



Enrolment and Information Kit for _____ Family

Today you spoke with _____

For all Families

- Family Handbook
- Centre brochure/program
-

To place your child on the waiting list

- Wait list Application form (if no position currently available)

If a position is available for your child to enrol

- Enrolment form (one per child) *2 pages*
- Authorities Form *1 page*
- Transport Permission & Escort Form; Local Excursion Consent *1 page*
- Lead Educator Information (one per child) *2 pages*
- Child Profile (one per child) *1 page*
- Multicultural Profile (one per family – more available if required) *1 page*
- Menu requirements & Allergies
- EziDebit form
- Welcome info including Fee payment options, health issues and what to do
- Medical Conditions Information (one per child with medical condition)
- Code of Conduct for Adults

All forms need to be completed in full and returned prior to enrolment commencing.

Thank you

Creative Kids Outside School Hours Care (ph. 3284 0195)

Notes:



Welcome To

Creative Kids Outside School Hours Care
195 Elizabeth Avenue, Clontarf, Qld
Phone: 07 3284 0195
Fax: 07 3284 0839
Email: creativekidsoshc@bigpond.com

**It is our wish that you and your family will share
friendship, security and trust at Creative Kids Outside School Hours Care
during this significant period in your child's life.
Some things you must remember... Please read carefully.**

Please be sure that all enrolment forms the Coordinator gave you have been completed and returned to the office one week before attendance.

On your first day please see the Schoolies Coordinator

Remember to sign your child in and out each day.

- o Even if you have been absent due to sickness or holidays – the attendance sheet must have your signature for these days.
- o If any days are not signed for and you are claiming Child Care Benefit for those days it is possible that Centrelink will recall your Child Care Benefit and you will be liable for full fees for those days.
- o You are eligible to receive Child Care Benefit for 42 absent days per financial year (this includes public holidays, holidays, sick days and days you are just away).

A reminder that fees are to be paid for two weeks in advance.

Please notify the Coordinator ASAP on any day that your child is absent (and remember to sign for that day so that you can claim Child Care Benefit for the absence).

Please let us know immediately of any changes in your circumstances regarding address, phone number, your work contact details, emergency details, emergency contacts, health, court orders etc.

Feel free to visit the centre at any time throughout the day, or phone to speak to the Coordinator to see how your child is settling in.



Fee Payment Options

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Creative Kids prefers EZI DEBIT as the option for fee payment.

There are other facilities for payments including: Eftpos, Credit Card, Cash, Internet Banking – (please put your child's full name in the reference column so we can identify your payment)

- ★ BSB – 304 123
- ★ AC – 0526674

**Please pay TWO WEEKS IN ADVANCE on or before the first day of your child's attendance.
Your account must be two weeks in advance at all times.**



Health Issues

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The centre's Health and Safety Policy has been developed to protect both children and adults within the centre. It is essential that parents follow these guidelines, as a child who is unhealthy will take a longer period of time to get well if they are kept at the centre rather than at home.

Please don't feel that we are going to phone you at every sign of a "sniffle" etc., however if we feel your child is in need of medical attention or would benefit from being home or somewhere quiet, we will contact you to inform you of your child's condition.

We do understand that you have work and other commitments, therefore if you are unable to collect your child, please arrange for someone else to do so. Our staff are not qualified to diagnose your child's condition – they can only voice their concern and make suggestions, using their knowledge and experience working with children.

Symptoms of Illness The following symptoms will alert you to the fact that your child could be unwell –

- Unusual behaviour (your child is cranky or less active than usual, cries more than usual, feels general discomfort or just seems unwell)
- Feverish or clammy
- Breathing difficulties
- Loss of appetite
- Sore throat or has trouble swallowing
- Infected patches of skin (crusty or discharging)
- Severe, persistent or prolonged coughing (or goes red or blue in the face)
- Yellowish skin or whites of eyes
- Unusually dark or frequent passing of urine
- Grey or very pale faeces

Clearance Letter / Doctor's Certificate A clearance letter or a certificate from your child's doctor may be required if we have any doubt about your child's suitability to attend the centre. We are guided by the Queensland Health Department's minimum periods of exclusion for contagious or infectious diseases. If these indicators differ to that of your doctor then, in all cases, the Queensland Health Department's exclusion period will apply.



What To Do

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- Please complete your enrolment pack and return to us as soon as possible to ensure your child's placement.
- Please contact Centrelink to find out your CCB % + CRN's.
- Please make sure your child brings:
 - ★ Morning tea each day – a piece of fruit – vacation care
 - ★ A hat – wide brim or legionnaire
 - ★ A water bottle – vacation care
 - ★ Spare clothes (that can be kept on premises) – water play

Please ensure all items are named clearly.



