

## APPLICATION FOR NURSERY ADMISSION TO GASCOIGNE PRIMARY SCHOOL

This application form is for parents applying for a Nursery place at Gascoigne Primary school. Please return your completed form to the school or email a scanned copy to Mrs Buchner, EYFS Lead, at [abuchner@gascoigne.co.uk](mailto:abuchner@gascoigne.co.uk)

1. Child's details			
Child's first name		Child's last name	
Child's date of birth		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
		Language spoken at home:	
Home address			

2. Parents/Carers details			
1.Parent's name and surname:	Mr Mrs Ms Miss	2.Parent's name and surname:	Mr Mrs Ms Miss
Relationship to child		Relationship to child:	
Parent/carer 1:Phone number		Parent/carer 2: Phone number	
Is your child currently attending a nursery/playgroup/crèche? <b>Yes/ No</b> If yes, please provide nursery/playgroup/crèche name in the box on the right <input type="checkbox"/>			

Please tick here if you wish to apply for a Government funded 30 hour place ☐

Please note that some working parents will be eligible for a full-time place (30 hours per week). Parents who wish to be considered for a full-time place will need to check their eligibility before their child is due to start nursery.

This can be done online at [www.childcarechoices.gov.uk](http://www.childcarechoices.gov.uk).and applied for your funding? If you're eligible for 30 hours free childcare, you'll receive a 30 hours eligibility code, a unique 11-digit reference number. This code is important as you'll need it to claim your free childcare. Please fill in the code to in the box below as well as your National Insurance number and your date of birth to secure your free childcare place. We will check the code with the local authority and confirm your eligibility.

Your full  
name

11 digit  
code

NI Number

		-			-			-		
Parent's date of birth  / /										

Please tick here if you wish to apply for a Government funded 15 hour place

☐

(This is a universal entitlement for all 3 & 4 year olds and you do not have to check for eligibility.)  
Please indicate below, by ticking the boxes, how you would prefer your sessions to be allocated:

	Monday	Tuesday	Wednesday	Thursday	Friday
8:30-11:30					
Lunch time					
12:30-15:30					

If extra sessions were available would you be interested in purchasing any additional sessions (over your 15 hours entitlement?). The cost of these would be £20.00 per 3hour session. If yes please give details here:

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### 3.Other information required

Does your child have siblings attending at Gascoigne Primary school?  
Please write their names and classes/year groups below

1.	Year group:
2.	Year group:
3.	Year group:

Are there any developmental, health or physical needs (including disabilities) relating to your child that the school should know about? YES/NO	
If yes please provide/attach details.	
Is your child a Child in Care or subject to a Child Protection Plan (This includes all looked after children and children who were previously looked after, and are now subject to an adoption, residence, or special guardianship order.)	YES/NO
If yes, please give the name of the social worker allocated to the child:	
Signed:	
Print name:	
Date:	