

Nursery Application Form

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Child's surname	
Child's first name	
Child's middle name(s)	
Child's date of birth	
Gender	
	Male / Female
Child's home address (this must be the child's normal place of residence and not a relative's or carer's address)	
	Postcode:

2. Children in public care

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Is the child in the care of a local authority?	Yes / No
If no, has the child previously been in care and did they leave care through adoption, a special guardianship order or a residence order?	Yes / No
If you have answered yes to either of these questions, please state the name of the local authority and provide evidence with your form	

3. 2 year old FEET funding (if applicable)

Is the child entitled to Free Early Education? (Please see FEET information Surrey County Council – Free Early Education and childcare for Two year olds (FEET)	Yes / No
FEET Application Number	

4. 3 & 4 year olds + 15 hours funding (effective September 2017) Will your child be eligible to 30 hours Yes / No of Free Early Education? If yes, will you want to take 30 hours Yes / No at Mytchett Nursery, if offered? 5. Social or medical needs Does the child have a social or Yes / No medical need for a place at this nursery? If yes please provide details Please continue on a separate sheet and provide independent evidence to support your case 6. Children of current forces families Yes / No Is the child in a current forces family? If yes please give details. 7. Children of staff at the school Is the child of a staff member at Yes / No school? If yes please confirm the name and role of parent. 8. Siblings Yes / No Will the child have a sibling attending the nursery or the main school at the time of admission? If yes please confirm the name and date of birth of the sibling

9. Ideal Start Date (15 and 30 hrs) & Preferred Session (15 hrs) Ideal start date..... Preferred session (please circle) A Monday, Tuesday 08:55 – 14:55, Wed 08:55-11:55 B Wed 12:25 - 15:25, Thursday, Friday 08:55 - 14:55 10. Parent/guardian/carer's details Title **First** Surname name Address (if different from child's address) Postcode: Telephone numbers: Day **Evening** Mobile **Email address**

Yes / No

Step parent

*Please add more

*Other relative

6. Declaration of parent/guardian/carer

Do you have parental responsibility for this child?

*Other contact

(please see notes on reverse of form)

Relationship to child:

Mother

Carer

П

details

I wish to apply for a place at the nursery school named overleaf. I certify that I am the person with parental responsibility for the child named in Section 1 and that the information given is true to the best of my knowledge and belief. 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. I understand that it is my responsibility to provide full information to the nursery and that I will notify them of any changes to the details on this form or accompanying evidence as soon as they occur, including any change of address.

Father

Social worker

Signature of parent/guardian/carer	_	Date		

Personal Information Policy - We respect your rights and are committed to ensuring that we protect your details and the information about your dealings with us. In accordance with General Data Protection Regulations of May 2018, we will use your information for the purpose of processing your application for a nursery place. We may share your information (but only the minimum amount of information necessary and only where it is lawful to do so) with the Council, other schools, central government departments, law enforcement agencies, statutory and judicial bodies, community service providers, contractors that process data on our behalf and medical advisors. We may also use and disclose information that does not identify individuals for research and strategic development purposes.