



Education Standards Board

early childhood to senior schooling



Government of South Australia

Residual Early Childhood Services NOTIFICATION FORM Voluntary Surrender of Approval

- Voluntary surrender of **provider approval** (National Law s38)
- Voluntary surrender of **service approval** (National Law s86)

Before submitting this form, you must ensure you are familiar with the requirements and obligations set out under the Education and Care Services National Law (South Australia) as it applies to residual early childhood services and the Education and Early Childhood Services (Registration and Standards) Regulations 2011.

If you require further information or are unsure about the information required in this notification, it is important that you visit the website <http://www.esb.sa.gov.au/> or contact the Education and Early Childhood Services Registration and Standards Board for clarification.

You must ensure that the information you provide in this form is complete and correct. The provision of false or misleading information to the regulatory authority is an offence under the National Law.

Part A: Contact Details

Approved provider name:

Approved provider number:

Service trading name:

Service approval number:

Name and contact details for this form:

Title:	First Name:
Last Name:	Position:
Phone number:	Mobile number:
Email:	

Part D: Declaration

Who may sign?

- Individuals: the individual applicant/notifier
- Company: two directors of the company, or a director and company secretary
- Sole Proprietor: the sole director
- Incorporated association: the public officer and one other member of the management committee
- Cooperative: two directors of the cooperative, or a director and one other officer of the cooperative
- Partnership: a managing partner who is authorised to sign on behalf of the partnership
- Corporation: signed in accordance with the rules of the corporation
- Government school council: signed in accordance with the rules of the council.

I, _____ [insert full name of person signing the declaration]
of _____ [insert address],
am _____ [insert position/title (e.g. proprietor, director, partner, etc)].

and I am

- the approved provider of the service, or
- a person authorised to sign on the approved provider's behalf.

► **Note: please tick one box only**

I declare that:

1. The information provided in this form (including any attachments) is true, complete and correct
2. I have read, understood and agree to the conditions and the associated material contained in this form
3. I understand that the regulatory authority has the right (but is not obliged) to act in reliance upon the contents of this form, including its attachments
4. I have read and understood a provider's legal obligations under the Education and Care Services National Law
5. The regulatory authority is authorised to verify any information provided in this form
6. Some of the information provided in this form may be disclosed to the Commonwealth for the purposes of the Family Assistance Law and may be disclosed to other persons/authorities where authorised by the Education and Care Services National Law or other legislation, and
7. I am aware that under the Education and Care Services National Law penalties apply if false or misleading information is provided.

Signature of person making the declaration: _____

Signed at: _____ [address] on the _____ [date]

Please submit this form along with any required documentation to the regulatory authority.

Education and Early Childhood Services Registration
and Standards Board of South Australia
GPO Box 1811
ADELAIDE SA 5001

Enquiries to:

Email: educationstandardsboard@sa.gov.au

Phone: 1800 882 413 (toll free)

Fax: (08) 8226 1815

Website: <http://www.esb.sa.gov.au>