



*Motivated to learn, empowered to achieve*

Ottershaw Christ Church C of E Infant School Nursery  
 Fletcher Close  
 Ottershaw  
 Surrey  
 KT16 0JT  
 Telephone: 01932 873652

For Office Use Only
Date form received: .....
Birth Certificate checked: .....
Term of Admission: .....
30 Hrs / 15 hrs AM / PM

## Ottershaw Christ Church C of E Nursery Application Form

- Please note that completing this form does not guarantee a place.
- Please read the nursery admissions policy before completing this form.
- Please fill in the form in block capitals then sign it and return to the school office with a copy of your child's Birth Certificate.

CHILD'S DETAILS			
<b>Surname</b>		<b>Forename</b>	
<b>Middle Name(s)</b>		<b>Chosen Name</b>	
<b>Date of Birth</b>		<b>Gender</b>	Male / Female (delete one)
<b>Permanent Address</b> (this must be the child's normal place of residence and not a relative or carer's address)	<b>Postcode:</b>		

PARENT / GUARDIAN / CARER DETAILS				
<b>Title</b>		<b>First Name</b>		<b>Surname</b>
<b>Address</b> (if different from above)				
<b>Home Telephone</b>				
<b>Mobile</b>				
<b>Email Address</b>				
<b>Relationship to child</b>				
<b>Do you have parental responsibility for this child?</b>	<b>Yes / No</b>			

<b>CHILDREN IN PUBLIC CARE</b>	
Is the child in the care of the local authority?	Yes / No
If no, has the child previously been in the care and did they leave care through adoption, a child arrangements order or a special guardianship order?	Yes / No
If you have answered Yes to either of these questions, please give the name of the local authority and provide evidence with your form	

<b>MEDICAL OR SOCIAL NEEDS</b>	
Does the child have a medical or social need for a place at this nursery?	Yes / No
If yes please provide details	
Please continue on a separate sheet and provide independent evidence to support your case	

<b>SIBLINGS</b>	
Will the child have a sibling attending either Ottershaw C of E Nursery, Infant or Junior school at the time of admission?	Yes / No
If yes please confirm the name and date of birth of the sibling(s)	

<b>SESSIONS - All 3 and 4 year olds are eligible for the universal 15 hours a week of free early learning.</b> Children can be admitted to the nursery the term following their third birthday, subject to a space being available.	
<b>Universal 15 hours</b> Please indicate your session preference (this cannot be guaranteed)	5 x Morning sessions 9.00am - 12.00pm <input type="checkbox"/> 5 x Afternoon sessions 12.00pm - 3.00pm <input type="checkbox"/>
<b>Extended 30 hours</b> Please indicate if you think you may qualify, and wish to use the extended 30 hours of free early learning (this is on confirmation of receiving your eligibility code from HMRC)	Yes / No 5 x Morning and Afternoon sessions 9.00am – 3.00pm

Please list any previous nursery or playgroups your child has attended	
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I certify that the information given on this form is correct to the best of my knowledge. I understand that if I give any false or deliberately misleading information on this form and/or supporting documents, or withhold any relevant information, this may lead to the withdrawal of an offer of a nursery place for my child.

**Signature of parent/guardian/carer** ..... **Date**.....

**Personal Information** - We respect your rights and are committed to ensure that we protect your details and the information about your dealings with us. In accordance with the Data Protection Act 2018 and the General Data Protection Regulation (GDPR), we will use your information for the purpose of processing your application for a nursery place. For further information, please refer to our Data Protection Policy at [www.ottershawcofeschools.surrey.sch.uk](http://www.ottershawcofeschools.surrey.sch.uk)