONTRIBUTION SCHEME 2014
PREP TO YEAR 7 STUDENTS
(Parent/Carer Contribution Fee)
BOOKLET

Please complete and return to office staff..
- Participation agreement forms.
- Centrepay form if chosen as a method of payment.

1233 Currumbin Creek Road, Currumbin Valley 4223
ph 0755 071333 fax 07 5507 1300
email: the.principal@currvallss.eq.edu.au
web: www.currvallss.eq.edu.au
Dear Parents and Caregivers,

The Voluntary Financial Contribution Scheme is a fee that can be made by parent/carers of all Prep to Year 7 students; that plays a critical role in providing a high level program that caters for student needs and promotes a more active, engaging and future oriented environment for all of our students.

The Voluntary Financial Contribution Scheme provides such things as art and craft materials, science consumables, sports equipment, computer replacement and maintenance, printer and laminating consumables, first aid supplies and reprographics. The mix of resources that are purchased on your behalf does vary depending on the particular needs of those year levels.

We appreciate that the costs of schooling your children in these tough times is quite significant, even with a heavily subsidized state system. For this reason we try to keep our fees to a minimum on the basis that if everyone in our small school community contributes, we are able to offer exceptional value for money considering the additional learning opportunities these resources provide.

<table>
<thead>
<tr>
<th>Students Enrolled</th>
<th></th>
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<tbody>
<tr>
<td>1 child</td>
<td>$80 per child</td>
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<tr>
<td>2 children</td>
<td>$75 per child</td>
</tr>
<tr>
<td>3 or more children</td>
<td>$70 per child</td>
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</table>

Payments made by cash, EFTPOS or credit card can be made to the office on Monday or Friday before 12:30pm. Internet banking and Bpay are also available. Payment plans can be arranged by contacting the office.

Yours sincerely,

Heidi Mackenzie
Principal
PAYMENT OPTIONS

**PAYING BY INTERNET BANKING:**

Direct Payment into School Bank Account

School's Bank Account Name:
CURRUMBINVALLEYSTATESCHOOL General A/C

BSB Number:
064-404 (CBA Branch BURLIEGH HEADS QLD)

Account Number:
00090557

Reference/Details:
Please record both **Student name & Reference for this payment** in the reference/details section so that your payment can be recorded correctly. **If insufficient details are supplied, payments will be applied to the oldest debt for that Family/Customer.**

**PAYING BY PHONE:**

Payment by Credit Card ONLY

- Call the school on 07 5507 1333, Monday and Friday between 9am to 12md. Please have the account and your credit card details with you when you call. VISA, Mastercard and Bankcard accepted.

**PAYING IN PERSON:**

Payment by Credit Card, Debit Card, Cash, Cheque is accepted. Payment can be made at the school office on **MONDAY AND FRIDAYS between 8.30am –12md.** Please be aware we do not have a float, so may not have change for large denominations.

**CENTREPAY DEDUCTIONS**

Please fill out enclosed form and return to the office at school. Do not hesitate to contact Carina if you would like any help with this method.

**PART PAYMENTS**

Part payments can be made and it is important to fill out the Payment Arrangement part of the agreement form and return it to the office.
Voluntary Financial Contribution

The school is resourced by the State Government through grant funding to provide a core educational service to students. Voluntary financial contributions are used by the school to provide an enhanced educational service and to enhance resources available for student learning, recreation and comfort.

☐ Yes I wish to make a voluntary financial contribution to the school in ______ (Year). I have read and understand the Operating Statement (see reverse) for the contribution and understand that this contribution is voluntary, and that the funds are to be used to enhance the instruction, administration and facilities of the school.

Privacy Statement

The Department of Education and Training through the school is collecting your personal information in accordance with section 56 of the Education (General Provisions) Act 2006 in order to administer the voluntary contributions in an efficient, ethical and secure manner. The information will only be accessed by school employees conducting the voluntary contributions. Your information will not be given to any other person or agency unless you have given permission or the Department of Education and Training is authorised or required by law to make the disclosure.

<table>
<thead>
<tr>
<th>Student/Given Name</th>
<th>Family Name</th>
<th>Yr Level</th>
<th>Voluntary Contribution</th>
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<td>5.</td>
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<tr>
<td><strong>Total</strong></td>
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<td></td>
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</tbody>
</table>

Parent/Carer Details (please print)

Given Names: ____________________________________________

Family Name: __________________________________________

Address: _____________________________________________

Contact Numbers: Home: __________________________________

Mobile: _____________________________________________

Work: _____________________________________________

Fax: _______________________________________________

Email: ______________________________________________

Parent/Carer Signature: ____________________________ Date: __________

Payment Arrangement

☐ Now: I wish to make a single payment of the total amount above.

