



Nursery Application Form

Child's Name: _____

Child's permanent address: _____

Date of birth: _____ Male/Female (delete as appropriate)

Home telephone number: _____ Mobile _____

Email address _____

Please give details of other children in the household of school age or pre-school age. Information given is not an application for younger children in either nursery or full-time school.

<u>Name</u>	<u>Date of Birth</u>	<u>School if any</u>
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Please advise if your child has any special educational needs, requirements or disability. Or is your child a looked after child (in public care or previously in public care).

My child is entitled to Disability Access Fund (DAF) Yes/No please give details overleaf

Name of nursery/playgroup that your child currently attends _____

Please indicate whether you would prefer a morning, afternoon or full time 30 hours per week place. AM PM FULL TIME (please tick preferred choice) **Place is not guaranteed.**

Parents will be contacted February/March before your child is due to start in the following September to advise whether a place is available

I would be interested in a place in January if one became available Yes/No

- *Parents and guardians wishing to apply for their child's admission to a nursery class should complete this form and return to the school office.*
- *If your child is admitted to the nursery you must **not** assume that a place will be available in our reception year. This form is not an application for full-time schooling. If you have not already applied, you must do that separately on a PCAF form which is available in the school. Please ask now.*
- *This application is not a promise of admission to the nursery class. Other children may have a higher priority for the places as the admission policy requires.*

I have read this form and understand what it means. N.B. inaccurate or misleading information may lead to the withdrawal of the place.

Signed _____ Parent/guardian Date _____

Print Name _____