



St Gregory's Catholic Primary School

Nursery Application Form

This is an application form for a place at St Gregory's Catholic Primary School nursery. Please note the nursery takes children from the age of 3 upwards from the term after their 3rd birthday. Terms begin in either September, January or April. Please complete all sections and return to the school office. The nursery will review applications per funding block/term and will get in touch with parents when places become available. If you secure a place, you will be asked to complete an admissions pack, provide appropriate documentation (including birth certificate, utilities bill and National Insurance number) and a 30 hours code (where appropriate) prior to your child starting at the setting.

Prior to starting, you and your child are welcome to attend our 'Stay and Play' sessions which we will invite you to via a letter in the post, once your child's place has been confirmed.

Hours

15 hours – Free care for three and four year olds. All parents and carers of 3 and 4 year old children are able to claim up to 570 hours a year (split over three funding blocks) of early education and childcare (Universal Childcare support). This can be taken during term time only, which equates to 15 hours a week for 38 weeks a year

30 hours – Some parents and carers may also be eligible to claim up to an additional 570 hours a year (split over 3 funding blocks) of funded early education and childcare – known as 30 hours. The additional hours can be claimed if you meet the eligibility criteria, please visit <https://www.gov.uk/30-hours-free-childcare?step-by-step-nav=f517cd57-3c18-4bb9-aa8b-1b907e279bf9> for details.

To apply please visit <https://www.gov.uk/apply-30-hours-free-childcare>

When would you like your child to start if a place is available? (✓)

September		January		April	
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Nursery Setting Hours/Attendance – please tick one option based on your requirement and early years funding

I would like my child to attend morning sessions (08:45 – 11:45)	
I would like my child to attend afternoon sessions (12:15-3:15)	
I would like my child to attend all day sessions (08:45-15:15).	
Please note that these places are limited.	
Please provide 30 Hour funding code:	
Please provide your National Insurance number:	

Child's Details

Legal Forename:	
Preferred Forename (complete if different to above):	
Middle Name(s):	
Legal Surname:	
Date of Birth (XX/XX/XXXX):	

Gender:	
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Previous School Details/ Sibling links

Name and address of the child's previous pre-school/nursery:	
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Name of any siblings who are pupils at St Gregory's Catholic Primary School:	
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Parent/Carer Details:

Name:	Title		First Name		Surname	
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Relationship to the child	
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Address	House/Flat Number:	
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Street Name:	
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District:	
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Town:	
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Postcode:	
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Mobile Number		Home Landline Number		Work Tel Number	
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Email address	
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Second Parent/Point of Contact Details or Emergency Contact
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Name:	Title		First Name		
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Relationship to the child	
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Address	House/Flat Number:	
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Street Name:	
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District:	
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Town:	
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Postcode:	
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Mobile Number		Home Landline Number	
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Email address	
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Medical Details

Support

Does your child have an Education, Health Care Plan (EHCP)? (v)	Yes		No	
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Will your child need additional support? (v)	Yes		No	
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Does your child have additional needs/SEN? If yes, please give further details:	
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Are there any outside agencies/professional support involved in respect of your child at this time? (v)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is your child a 'service child' in education? (v)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is your child subject to an adoption order? (v)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is your child currently in Local Authority Care? (v)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Has your child ever been in Local Authority Care? (v)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

First Language – the language which was communicated/used with the child until s/he is one year old.

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Ethnicity:

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Religion (If applicable):

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OFFICE USE ONLY

Date Application received:		Application Number:	
Admission Term and Date:		Parents informed of decision: DATE/METHOD	
Stay & play offered:			

People to collect:

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