Enrolment Form 2016

Creative Kids Outside School Hours Care
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Child's Full Name:		<input type="checkbox"/> Male	<input type="checkbox"/> Female
Child's CRN:	Child's DOB:		
Child's Nationality:	Language spoken at home:		
Address:			
Child's Doctor:	Doctor's Phone Number:		
Doctor's Address:			

Contacts	Parent / Guardian One	Parent / Guardian Two	Other
Full Name:			
Nationality:			
Language Spoken:			
CRN:			
Date of Birth:			
Home Address: or 'as above'			
Licence Number:			
Home Phone Number:			
Mobile Phone:			
Email Address:			
Place of Work:			
Work Phone Number:			

Attendance (days & times)	Monday	Tuesday	Wednesday	Thursday	Friday
Before School Care					
After School Care					
Vacation Care					

Date of first Attendance: _____ Age of Child at first Attendance: _____ years _____ months

Child Care Benefit Details

Have you contacted Centrelink on to: Apply for Child Care Benefit

Do you have other children attending different child care services? Yes No

If yes, how many children attend other services? ____ Please list their names: _____

How many hours a week do they attend the other service? _____

Emergency Contacts (Minimum ONE emergency contact required)

These contacts will be called to collect your child in case of emergency if OSHC Staff are unable to contact you (the parent / guardian). By placing the names on this list you understand that you are giving permission to OSHC Staff to release your child into the care of these people.

Full Name:		
Address:		
Contact Phone Number:		
Relationship to Child:		

Other Persons Authorised to Collect your Child

I give permission for the persons listed below and my emergency contacts to drop off and collect my child listed on this application. I further agree to keep Creative Kids OSHC updated in writing of any changes to these contacts. I understand that in keeping with the Child Care Act 2002 my child will not be released into the care of a person under the age of 18 years, any person not listed on this form as a parent, emergency contact or authorised collector. I understand that non custodial parents (as determined by a current court order only) will not be given access to the child/ren.

Full Name:		
Address:		
Contact Phone Number:		
Relationship to Child:		
Authority to Collect Child	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Further Information

Are your child's immunisations up to date? <small>A copy of your child's immunisation records needs to be provided to the centre and updated at all times.</small>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Photocopy	
Medicare Number:	If no, are you registered as a conscientious objector? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are there any court orders in place that affects your child? If yes, do we have a copy on file?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your child have any religious, cultural or personal beliefs that require consideration from our Centre?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please specify:
Does your child have any special needs in regards to their ability level that we should know about to provide them with the highest standard of care possible?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please specify:
Has your child ever suffered from a serious illness, injury or required hospitalisation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please specify:
Is your child currently taking any long-term medication?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please specify:
Is your child allergic to anything?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please specify:
What School is Your Child Attending?	<input type="checkbox"/> Southern Cross Kippa Ring <input type="checkbox"/> Southern Cross Woody Point <input type="checkbox"/> Southern Cross Scarborough <input type="checkbox"/> Clontarf State School <input type="checkbox"/> Hercules Road State School	<input type="checkbox"/> Humpybong State School <input type="checkbox"/> Kippa Ring State School/ACE <input type="checkbox"/> Grace Lutheran <input type="checkbox"/> Scarborough State School <input type="checkbox"/> Mueller College
Year Level in 2016	<input type="checkbox"/> Prep <input type="checkbox"/> Yr1 <input type="checkbox"/> Yr 2 <input type="checkbox"/> Yr3 <input type="checkbox"/> Yr4 <input type="checkbox"/> Yr5 <input type="checkbox"/> Yr6	

Enrolment Agreement

As part of enrolling my child at this centre, I / We the undersigned do hereby agree that:

I / We understand and accept that fees are payable two weeks in advance . An overdue account fee may be applied for outstanding fees. If sent to the debt collector an additional 20% of the outstanding account will be charged.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We understand that fees are payable for each day booked including any absences, public holidays and holidays...	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We understand that if fees are not paid my child's place at this centre could be jeopardised...	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We agree to abide by the Centre Policies as provided to us in the Parent Handbook...	<input type="checkbox"/> Yes <input type="checkbox"/> No

Communication: Please tell us how we can best communicate to you management information about the centre?