☐ Instalments: I wish to make instalment payments of the total amount above in the following manner:

Payment Method

I wish to make payment by:

☐ Centrelink Deduction  ☐ EFT (Electronic Funds Transfer)  ☐ EFTPOS (Credit/Debit Card)  ☐ Cheque  ☐ Cash

* Payment by EFT can be made to the school bank account RBA: ____ Account Number: ____

To ensure correct identification of the payment, please ensure that the payment reference clearly includes the STUDENT NUMBER, along with the characters VFC, e.g. 001461VFC

** Payment by Centrelink deduction can be arranged through the school administration.

Voluntary Financial Contribution

For payment by Credit/Debit Card, I hereby authorise the school to debit my:

☐ MasterCard  ☐ Visa  ☐ American Express (where accepted)  ☐ Other (please specify)

Card Number: ___________________________ Expiry Date: __________

For an amount of $_________________ (total amount above), or $__________ during the first two weeks of the first three terms (equal instalment payments), or ______ in accordance with the Payment Arrangement completed above.

Name of cardholder as it appears on the card: ___________________________ Signature of cardholder: ___________________________

Operating Statement

1. The costs of providing instruction, administration and facilities for the education of students at the school are met by the State Government for students enrolled at the school who are Australian citizens or permanent residents, or the children of Australian citizens or permanent residents.

2. The school is resourced by the State Government through school grants to provide a core educational service.

3. Section 66 of the Education (General Provisions) Act 2006 provides that the Principal may ask the parents of a student of the school to make a voluntary financial contribution to supplement government funding for instruction, administration and facilities for the education of the student at the school. If the student is an adult, the principal may ask the student to make a voluntary financial contribution.

4. Voluntary financial contributions are used to enhance an educational service and to enhance resources available for student learning, recreation and comfort.

5. A voluntary financial contribution is not a fee and is separate from any fee charged by the school. Debt recovery action will not be undertaken by the school for non-payment of all or part of a request for a voluntary financial contribution.

6. While the request to parents may indicate a nominated amount, the financial contribution to the school is voluntary, and there is no obligation on a parent to make all or part of the contribution.

7. To enable an informed decision to be made by the parent, the request for a voluntary contribution should indicate how the funds will be used by the school.

8. The school and the parents share decision-making and responsibility for the operation of the voluntary financial contribution funds. The amount of the requested contribution and the operation of the voluntary contributions are supported by the Parents and Citizens' Association annually.

9. The voluntary financial contribution funds may be managed by the school or the Parents and Citizens' Association, but not by a third party.

10. The voluntary financial contribution is not a deterrent for a student enrolling at the school or undertaking a particular subject.

11. Where a parent decides not to make a voluntary financial contribution, instruction, administration and facilities for the education of the student at the school will continue to be provided by the school, and the student will suffer no educational detriment by way of school action as a result of the decision.

Contribution Options

12. Should you wish to make a voluntary financial contribution, please complete the Voluntary Financial Contribution form and return it to the school along with your payment.

13. The voluntary financial contribution may be paid to the school by Centrálik deduction arranged through the school, by direct deposit (EFT) to the bank account, EFTPOS (credit/debit card as indicated on this form) in person or over the phone, cheque, or cash.

14. For payment made by direct deposit (EFT) to the bank account indicated on the form, please ensure that the payment reference includes the reference as indicated on the front of the form. The acknowledgement from your financial institution of the successful electronic transfer of funds should be printed and retained as your record of payment.

15. For payments made in person by EFTPOS, cheque or cash, a receipt will be provided to the payer. Where payment is made by other methods, a receipt will be provided on request.

16. If you do not wish to make a voluntary financial contribution, no further action is required.


TRIM
Centrelink
Giving you options.

Centrepay deductions
Pay your bills the easy way

Centrepay is a free direct bill paying service available to customers who receive a Centrelink payment.

You can arrange your deductions online, using Centrelink Online Services. Visit www.centrelink.gov.au to register and to find out more information about Centrepay.

You can arrange your deductions over the phone. Simply call Centrelink who will process your deduction request and assist you with any questions you have concerning Centrepay. Please call your normal Centrelink payment number:

- Newstart/Employment Services: 132850
- Age Pension/Retirement Services: 132300
- Family/Parenting Payments: 136150
- Disability, Sickness and Carer Services: 132717
- Abstudy: 132317

NOTE: Calls to '13' numbers from a standard phone service can be made from anywhere within Australia for the cost of a local call. Calls from public or mobile phone may be charged at a higher rate. For more information in a language other than English call Centrelink on 131202.

You can arrange your deductions by faxing the completed form to 1300 760 412.

You can arrange your deductions by completing and returning this form to Centrelink.

Please use the reply paid envelope provided or address a stamped envelope to:

Centrepay
GPO Box 689
HOBART TAS 7001

This form cannot be used for government housing authority deductions.

PART A — Your details

Family name

Given name(s)

Your date of birth

Phone number

Your Customer Reference Number

PART B — Type of request (For more than one deduction a separate form needs to be completed)

Do you want to:

1. START a new deduction
   You must complete PART(s) C, D and G

2. CHANGE a current deduction
   You must complete PART(s) C, F and G

3. CANCEL a current deduction
   You must complete PART(s) C, F and G

Note: Do not attach any bills to the Centrepay form.

