



St. Sebastian's Nursery

Nine Mile Ride

Wokingham

RG40 3AT

Telephone: 01344 772427

E:Mail: admin@st-sebastians.wokingham.sch.uk

APPLICATION FOR ADMISSION for 2019-2020

DETAILS OF CHILD:

Surname: Forenames:

Date of Birth: Gender: Male
Female

Address:

.....

.....

..... Postcode:

NAME OF PARENT/CARER:

Title	Forename	Surname	Relationship to child	Daytime Tel. No.

Contact No:

E:mail:

ADMISSION CRITERIA

Please tick the box that is relevant to your application.

I am applying for my child to be admitted to St. Sebastian’s Nursery under the following Category of the Admissions Policy:

Children with an Education Health and Care Plan (EHCP) or a Statement of Special Educational Needs naming St. Sebastian’s Nursery

Category One: Looked-after children and children who were previously looked after, but ceased to be so because, immediately after being looked after they became subject to an adoption, child arrangements or special guardianship order.

Category Two: Children living in the ecclesiastical parish of St. Sebastian’s.

Category Three: Children who have a sibling on the roll of the school at the time of application or whose parent has accepted an offer of a place at the school and who is expected still to be in attendance at the time of entry to the school.

Category Four: Any other children whose parent wishes them to attend St. Sebastian’s Nursery.

Please state whether application is for 15 hours per week or 30 hours per week.....

PLEASE NOTE:

- If applying for 15 hours per week we cannot guarantee which session is offered. However, if you have a preference for either a morning or afternoon place, please set out the reasons in a separate letter and attach the letter to this form.
- Children who gain a place at the Nursery will **NOT** automatically gain a place at St. Sebastian’s C.E. Primary school.
- **The right is reserved to verify any of the information given on this form and to the entitlement to the number of free hours applied for.**

DECLARATION:

I have read the St. Sebastian’s Nursery Admissions Policy. I confirm that the information I have given is correct and that my child is entitled to free childcare in respect of the hours for which I have applied.

Signed:(Parent/Carer)

Date:

Pease return this form to St. Sebastian’s Church of England School office