Newsletter Emailed Newsletter Noticeboard Facebook Other: _____

Parent / Guardian Signature:	Date:
Parent / Guardian Signature:	Date:
Witness Name & Signature:	Date:



2016 Authorities Form

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Child's Full Name:	Date:
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In order for OSHC to provide the best possible care for your child please complete the following:

Photos Authority... that my child can be photographed for use within the centre or on the Creative Kids Facebook Page.	<input type="checkbox"/> I agree	<input type="checkbox"/> I do not agree
Observation Authority... that students of Early Childhood may observe my child for training purposes. However, if questioning or testing of the child is to be undertaken I understand that my permission will be sought beforehand.	<input type="checkbox"/> I agree	<input type="checkbox"/> I do not agree
Programming Authority... that staff may use my child's name in the programming process including (but not limited to) what we did today sheets.	<input type="checkbox"/> I agree	<input type="checkbox"/> I do not agree
Paracetamol Authority... that one age-appropriate dose of Paracetamol may be given to my child in case of emergency pain or fever. I understand that every effort will be made to contact me beforehand. Paracetamol is recommended to be brought in by each family for emergency situations with a chemist label stating the date, name of child, name of medication and dosage as well as conditions of use.	<input type="checkbox"/> I agree	<input type="checkbox"/> I do not agree Current weight of your child: _____
Sunscreen Authority... that staff may apply 30+ sunscreen to my child before sun exposure.	<input type="checkbox"/> I agree	<input type="checkbox"/> I do not agree

Understandings
 Signing this form indicates your understanding of the following issues.

Contagious Illnesses... I understand that it is necessary to keep my child at home when suffering from a bad cold or other infectious or contagious illness for the period of time recommended by my doctor. Where medical attention has not been sought the period of exclusion will be at the discretion of the Director. In some cases a doctor's clearance will be required.
Emergency Action... I understand that although every care will be taken whilst my child is at the centre, in the event of an accident or illness requiring emergency medical, ambulance or hospital treatment, every effort will be made to contact me before such treatment is sought. However, should this prove impossible, I hereby authorise the Director (or her nominee) to seek emergency treatment for my child should it be considered necessary. I agree to meet all expenses in this regard.
Allowable absences from child care ... regulations state that absences must be recorded, whether sick days, holidays or occasional absent days. If a child uses more than the allowed number each financial year (see our director for more details) of a type of absence, Child Care Benefit cannot be claimed and full fees will apply to any further absences. I understand also that if my child is absent the centre must be notified before 10am on that day. Your child's attendance record should be completed for every booked day of care.
Child Care Assistance... it is the parent's responsibility to apply to Centrelink for Child Care Benefit and to advise them of the child care centre currently providing their children's care. If your eligibility for Child Care Benefit lapses you will be required to pay full fees for any care used.
Priority of Access to care... The Australian Government has established a set of <i>Priority of Access Guidelines</i> . Creative Kids follows these guidelines rigorously to maintain the right for parents using the centre to access Child Care Benefit. Our Coordinator will explain these priorities to you should it effect your access to child care.
Policies and Procedures... I have read and understood the enrolment and parent's handbook and agree to abide by the procedure and policies of the centre.
Code of Conduct for Adults... I have read and understood the <i>Code of Conduct for Adults</i> and agree to abide by its principles, practices and consequences outlined.

Parent's Signature/s:	Date:
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Transport Permission & Escort Form Local Excursion Consent

Creative Kids Outside School Hours Care
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Email: creativekidsoshc@bigpond.com

Current from: 26th January 2016 – 31st January 2017

I _____ hereby give permission for my child / ren _____

to be transported by bus under the supervision of Creative Kids OSHC Staff, for the purposes of:

- transport to and from Vacation Care Excursions
- transport for before and afterschool care to and from:

- Southern Cross Kippa Ring
- Southern Cross Woody Point
- Southern Cross Scarborough
- Clontarf State School
- Hercules Road State School

- Humpybong State School
- Kippa Ring State School/ACE
- Grace Lutheran
- Scarborough State School
- Mueller College

PLEASE NOTE: The Creative OSHC bus delivers children to and from school and prep. Because the run changes daily we are unable to outline the exact **route that the bus would take**. However, we endeavor to take the most direct route taking into consideration traffic hazards and obstructions. The schools that we transport to, and the staff (that transport them are licensed and able to drive the bus) are listed on the Parent's Notice Board. The **number of accompanying adults** complies with and is in accordance with the Child Care Regulations. **Transportation used** on excursions are the Creative Kids buses and a Church bus which are all equipped with seat belts and are worn at all times. **Departure from the centre** in the morning is at approx 8:00am and most children are at school by 8:45am. In the afternoon Hercules Rd and Humpybong are picked up from 2:30pm are usually back in the centre by 2:45pm. Other schools are picked up between 3:00pm and 3:15pm and return to the centre by approx 3:20pm. **Duration of bus trips** varies however is usually no longer than 45 minutes.

