



Application form for Woodseats School – Nursery

Personal Details Of Child

Please complete in **BLOCK CAPITALS**

FIRST NAME/S: _____

SURNAME: _____

Date of Birth: _____ Sex M/F

HOME ADDRESS _____

_____ Postcode _____

Parental Responsibility

1) Mrs/Mr/Ms _____ Relationship to Child _____
(eg. Mother/father/foster parent)

2) Mrs/Mr/Ms _____ Relationship to Child _____
(eg. Mother/father/foster parent)

Child's Home Telephone Number _____

Mother's telephone number _____

Father's telephone number _____

Emergency telephone number/Name _____

Emergency telephone number/Name _____

Health

Doctor's Name _____ Telephone No. _____

Address _____

If your child has difficulties or you have concerns about any of the following, please tick and give additional information.



Hearing	Speech
Vision	Asthma
Epilepsy	Allergies

Free Early Learning Sessions:

- We offer flexible provision.
- We are open Monday to Thursday 8am to 5pm and Friday 8am to 4pm.
- We offer 15 hours Free Early Learning (FEL) sessions from 3 years old and 30 hours for those eligible.
- We aim to accommodate your requirements whenever possible and can negotiate the hour/times.

However if you would like to indicate below your preferred hours below that would be very helpful.

Previous schools/Nursery attended:

Preferred Nursery Sessions:

Is there a brother/sister at Woodseats School YES/NO

Name _____ Date of Birth _____

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