



GREAT HOLLANDS

PRIMARY SCHOOL

Nursery Application Form

Please complete this form in full and return it to the school office as soon as possible.

This application form is for our Nursery only, a separate application must be made via Bracknell Forest for a Primary School place.

Nursery Application Form

Please note that completion of this form does not guarantee a place in our Nursery. You will be notified if a place is available. After you have completed this form, please return it to the School Office.

Child's Details:

Surname:

(Block capitals please)

Male/Female *(please circle as appropriate)*

Forename(s):

D.O.B. (DD/MM/YYYY):/...../.....

(Original Birth Certificate must be shown)

Address: (If parents live separately, both addresses are required. Please see overleaf. Please indicate if you are carers.)

.....

Post Code:

Home Telephone No:

Email:

Mother's Surname:

First Name:

Father's Surname:

First Name:

Is your child attending any other pre-school establishment? (e.g. Nursery/Playgroup) Yes / No

If Yes, please give details:

Do you have any other children at Great Hollands Primary School?

Yes / No

If yes, please give details

Name:

D.O.B:

Name:

D.O.B:

Name:

D.O.B:

Name:

D.O.B:

If parents live separately, please complete the following:

Mother's Name:

Mother's Address:

Post Code: Telephone No:

Father's Name:

Father's Address:

Post Code: Telephone No:

If there are any court orders (e.g. joint custody) please give details and forward copies of paperwork.

Has your child's physical development been normal?

Yes / No

Is your child's hearing satisfactory?

Yes / No

If you have answered NO to either of the above questions, please give details below:

The school is required by law to take disability into account in relation to the admission process and the arrangements it makes for disabled pupils and potential pupils. This is so as to avoid any pupil being discriminated against on the grounds of disability in the allocation of school places or in the arrangements that are made within the school to provide for a child's disability.

Please ensure that the School Office is notified of any change in circumstances. Thank you.

Signed:
(Parent/Carer)

Date:/...../.....

Is your child Looked After by (in the care of) the Local Authority?

Yes / No

If YES, please name the Local Authority.....

Does your child currently receive Early Years Pupil Premium (EYPP)? Yes/No/Not sure

In order for the school to plan a programme for your child, it would be helpful if you could complete the following where necessary. You do not have to do so but it may help your child.

Does your child have special educational needs?

Yes / No

It may be helpful to consider whether your child has difficulty in any of these areas:

Communication, Learning, Behavioural, Emotional and Social Development, Physical Development

.....
.....
.....

If your child does have any difficulties in the above areas, please name any other agencies involved with your child.

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The school is required by law to take disability into account in relation to the nursery admission process and the arrangements it makes for disabled pupils and potential pupils. This is so to avoid any child being discriminated against on the grounds of their disability in the allocation of nursery places or in the arrangements that are made within the nursery to provide for a child's disability. If you think that your child has a disability, please give full details of the disability and attach any supporting documentation to this application form. This can then be considered when places at the nursery are allocated and, if your child is admitted, in the arrangements made within the nursery to provide for your child's disability.

I understand that I should consider informing the school if my child becomes disabled in the future.
I understand that the school's ability to make provision for my child's disability will be reduced if I do not inform the school of a disability.

The Authority reserves the right to verify the information given on this form. Any offer of a place will be on the basis that the information supplied is accurate and up to date.

I understand that I must make a separate application for a school place and that the offer of a place in this nursery does not give priority to an application that I may make for the school.

Signature of Parent/Carer: **Date:**

Personal information contained in this form is subject to GDPR. Data may be exchanged with other Local Education Authorities where necessary as part of the admissions process.

Sessions

Please can you tick to confirm the number of hours you require:

15 hours

30 hours