Local Excursion details:

Creative Kids endeavours to incorporate local community into our educational program. At times, we may conduct short walking excursions around our local area as appropriate to the educational program. The areas may also be utilised in the event of a practice Fire Drill. The areas that we may visit include:

1. Creative Kids Early Childhood Centre rooms and playgrounds (located at 195 Elizabeth Avenue Clontarf).
2. Citipointe Church Hall (located at 195 Elizabeth Avenue Clontarf)
3. Ray Frawley Fields (165-193 Elizabeth Avenue Clontarf)
4. Open grassed space directly outside Creative Kids Early Childhood Centre (behind Tiny Tots/Kindergarten playgrounds)

Our Risk Assessment Includes:

1. All Excursions outside our service are conducted within Excursion Ratios
Prep to Year 6 (4-12 years): 1 staff member to 8 children
2. At all times, the Lead Educator will have a mobile phone in order to contact the Service for support as required.
3. Excursions will only be conducted where they are incorporated within the Educational Program
4. A Risk Assessment will be conducted before each Local Excursion is conducted. A copy of the risk assessment is available from the office.

- I permit my child/ren to participate in Local Excursions as outlined above.
- I do not permit my child/ren to participate in Local Excursions as outlined above.
- I wish to complete individual Excursion Consents for each Local Excursion as outlined above.

Parent / Guardian Signature: _____

Date: _____

Contact Ph: _____

<i>Creative Kids Use Only</i>			
Before and After School Transport	<input type="checkbox"/> Yes	<input type="checkbox"/> No	School: _____
Vacation Care Transport	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Local Excursion Consent	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Individual Consent Required



Lead Educator Information

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 Email: creativekidsoshc@bigpond.com

Child's Full Name:	Date:
Child's Nickname (if any):	DOB:

Contacts	Parent One	Parent Two	Other
Full Name:			
Contact Number:			

Parent Perceptions	
How would you describe your child as he/she seems to you?	
I would be interested in giving some time to assist with special projects?	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have a special talent to share, play a musical instrument, speak another language, artistic talent, dance, can build, draft, sew, cook etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please specify:

Family Information	
Are there any court orders in place regarding your child? If so, who has legal custody?	
Have there been any changes in your family recently, which may affect your child? E.g., birth of a child, separation of parents, moving house...	
Are there any particular cultural or religious requirements regarding your child that we should be made aware of?	
How many children are in the family and where is your child within them? E.g., eldest, youngest, middle...	

Health	
Has your child had any serious illness, accidents or hospitalisation? Please specify at what age this occurred.	
Is your child under any medical treatment at the present time?	
Does your child suffer from any allergies, food intolerances or physical conditions?	
Have you observed any speech, hearing or co-ordination difficulties?	
If so, are there any special needs for your child's impairment?	

Lead Educator Information Continued

Social Experience	
Does your child have any specific fears? E.g., animals, loud noises...	
How do you think your child will react to starting at the centre?	

School and Extra Curricular Activities Information	
Briefly describe your child's experiences with school. E.g. enjoys school, is fearful of changes in school routine	
Do you require your child to complete their homework whilst at Creative Kids?	
Does your child participate in any Extra Curricular Activities (e.g. sport. Music)	
Does your child have any school friends who attend Creative Kids OSHC?	
Can your child swim?	<input type="checkbox"/> No – My child cannot swim and is not confident in water <input type="checkbox"/> Beginner – can tread water/dog paddle <input type="checkbox"/> Intermediate – able move confidently in water <input type="checkbox"/> Advanced – confident and skilled swimmer

Authorities	
On the authorities form you indicated whether you agreed or did not agree to some actions that may be taken by staff. Please repeat these indications below:	
Observation Authority	<input type="checkbox"/> I agree <input type="checkbox"/> I do not agree
Use of name in the programming process – this includes (but not limited to) what we did today, program, evaluations...	<input type="checkbox"/> I agree <input type="checkbox"/> I do not agree
Publicity Authority – this is for photos to be used within the centre and on the Creative Kids facebook page	<input type="checkbox"/> I agree <input type="checkbox"/> I do not agree
Paracetamol Authority (in case of emergency)	<input type="checkbox"/> I agree <input type="checkbox"/> I do not agree
Sunscreen Authority	<input type="checkbox"/> I agree <input type="checkbox"/> I do not agree

Thank you for taking the time to fill in this questionnaire.

This information is treated as confidential and will help our Group Leaders to plan more appropriately for your child's individual needs.