PART C — Service provider's details (MUST be completed to start, change or cancel a deduction)

Service provider's name

Service provider's address

Postcode

Service provider's phone no.

Service provider's Centrepay Reference Number

NOTE: You will need to get the Centrepay Reference Number from the service provider you are making payments to. This number always starts with 565. If unsure please contact your service provider.

5 6 5

Your account number with the service provider

Type of bill (e.g. private rent, electricity, gas, water)

NOTE: For TELSTRA deductions — you must provide your account number (above) AND your bill number (below)

TELSTRA deductions only

NOTE: If your bill number starts with 1311 you cannot use Centrepay. Please contact Telstra about your billing arrangements.

Telstra bill number
**PART D — to START a new deduction**

From which Centrelink payment do you want the deduction to be taken? (e.g. Pension, Newstart Allowance, Family Tax Benefit)

What amount do you want deducted each fortnight? The minimum amount for most Centrepay deductions is $10 per fortnight. If unsure ask your service provider what their minimum deduction amount is.

Which payment date do you want the deductions to start from? Your next available payment date OR a future payment date

Do you want to specify a target amount? Regular deductions will be made until the total (target) amount is reached or this Centrepay deduction is cancelled.

Now go to PART E

**PART E — to CHANGE your current deduction**

Change your current deduction permanently by providing a start payment date, the amount and the Centrelink payment type.

Change your current deduction temporarily by also providing an end payment date.

Your deduction will revert back to your regular amount after the end payment date nominated has been reached.

NOTE: The temporary period you specify can only be for a maximum of 13 weeks.

Suspend your current deduction temporarily You have the option to suspend your regular deduction for a temporary period.

Your deduction will restart after the end payment date nominated has been reached.

NOTE: The period you specify can only be for a maximum of 13 weeks.

Change your current target amount for deductions Deductions will continue until the amount has been reached, or less than $2 remains. Centrelink will send you a letter to let you know your target amount has been reached and your deduction will stop.

Now go to PART F

**PART F — to CANCEL your current deduction**

From which payment date do you want the cancellation to take effect? Your next available payment date OR a future payment date

**PART G — Authorisation — please read, sign and date the statement (MUST be completed)**

I authorise Centrelink to:

I give permission for:

I understand that:

Privacy

Your personal information is protected by law. Centrelink may give your information to the service provider that you have nominated for the purpose of:

- checking your account number and the amount you want to pay
- reconciling your payment deduction details

Limited personal information may be used to conduct customer surveys run by Centrelink, its policy departments or by research organisations on their behalf (see factsheet: Consumer Research and You). Centrelink can give your information to someone else in special circumstances where Commonwealth legislation allows or requires or where you give permission. You can get more information from the factsheet: Your Right to Privacy.
NAME: ________________________________________ M / F  D.O.B. _______________________

PARENTS’ NAMES: ________________________________________________________________

OTHER FAMILY MEMBERS AND NAMES AND YEAR LEVELS: _______________________________

What is his / her position in the family? __________________________________________________

Has your child been to? (Name Centre)

Kindergarten ___________________________________ From __________ To ____________

Childcare ______________________________________ From __________ To ____________

Preschool ______________________________________ From __________ To ____________

How did your child react to Kindergarten/Childcare/Preschool?

Initially: __________________________________________________________________________

Now: ______________________________________________________________________________

What activities does he / she enjoy at childcare?

___________________________________________________________________________________

Has he / she been separated from you for a whole day? (6 hours) Yes / No

Any special reaction after the separation? ________________________________________________

Health:

Has your child any medical problems: (eg asthma, epilepsy, allergies etc): If so, what? ______________

Is your child taking any medication? Yes / No _______________________________________________

Was your child a full term baby? Yes / No For how long? ___________________________________

Has your child ever been hospitalised? Yes / No For how long? ________________________________

Have you ever suspected a hearing (Yes / No) or sight (Yes / No) problem?

Has it been attended to? Yes / No

Speaking / Speech:

Can other people understand his / her speech? Yes / No

Does he / she have difficulty in saying some words? Yes / No

Which ones? __________________________________________________________________________

Has he / she attended speech therapy? Yes /No

Behaviour:

Does he / she appear over-active? Yes / No

Is he / she able to sit and complete a task? Yes / No

How does he / she react to: new situations _______________________________________________

new people (adults / children) ____________________________________________________________________
Are there any behaviour issues? ____________________________________________

**General:**

What major events have occurred within your family that may have significantly impacted on your child’s life to date? ____________________________________________

Have any members of his / her family (including parents, uncles and aunts, brothers and sisters) experienced special difficulty with reading and / or spelling? Yes / No

Does he / she have any nervous tendencies (excessive story telling) or fears? Yes / No

How will your child go home in the afternoon? ____________________________________________

Do you have any concerns about starting Prep? ____________________________________________