Child Profile

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Child's Full Name:	Date:
Child's Nickname (if any):	

Because each child is unique we would like to know what is special to you and your child to better help us understand your family in the early days of our association with you.	
My favorite things to do are...	
I really enjoy playing with my...	
My brother's and sister's names are...	
My best friend's names are...	
I have some pets at home. They are...	
I have special names for some of my family. They are...	
There is something else I would like you to know about me and that is...	



Menu Requirements & Allergies

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Child's Full Name:	Date:
Room:	

At Creative Kids Outside School Hours Care, we would like to provide your child with fun, interesting and nutritious meals. We realise that all children are unique and may not all like, or be able to eat the same foods. With this in mind, please list any foods your child is allergic to or not allowed to eat. Please also provide a short list of their likes and dislikes in their menus.

Allergies/Intolerances *	Not Allowed	Dislikes	Likes

Other Allergies *

* Where an allergy is indicated, a Medical Management Plan is required to be provided to Creative Kids, as per the Medical Conditions in Children Policy, prior to enrolment or as soon as a Medical Condition (including allergy or food intolerance) is identified.

Parent Signature:	Date:
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Code of Conduct for Adults – Information and Acknowledgement

- Adults (Parents, guardians, family members, community visitors)
This is a summary of the Creative Kids Codes of Conduct Policy (50.15)

Principles

- **Safety** – Staff and Adults must comply with all policies and procedures of Creative Kids.
- **Ethical Conduct** – Staff and Adults must always act in the best interests of the children and the Creative Kids community
- **Support** – Staff and Adults must work in a co-operative and positive manner
- **Communication** – Staff and Adults must be courteous and use acceptable verbal and non-verbal language. All Creative Kids community members, including children, must not use profane, insulting, harassing or otherwise offensive behaviour
- **Respect** – Staff and Adults will demonstrate respect for diversity and should refrain from all actions that constitute harassment or discrimination
- **Confidentiality** – Staff and Adults must comply with Creative Kids Confidentiality of Information Policy and respect the confidential nature of information gained, or behaviour observed, while participating in the program

Adults Code of Conduct

In Relation to Children at Creative Kids

- I will be a positive role model at all times
- I will treat all children with courtesy and respect
- I will always speak in an encouraging and positive manner
- I will refrain from any public criticism of a child at Creative Kids
- I will remain aware that any behaviour guidance of the children is the responsibility of Creative Kids Educators and Staff

In Relation to Other Adults (including Staff and Educators)

- I will be treat all adults with courtesy and respect
- I will regard all adults with respect and dignity
- I will always speak in respectful tones and use positive language
- I will support a welcoming and inclusive environment
- I will encourage and be engaged in open communication
- I will respect the decisions of Creative Kids Educators and Staff
- I will work collaboratively with Creative Kids Educators and Staff to resolve any issues that may arise
- I will follow the Creative Kids Grievances and Complaints Management Policy
- I will respect other people's privacy and confidentiality
- I will refrain from any public criticism of an adult or staff member at Creative Kids
- I will respect the property of Creative Kids and other people's property
- I will not threaten, abuse, bully or harass another adult, including educators and staff. This includes physically, psychologically or through online methods.

I hereby acknowledge that on(insert date), I received a copy of the *Codes of Conduct Policy (50.15)* for Creative Kids Outside School Hours Care.

I have read this policy, I understand its contents and I agree to abide by the principles, practices and consequences set out within.

I understand that the Approved Provider will address any breach of this policy, and that any serious breach could lead to legal or disciplinary action regarding ongoing enrolment at Creative Kids.

I understand that Creative Kids will keep a signed copy of this acknowledgement while my child is attending the service, and will be destroyed under the Records Management Policy when my child is no longer attending Creative Kids.

Name (please print)

Signature

Date



Multicultural Form

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We live within a multicultural society. It is therefore our aim to ensure everyone feels valued and supported. We begin this in the early years by encouraging children to accept diversity. Please assist us by taking the time to complete the below information.

Date:	
Child's Name:	
Country of Birth:	
Family's country of origin:	
Languages most often used at home:	
Can your child speak English?	
Can your child understand English?	
Would an interpreter be of benefit during the settling process?	
What language would you prefer centre information / pamphlets in?	
Would you be willing to share some information with the other children and staff at the centre regarding your country and culture?	
Would you be willing to display some crafts, arts, foods, stories that might give the children a better understanding of other cultures?	
Are there any activities that might take place at the centre that would conflict with your family's beliefs and values?	
What activities / events would you like to see incorporated to celebrate your culture?	
What discipline techniques do you use at home?	